

Friday, Week 4: Our Future of Excess Winter Mortality: It's Cold out There!



Our Future of Excess Winter Mortality

Globally, we are locked into a [warmer and less predictable future](#) through our burning of fossil fuels.

Britain is also locked into [a future of an aging population](#) with all sorts of consequences.

One not so obvious consequence is an expected rise in excess winter mortality. Go figure.

In a future warmer world with an aging population we will see an increase in excess winter mortality. Interested? Read on.

But...a caveat first... The ONS calculates [“excess winter mortality”](#) as the mortality difference between the December-March period and the rest of the year, which in this context (climate warming and the future) is a bit rubbish. It also means that seasonal flu is tangled up in this, which is not directly related to the trends I’m talking about, it...’complicates’ things even more (another blog?).

Anyway, we extrapolated the results from [Hajat et al \(2007\)](#) to our patch across Dorset, Bournemouth and Poole using a model we built in an attempt to develop some shared-understanding of the future challenge this poses. We found that we will more than likely have to deal with increasing excess winter mortality for decades to come (discussed in a previous [blog](#) last year).

Not what you think when you start modelling the impact of cold and heat stresses on excess mortality in a future of global warming!

However, winter is not really responsible for excess winter mortality in Britain. Well sort of, but not really. If you have a look at the Hajat et al (2007) paper or our modelling work, you will see that 'excess cold mortality', as it more properly should be labelled happens throughout the spring and autumn and even during the summer occasionally.

AND the problem is really a combination of things including poverty, multi-morbidity and social isolation.

Poverty is a factor because some folks are so resource limited they may live in 'fuel poverty' ([2.55M households in the UK, 2016](#)), and more often people chose to conserve their resources by heating less and living in a home colder than they otherwise might do and not make repairs that would reduce drafts or improve insulation. They may live in very poor quality rental housing where they have very limited ability to improve their home warmth.

Multi-morbidity is a factor because 'excess cold mortality' primarily impacts the frail. It is a physiological stress that pushes vulnerable people, who are usually elderly, into a health crises.

Social isolation is a factor because without good social networks — good friends and close family — living in relatively close proximity those who are at risk from cold or heat stress induced death are unlikely to receive help.

People having a heart attack will often deny it to people coming to their aid — so what hope have neighbours and casual acquaintances have of convincing a vulnerable neighbour their home may be too cold? This is why everyone needs a 'good friend', preferably one who lives in close proximity. You need a trusting relationship if you want to break down the walls of social isolation and that takes time.

Revel in the complexity of population health.

It's Cold Out There!

Hey. It's still cold out there now — people are more aware of the dangers of cold stress right now. So when you are talking to your casual acquaintance you see often in the neighbourhood, but don't really know that well — mention that you recently read a blog about important factors in 'excess winter mortality'. Mention that it can happen anytime of

year.

And, make sure you tell them about how social isolation could be a problem, because we can do something about that.

This futures blog

This blog is about how we create 'healthy places' and what our possible 'futures' could be given current trends and momentum within society, the economic and political systems, and the environment. I use the plural 'futures' intentionally, because our future is not pre-determined (I hope), we can and should work towards the future we want. This blog aims to generate discussion (maybe even some debate) around 'Healthy places futures' in the hope that if we all put our minds to it, a collective vision may emerge, which would inform any strategy we might put in place to get us to our preferred future. We'll be leaning on heavily on futuring tools found on our Shaping Tomorrow hosted website: phd.shapingtomorrow.com.

The future is already here — it's just not very evenly distributed (William Gibson 1993).