## Living well at the end-of-life:

# **Energy hardship**



#### The Real Cost of Cancer

Cancer has many costs. A diagnosis means households lose income. At the same time, day-to-day costs remain and additional expenses emerge, including for medication, personal care items and utility bills.1

Energy hardship occurs when households cannot afford energy use or access energy services.<sup>2</sup> Energy usage (and therefore costs) tend to increase in households where a person is nearing the end of their life.3

At the end of life, people can experience the cold more, clothes/ bedding must be washed more often, and some people rely on electronic medical devices. Living in a cold home adversely impacts physical health and mental wellbeing.4

Energy hardship affects quality of life for cancer patients with a life limiting diagnosis.

The Irish Cancer Society funded Dr Suzanne Denieffe (South East Technological University) and her team to examine energy hardship for people with a life limiting cancer diagnosis, receiving palliative care at home.5 The preliminary results outline the observations of palliative home care nurses who visit patients in their home.

## in households.

Nurses witnessed energy hardship

One in 3 nurses said they experienced patients' homes without heating. Half of the nurses reported evidence of financial hardship in homes they visited.

### Most nurses reported:

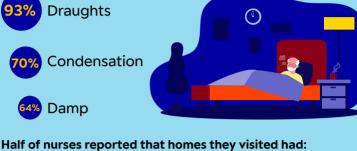


Draughts









Mould and No Central Heating System "Numerous people stay in bed "[...]one family didn't have fuel for

their stove for their loved one's

dying days.

turning on heating or lighting fire."

as it's warmer and cheaper than

#### end of life can be difficult Financial challenges were reported to 70% of the palliative care nurses surveyed:

Affording necessities at the

1 in 5 nurses reported households'

difficulty affording suitable food



2 in 3 nurses reported households'



difficulty affording home heating



in paying bills (e.g. utilities, mortgage, rent)

3 in 10 nurses reported households' difficulties in affording social activities

3 in 5 nurses reported households' difficulty



More than 1 in 4 nurses reported running medical equipment and an increase in energy costs/requirements



"I regularly visit elderly patients who have electric plug in heaters on 24/7 to heat the one room of the house they live in; fuel bills cause huge financial worry for a cohort of patients living off a pension or

sometimes family members paying their bills'

Nurses identified household problems, which could compromise health: **Physical** Mental Social

health



diagnosis:

health

67% "Patients are usually wrapped up in more blankets or using hot water bottles"



isolation

#### **Government** to support people to live well at the end-of-life

Across the country, cancer patients and their carers need additional and timely financial support at the end-of-life. The Irish Cancer Society calls on Government to provide the following to people living with a life-limiting cancer

- Automatic entitlement to the Household Benefits Package, the Fuel Allowance payment and the Additional Needs Payment to a person with a life-limiting cancer, waiving means-testing.
- Electricity credits for the remainder of a person's life to support with electricity costs.
- No charges for medical card holders and a reduction on the threshold for the Drugs Payment Scheme to at least €72 per month.

1. Irish Cancer Society and Kantar. (2019). "The Real Cost of Cancer." A files/2020-01/Real%20Cost%20of%20Cancer%202019%20report.pdf

Brabo-Catala, L., Cernic, A., Collins, E. & Barton, B. (2023). "The heat goes on: Simplifying the identification of energy hardship," Heliyon, 9(8), doi.org/10.1016/j.heliyon.2023.819087; Brabo-Catala, L., Collins, E. & Barton, B. (2023). "Fuel Poverty of Energy Hardship: Analysing the literature, the proposed official definition and the views of experts in Aotearoa New Zealand," Policy Quarterly, 18(4).

4. Marie Curie. (2023) Dr Martina Gooney, Dr Patricia Hunt, Dr Muireann Prendergast, Dr Pilar Luz Rodrigues (all South East echological University): Dr Mary Nevin (Dublin City University), Dr Mary Rabbitte (All Ireland Institute of sogice and Palliative Care), Dr Emer Brangna (Ill Ireland Institute of Hospice and Palliative Care), Dr Pet lay (King's College London), Dr Margaret Denny (University of Maribor) lrish Cancer Society