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Health | Equity | Environment

Retrospective Study on Energy Efficiency in the UK George Morris, on behalf of Tim Taylor (UNEXE)



The INHERIT project (2016-2019), coordinated by EuroHealthNet, has received funding from the European Union's Horizon 2020 research and innovation programme under grant agreement No 667364

Background

- Based on recent work with Energy Saving Trust funded by EAGA charity
- This evaluated impact of energy efficiency in an ecological study of hospital episode statistics on cardiovascular disease, COPD and asthma.

Why examine energy efficiency in the UK?

- Potential “triple win”:
 - Health improvement anticipated (via warmer homes, reduced emissions)
 - Environmental improvement – carbon savings
 - Health equity gain as many measures targeted to social housing or to lower income groups

Methodology: Health impacts

Ecological study linking small-area, whole population data on housing energy efficiency and hospital admissions. Two streams:

=> Analysis at Lower-layer Super Output Area (LSOA) level for England.

=> Analysis of higher resolution postcode level data for one area of south west England (Devon).

HEED data (UK wide)

- Includes data on:
 - Loft insulation
 - Wall insulation
 - Glazing type
 - Draught proofing
 - Boiler replacement
 - Property age
- Count data on buildings with certain types of energy efficiency measures (used at LSOA level)

EST Home Analytics - Devon

- Similar household-level data available from the Energy Saving Trust Home Analytics (HA) Portal.
- Aggregated to postcode level

Selected initial results: Risk ratios associated with energy efficiency

Total 3 year admissions	Crude model			Fully adjusted model		
	RR	95% CI	p	RR	95% CI	p
Asthma						
Loft insulation ^a	1.011	[1.010,1.011]	<0.001	1.004	[1.004,1.005]	<0.001
Wall insulation ^b	1.006	[1.003,1.008]	<0.001	1.000	[0.998,1.002]	0.798
Full double/triple glazing ^c	1.001	[1.000,1.003]	0.115	0.999	[0.997,1.000]	0.128
Rate of draught proofing measures ^d	1.005	[1.004,1.005]	<0.001	1.000	[0.999,1.001]	0.814
Rate of boiler replacement measures ^e	1.027	[1.018,1.035]	<0.001	0.998	[0.994,1.002]	0.398
COPD						
Loft insulation ^a	1.012	[1.011,1.013]	<0.001	1.002	[1.001,1.003]	<0.001
Wall insulation ^b	1.008	[1.005,1.011]	<0.001	1.002	[0.999,1.004]	0.155
Full double/triple glazing ^c	1.004	[1.002,1.007]	0.001	0.999	[0.998,1.001]	0.476
Rate of draught proofing measures ^d	1.011	[1.010,1.012]	<0.001	1.002	[1.002,1.003]	<0.001
Rate of boiler replacement measures ^e	1.038	[1.028,1.048]	<0.001	0.992	[0.987,0.996]	0.001
CVD						
Loft insulation ^a	1.010	[1.010,1.011]	<0.001	1.004	[1.003,1.004]	<0.001
Wall insulation ^b	1.004	[1.002,1.006]	<0.001	0.999	[0.998,1.001]	0.356
Full double/triple glazing ^c	0.999	[0.998,1.000]	0.175	0.999	[0.998,1.000]	0.011
Rate of draught proofing measures ^d	1.003	[1.003,1.004]	<0.001	1.000	[1.000,1.001]	0.282
Rate of boiler replacement measures ^e	1.028	[1.020,1.036]	<0.001	1.000	[0.996,1.004]	0.935

Some measures positive, others negative...

Supports “sealing” hypothesis

Open question: Were these measures good or bad overall for health?

Costs and benefits

Investment costs -

O and M -

Externalities from energy use reduction +

Energy savings +

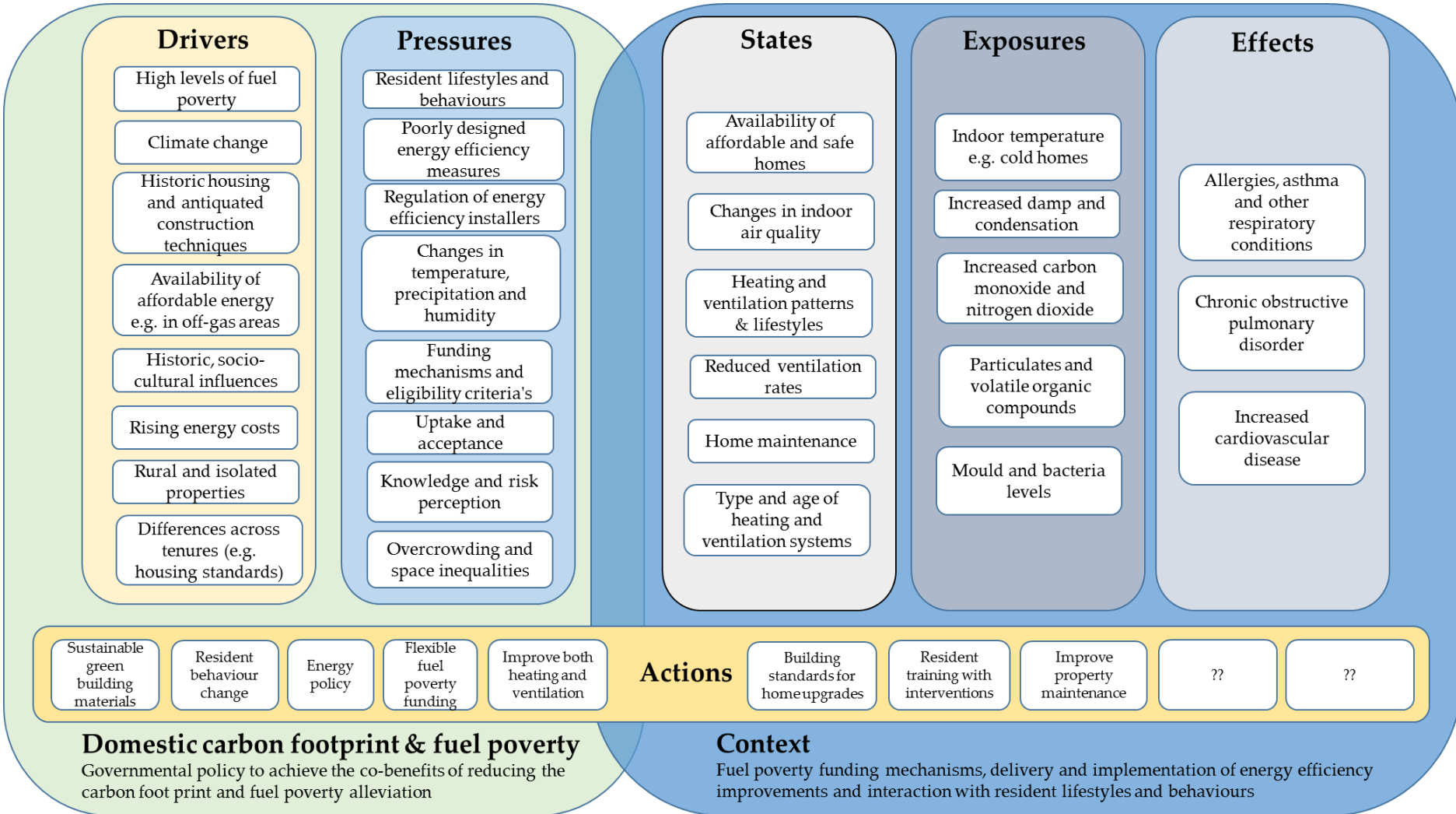
Health impacts +/-

Carbon benefits +

**Do the costs outweigh
the benefits?**

Watch this space....

Ultimately whole house solutions needed to ensure “triple wins”



Take home messages

- Energy efficiency measures *might* lead to triple wins if they were appropriately designed to avoid sealing and other risks.
- In terms of interventions in the recent past, the picture is not clear.
- Caution – this analysis based on ecological study.



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Thanks for listening

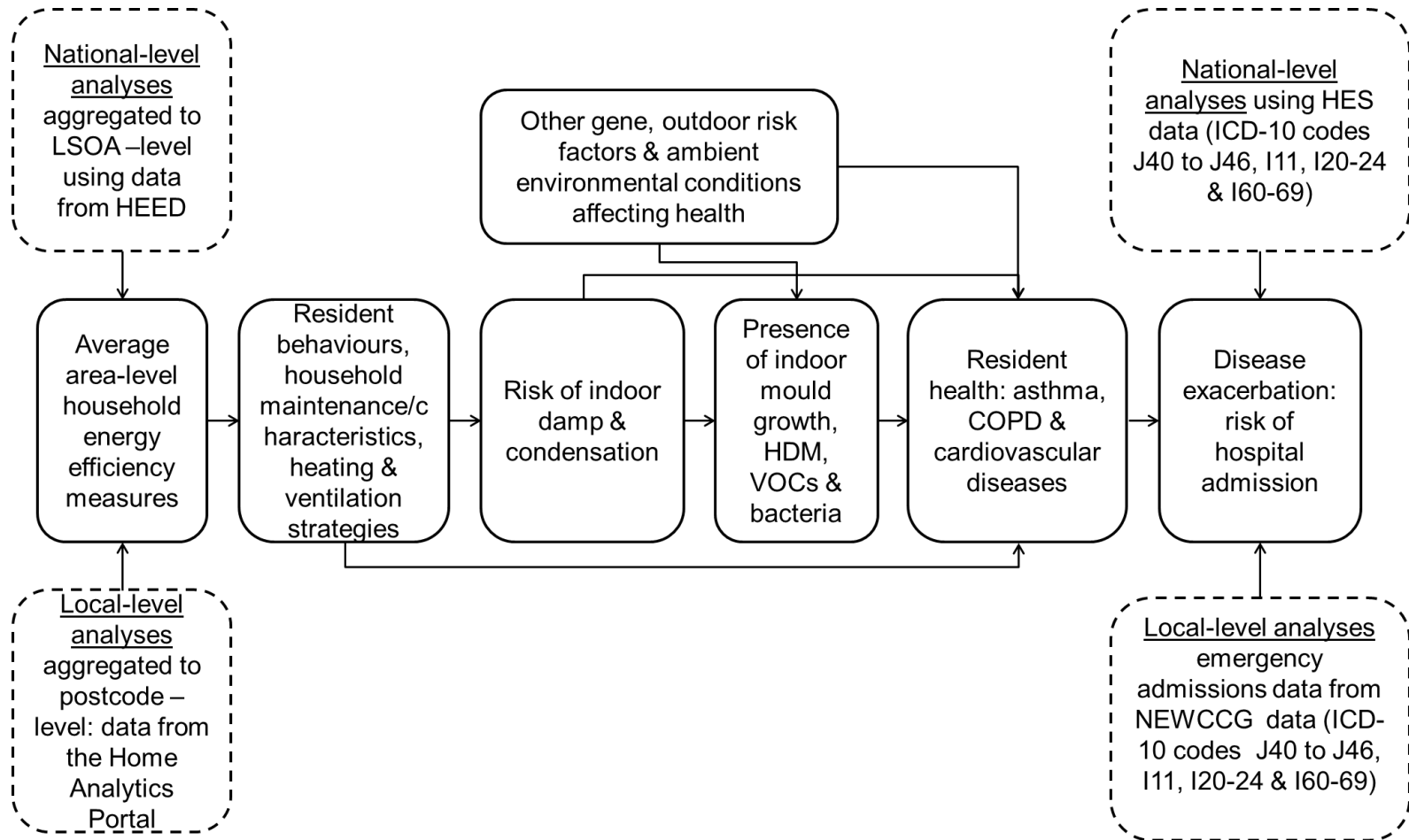
Thanks also to Richard Sharpe, Ben Wheeler, Ian Hutchcroft and other members of the team.



Possible extension...

- Net zero energy retrofit in Social Housing – Energiesprong UK
- Aims to retrofit social housing to a net zero energy standard (for example through insulation, renewable electricity and heat generation).
- It is a “whole house” aiming to deliver fully integrated net zero energy refurbishment packages, supported by long-term performance guarantees aiming to make the solution commercially financeable.

Conceptual model



Hospital admissions data

- Emergency (i.e. unplanned) inpatient admissions relating to the following outcomes were included in both analyses:
 - Asthma (ICD-10 codes J45 & J46)
 - Emphysema & chronic bronchitis, Chronic Obstructive Pulmonary Disease (COPD, ICD-10 J40-J44)
 - Cardiovascular Disease (CVD), comprising hypertensive heart disease (I11), acute stroke (I60-69) & ischemic heart disease (excluding chronic) (I20-24)