The energy market and people with mental health problems

Report
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Executive summary

Context

Mental health problems affect the relationship between consumers and energy providers in a range of ways.

The purpose of this research was to develop understanding of a specific group of people for whom mental health problems have a direct impact on their relationship with essential service providers, including those in the energy sector. The issues this group experience may range from difficulty engaging with competitive markets and handling day-to-day customer service interactions, through to difficulty in effectively resolving ‘crises’ when they arise. By identifying the specific needs within this group, we have been able to outline some of the key policy implications.

The energy market is open to competition (with a range of available tariffs and a number of different suppliers on offer) and is therefore more challenging to navigate than other sectors (namely water and to some extent, financial services). There were a few participants who experienced problems with energy providers and ended up confused and worried about their payment schemes and bills. The risk of disconnection or service disruption is also a worry, particularly for those who struggle to pay bills or to keep money aside to purchase credit on prepayment meters.

Types of behaviour

This research has identified four qualitative ‘types’ of behaviour towards energy providers, and essential service providers more broadly, demonstrated by people with a range of mental health problems. These types do not represent different groups of people i.e. an individual may have experience of more than one of these behaviours, and some may arise at the same time. They are as follows:

- **Fluctuating management** – this is characterised by an inconsistent ability to effectively manage energy accounts, reflecting periods of better or worse mental health. During periods of good mental health, individuals who display this type of behaviour are usually able to stay on top of their account management. They are able to pay bills on time and engage with communications from providers. Issues may arise during periods of poor mental health. During such periods, individuals may find it difficult to keep on top of account management, resulting in missed payments and disengagement with providers.

- **Reluctant communication** – this is characterised by heightened levels of stress and anxiety around communicating with energy providers – be that in terms of account management or when trying to resolve a problem. This type of behaviour affects people with phobias and depression, as well as those with anxiety disorders.
It manifests in individuals putting off or avoiding communication with a provider, even when a quick call/email might be all that is required to sort something out.

Every individual has their own communication challenges. For many participants, speaking to a provider on the phone was particularly anxiety-inducing. There were also instances in which people struggled to leave the house or interact with others face-to-face. This caused problems if they needed to go out to purchase credit, for example, on their prepayment meter.

- **Volatile overspending** – this is characterised by periods in which individuals find it hard to control their spending, often spending large amounts in a very short amount of time. Those with bipolar disorder said they experienced this type of behaviour during manic episodes, during which they might be prone to spontaneous decision-making. Volatile overspending was also experienced by individuals with depression and anxiety disorders, who said they would spend money as a treat when feeling low. When this behaviour affected relationships with energy providers, we saw individuals struggling to budget – leading to indebtedness.

- **Change aversion** – this is characterised by a heightened need for stability, routine and continuity as a means to manage mental wellbeing. In relation to energy provision, problems arise for customers when they adopt a passive stance in relationships with providers, avoiding shopping around or switching and staying on poor tariffs. This is distinct from the usual aversion to change that many consumers exhibit and stems from a concern about the negative effect that change might have on an individual’s mental health.
Policy implications

The findings from this research point to a number of challenges that people with mental health problems experience in relation to their energy providers. These needs bring into focus a number of policy implications for energy companies:

Customers with mental health problems:

- Can go through periods in which they will totally disengage with their provider and accounts (and may not have informal support networks they can rely on for support during this time).
  - Energy providers should ensure that the most severe detriment to customers is avoided at these times. This means developing mechanisms that customers can put in place during periods of good mental health, which prevent serious problems arising (such as disconnection/self-disconnection or a build-up of arrears) during periods of poorer mental health.
  - Energy providers need to ensure that such mechanisms work just as well for people who don’t have close family/friends who can help. They should not just be open to people who have someone they can rely on to ‘step in’ when they are unwell.

- Can find it challenging to be proactive in their communications with energy providers even when the cost of inaction is high (and especially if they need to do so over the phone).
  - Energy providers need to put in place alternative and more effective ways of engaging with such customers to ensure problems with accounts are picked up and resolved in a timely manner. These methods should avoid adding to stress and anxiety around communication. This means:
    - Energy companies need to be more proactive in identifying problems and helping to resolve them, and not rely on customers themselves coming forward.
    - Providing a range of communication channels (including options that don’t require face-to-face or telephone communication) so that customers can select the method they are most comfortable with.

- May be unable to leave the house or interact with others during periods of poor mental health, leaving those with prepayment meters reliant on others to top up on their behalf or at risk of going with energy.
  - Energy providers must:
    - Consider whether prepayment remains a safe and practicable option for the household and put in place another payment scheme if more appropriate.

- Can struggle to engage effectively with competitive markets, especially when
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proactive switching is necessary in order to get the best package or deal.
  o Energy providers need to ensure people with mental health problems aren't financially disadvantaged as a result of their health issue. This means Energy Providers need to:
    ▪ Ensure customers are made aware of new tariffs/contracts and moved onto the most suitable package with minimum effort and disruption.
    ▪ Offer safeguard tariffs for those who are genuinely unable to engage with competitive markets due to a strong Change Aversion.

  • Can find it hard to engage effectively with competitive markets when exposed to more aggressive sales techniques. Such practices may lead to customers signing up to products/services that are unsuitable for them.
    o Energy providers need to put in place mechanisms to ensure that customers fully understand and consent to moving onto new tariffs or contracts.
    o Energy providers also need to make sure that it is easy for customers to change their tariff or product, if on reflection, they recognise they were not able to make a well-informed choice because of their mental health problem.

  • Can struggle to budget and control spending in other areas of their lives that end up impacting on energy accounts.
    o Companies in the energy market need to work with customers to help support them to manage their finances and to reduce the risk of disconnection by the provider or having to ration energy usage and ‘self-disconnect’.

  • Are not always able to find the ‘right moment’ to disclose their mental health problems to energy providers or are reluctant to do so due to concerns over data security, fear of being labelled and lack of clarity around benefits.
    o Energy providers need to inform customers of the potential value of disclosing their mental health status (i.e. by raising awareness and explaining the benefits of relevant discount and support schemes). Providers should inform customers how such information will be stored and used.

There is clear appetite for such changes among people with mental health problems. If done well, they would represent a step-change in energy provision for this audience.
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Background and objectives

Citizens Advice is a network of independent charities across the country that aims to provide the advice people need for the problems they face and improve the policies and practices that affect people's lives:

**At the individual level**, by offering free, independent, confidential and impartial advice to everyone on their rights and responsibilities through face-to-face, telephone and digital channels.

**At the national level**, by representing the best interests of consumers and using evidence to drive policy-making and market behaviour. This goes beyond traditional ‘influence’ to include statutory responsibilities and powers.

Citizens Advice’s own clients (i.e. visitors of local Citizens Advice offices and those who access its consumer helpline) represent a hugely valuable source of data about the challenges facing consumers across the country, as well as the groups in society which are most likely to be at risk of suffering from detriment. As identified by Citizens Advice, an increasing proportion of the consumers contacting the organisation for face-to-face support have a mental health issue. There has been a 9% increase in cases over the past year. Citizens Advice Scotland runs the Extra Help Unit, on behalf of Citizens Advice, which has statutory duties to resolve complaints on behalf of energy consumers in vulnerable situations. This includes a significant number of consumers with mental health issues.

This trend is more pronounced in relation to consumers seeking advice for consumer issues and particularly those relating to utilities and telecoms. Additionally, clients who report at least one mental health issue are more likely to experience multiple advice issues, and these issues tend to be particularly complex, with a higher likelihood that they will result in significant consumer detriment.

In response to these trends, Citizens Advice has embarked on a programme of research to better understand the experiences of consumers with a mental health problem (or multiple mental health problems) in relation to essential service markets. For the purposes of this research, these markets included energy, water, telecoms and financial services. This report focusses on findings specific to the energy sector.

To feed in to this programme, Citizens Advice commissioned BritainThinks to conduct primary research among consumers with one or more mental health problems in order to:

1. Build a holistic picture of the lived experience of consumers with mental health problems in relation to the four essential service markets, including energy.
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2. Understand how having a mental health problem impacts on consumers’ ability to engage with and manage their energy supplier.

3. Gauge the extent to which suppliers of energy are able to effectively support people with mental health problems.
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Methodology

BritainThinks conducted an extended research study with 48 people with mental health problems. They were asked to engage in three phases of research:

- An initial phase of 48 ethnographic interviews to gain an initial understanding of participants' lives and the role essential services play in their lives
- An extended online community over a 4-week period to follow their interactions with essential services, and delve deeper into their opinions of their providers
- A final phase of face-to-face or tele-depth interviews to reflect on participants’ experiences and deep dive on specific experiences with providers

| Phase 1: Ethnographic depth interviews | 48 face-to-face depth interviews | • Spread of type and severity of mental health problem
| | | • Conducted in home or another place of participant’s choosing
| | | • Designed to observe behaviours and role of essential services within participants lives
| Phase 2: Week-by-week tracking | 40 participants from phase 1 invited, 21 participants completed the weekly activities for the entire 4-week period | • Lasted 4 weeks, offered in both online and offline formats
| | | • Designed to track engagement with essential services and understand ongoing interactions
| | | • Included video elements, recorded with smartphone
| Phase 3: Reflective depth interviews | 5 filmed face-to-face interviews; 21 non-video interviews (carried over from phase 2) | • Filmed face-to-face interviews delivered case studies and reflected on key patterns and trends identified during phases 1-2
| | | • Non-video interviews conducted both face-to-face and via telephone reflected on key patterns and trends identified during phases 1-2

Key features of the research approach include:
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- **A longitudinal research approach**, in which participants were engaged over an extended period of time to build up a rich and holistic picture of their lives and where the essential service areas fit within this.

- **Using a combination of face-to-face and digital approaches** to bring together a combination of qualitative and ethnographic or observational research insights. To achieve this, all participants’ first extended contact was face-to-face rather than online and conducted in home to allow for observation of their home environment and key indicators of factors including budgeting and money management. Thereafter, engagement through the online community was designed to feel safe and positive, e.g. by having a dedicated point of contact to respond to each participant’s queries and assigning each participant the same moderator who conducted their initial depth interview throughout the programme.

- **A highly targeted sampling and recruitment approach** to include genuinely vulnerable consumers who are most at risk of consumer detriment as a result of a mental health problem (or multiple problems). More detail on this is outlined below in ‘Sampling’.

- **Flexibility throughout the research programme** to ensure that the needs and safety of the research participants were prioritised, particularly for those with more severe mental health problems.

**Sampling**

The research took a detailed sampling approach in order to build a holistic picture of customer experience, helping to understand the issues and barriers faced by consumers with mental health problems. The research included a broad range of individuals with mental health problems. Key criteria were set around mental health, general demographics and experiences with essential services. We also included a proportion of participants who had not received an official diagnosis of their mental health problem, to recognise the difficulties that many face engaging with health services or getting a diagnosis.

**Mental health**

- **Problems**: included a range of mental health problems, whether diagnosed or self-diagnosed/undiagnosed including anxiety disorders, depression, PTSD, phobias, SAD, nervous breakdown, OCD, panic attacks, eating disorders, bipolar disorder, personality disorders.

- **Severities**: included 27 people who say their mental health impacts their day-to-day activities ‘a lot’ and 21 people who say their mental health impacts their day-to-day activities ‘a little’.
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- **Clinical diagnosis:** 38 participants have received a clinical diagnosis. 10 participants have not been formally diagnosed by a medical professional.

**Demographics**

- **Gender:** 23 men and 25 women. 6 LGBTQ+.

- **Age:** 11 participants are aged 18-30 years old, 23 participants are aged 31-50 and 14 are aged 50+.

- **Employment status:** included a mixture of individuals in full-time work, in part-time work, not in work, with a weighting toward those not in work. Within this, we included individuals in temporary insecure work and those on zero-hour contracts, individuals claiming Universal Credit / out-of-work benefit, and a small number of individuals accessing sick pay.

- **Housing tenure:** included homeowners, people living in private rentals and social rentals.

- **Location:** participants were based across 8 regions across England, Scotland and Wales: London, Manchester, Birmingham, Nottingham, Somerset, Glasgow, Edinburgh and Cardiff, including 8 participants living in rural/semi-rural locations.

- **Ethnicity:** 10 participants were BAME.

**Essential services**

Our researchers explored issues relating to energy with all participants during the research.

- **Responsibility for managing bills:** all participants had responsibility for managing their household bills.

- **Problems with their essential service provider:** at the start of the study 24 people had experienced problems with essential services (more experienced issues during the study)

**Recruitment of research participants**

Tailored recruitment screeners were designed to enable identification of potential research participants and to manage the quotas that had been set.

We used our network of professional market research recruiters, which spans the UK. Recruiters deployed a combination of on-street recruitment, door-knocking, database recruitment and snowballing in order to recruit participants of the desired profile.
Chapter 1: The relationship between mental health problems and energy providers

1.1 The impact of mental health problems on relationships with energy providers

Mental health problems can have a major impact on consumers’ ability to engage effectively with competitive markets, keep on top of accounts and resolve issues (such as unexpected service disruption) as and when they arise.

Thirty-eight of the research participants had received a diagnosis from a medical professional and 10 had not. Those who had received a diagnosis, or multiple diagnoses, were more likely than those without a diagnosis to say their day-to-day lives were impacted ‘a lot’ by their mental health, and to have experienced problems with their essential service providers. For those without a diagnosis, their mental health tended not to be a significant factor in their relationships with their essential service providers. However, those who had experienced problems specifically with their energy provider were split relatively evenly, including a mix of those who said they are impacted ‘a lot’ and ‘a little’ by their mental health problems.

Overall, we saw more problems arising in participants’ relationships with telecoms companies and energy providers as compared to financial services and water companies. There was not, however, any particular pattern between the type of mental health problem and the overall quality of relationships with essential service providers.

Most people in our research were able to rely on friends and family to some degree to take on some of the responsibilities relating to their energy provider. This was often a partner, parent or grown up child living with them or living close by. For these individuals, having this support is often invaluable in mitigating against the impact that their mental health could have, especially when it came to issues of account management or problem resolution.

“When things go wrong I just try and deal with it as well as I can, or my mum phones them for me to sort things out if I can’t cope.”

Female, with depression and anxiety, Birmingham

However, there were also those in our research who were unable to rely on friends or family to the same degree. These were almost entirely people who were living alone or were the primary care-giver in the household. Such individuals were less supported in their relationships with energy providers and this often had a negative impact on their ability to manage their account and resolve problems effectively.
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“I've just moved here on my own recently whereas my husband used to run the whole house (...) It was quite difficult to understand forms and stuff like that at times, because of my depression – I just don’t want to. And I think drinking has slowed me down.”

Female, with depression, Glasgow

Types of behaviour

Analysing the types of issues that consumers with mental health problems were having with energy providers, four types of behaviour emerged.

The behaviours in each of these types do not relate to specific mental health problems. However, it may be the case that particular types of mental health problem are more likely to underpin behaviours in particular types. For example, those participants with bipolar disorder were more likely than those with phobias to display behaviour related to ‘volatile overspending’, but we also spoke to people with depression and with anxiety disorder who would fall into this category too.

Finally, it is worth noting that these types are not mutually exclusive, and individuals may display more behaviours that fall into more than one type at any one time.

1) Fluctuating Management

This is characterised by an inconsistent ability to effectively manage energy accounts, reflecting periods of better or worse mental health.

In our interviews, we heard from people who said their mental health could vary by day, week or month. There were those with depression who would go through very ‘low’ periods (lasting anything from a few days through to a few months) in which almost no activity or social interaction would take place. There were also those with problems such as bipolar disorder, anxiety disorders, phobias, eating disorders and OCD whose mental health was subject to fluctuation.

Poor mental health can manifest in different ways but was often characterised as a period of lethargy, negative thinking and worry, a return to negative habits, retreat from social interaction and/or inability to cope with many aspects of life which were previously possible to manage.

“I have been a bit depressed of late – I was put onto medication a while ago, but that seems to be better now. I have to be aware of it. I can get into old habits of being negative and worrying about things that are beyond my control.”

Male, with depression, Somerset

“If you go down, you don’t do anything: can’t cook, can’t clean, don’t wash, walk around the house or get into clothes. […] I’ll drink, feel suicidal, all that. I get paranoia. And when I’m on

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"a high, nothing can touch me: I'm happier than anyone in the world – I'll clean everywhere, probably clean at 2-3am in the morning."
Female, with bipolar disorder, Birmingham

Individuals whose mental health fluctuated significantly were, for the most part, able to stay on top of their energy accounts, during periods of good mental health. However, issues would arise during periods of poor mental health, in which individuals found the effort of keeping on top of things (energy services included) simply too great.

Issues relating to fluctuating management could be seen to affect all the key aspects of relationships with providers:

- **Choice of product / tariff:** fluctuating management could be seen to have an impact on an individual’s ability to find, select or switch to the most competitive tariff.

  “I can’t be bothered [to consider switching] to be honest. It’s too much work and thinking, and I think it would probably be a complicated and stressful process, which I really don’t need right now.”
Female, with depression and anxiety, Cardiff

If a period of poor mental health coincides with the need to set up a new energy account (e.g. when moving to a new house or when an existing deal comes to an end) it simply may not be possible for that person to be proactive and fully engaged in securing the best deal for themselves. For instance, poor mental health may make it difficult for the person to spend the time and energy comparing offers or reading the small print in contracts. In the case of introductory offers ending and less favourable terms ‘kicking in’ (e.g. a discount being removed after a set time period) Fluctuating Managers are potentially more vulnerable to being ‘caught out’ if it coincides with a period of poor mental health.

“Well it starts off easy, there are the usual price comparison websites. The problem is they all give you a cheap price to start, but then after a few months they see what you are using, and the price goes up to roughly what you were paying before.”
Male, with phobia, SAD and depression, London

- **Account management:** the impact of fluctuating management is perhaps greatest in ongoing account management. During a period of poor mental health Fluctuating Managers are considerably less likely than they usually would be to engage with and process bills for payment.

  “The challenges for me [when in a depressive state] are my concentration to start with… I find it really hard to concentrate on things and to stick at doing something… I tend to bury my head in the sand to be honest.”
Female, with depression, Cardiff

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In addition, at any point in which the customer is required to take action, respond promptly to a request or take a proactive stance, there is a risk that a period of poor mental health may prevent them from doing so. In our research we heard examples of people missing bill payments, failing to act on billing queries or struggling to make it out of the house to top up prepayment meters.

- **Problem resolution:** fluctuating management may also have an impact on consumers’ ability to work effectively with their energy provider to quickly resolve a problem, resulting in (even relatively small) issues persisting or getting worse. This could be a problem originating with the customer e.g. a one-off missed payment that pushes them into debt or leads them to be cut off. Or, it could also be a problem originating with the energy provider, e.g. a direct debit being taken incorrectly, or power outage that consumers struggle to get fixed.

It is also worth noting that in addition to the above ways in which fluctuating management can impact on relationships with energy providers, the stress and frustration of dealing with these companies can in itself worsen and prolong poor mental health. For example, struggling to get back on top of bill payments can induce anxiety and depression for some people. Similarly, difficulty in reinstating service provision after having been cut off can be extremely upsetting and disruptive to someone with a mental health problem.

“I’m not very resilient to deal with problems and frustration due to my mental health so I can get stressed and angry quite easily. Then when [my mental health] drops I have an energy crash and feel wiped out. If I’m already feeling down I’m not very good at being patient when things go wrong or if I’m waiting for somebody to get back to me as it will play on my mind a lot until it is resolved – that’s due to my anxiety.”

Male, with depression and anxiety, London

“When you do feel anxious and depressed, the smallest thing can set you off, and speaking to someone who doesn’t seem to care can be very upsetting.”

Female, with depression, Somerset

2) **Reluctant Communication**

This type covers a set of behaviours that relate to an individual with mental health problems struggling to communicate effectively or in a timely manner with their energy provider.

Reluctant Communicators described heightened feelings of stress related to interactions with energy providers. Individuals experiencing, for example, anxiety disorders, depression and/or phobia said they struggled in particular with phone calls with energy companies. They reported putting off making phone calls, ignoring incoming calls, and/or asking a friend or family member to speak on their behalf. For many, this is driven by concern about what the staff member at the other end of the line may think of them.
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“Sometimes I get nervous of who I talk to and start to stutter, and then I think that they think I'm stupid.”
Female, with depression, Birmingham

If they do manage to make phone calls, their anxiety levels may mean they leave the conversation feeling muddled and unclear as to what they have just been told, what they have agreed to verbally, and/or what action they need to take next.

Anxiety about interactions over the phone can be worsened by unsympathetic staff at the end of the line or long waits to speak to someone. Individuals can think about negative interactions with energy providers for days. They may be unable to take the necessary actions required to start to rectify the situation such as making a call to another department or writing a formal complaint.

“When I'm on a low, I sometimes just cannot move from my bed and the last thing I want to do is talk on the phone. It would be more helpful for me if I could text or sort it out online if I had an issue with a provider.”
Male, with bipolar disorder, London

Some Reluctant Communicators described how their mental health problem may prevent them from leaving the house at certain periods, or how it might make social interactions quite challenging. This meant they can struggle when they are required to leave the house and interact with others in order to access services e.g. purchasing credit for prepayment meters from a nearby shop.

“I've been in a right mess. […] I've been sat with no gas in my house because I've not been able to get somebody to go to the shop for me.”
Female, with depression and anxiety, Nottingham

Issues relating to reluctant communication could be seen to affect all the key aspects of relationships with energy providers:

- **Choice of product / tariff:** when it comes to making sure they’re on the best deal for their circumstances, Reluctant Communicators in our research often missed out. Their aversion to telephone contact often meant, for example, that customers put it off completely, or struggled during interactions to query the terms of a new tariff they had or to cancel an unfavourable contract.
  In regard to switching provider their mental health problems caused them to worry hugely about the need for interaction over the phone. This operates as a powerful disincentive to switch.

  They may also have an accentuated concern about the perceived potential for the process to go wrong due to attempts by their energy provider to negotiate – many Reluctant Communicators fear they will ‘mess up’ the process or feel forced into accepting a deal that they are not sure is right for them.
There can also be particular issues with sales techniques that rely on persuasive communications – such as door-to-door selling and cold-calling. Reluctant Communicators were vulnerable to such approaches and at least two in our research reported agreeing to a new arrangement in these situations which they later regretted or did not think was right for them.

“The energy provider we’re with was actually a salesman at the door, who promised us all this that and the other…He caught me out, and he caught me at a moment – I was having a particularly vulnerable time – and I got roped in to changing energy providers and I should’ve just stayed with [my previous energy provider]. We had the smart meter installed and higher emergency credit, and low costs. As time has gone on, whereas before with our previous meter we put £20 a week on we’re now putting £50 a week on. And when we have asked them about it, they’ve said that’s the rate it is”

Female, with depression and anxiety, Somerset

- **Account management:** as long as accounts are set up and running, without needing any action on the part of customers, few problems arise for Reluctant Communicators. However, it is clearly not the case that accounts can indefinitely be managed in such a way. When an issue therefore does arise, Reluctant Communicators are disadvantaged by their tendency to remain passive and avoid reaching out to their energy provider. Putting off such interactions can then lead to further problems with service interruption and/or debts accruing on their account.

- **Problem resolution:** when faced with a specific problem, Reluctant Communicators are likely to take much longer to notify their provider or execute a plan to deal with it – even if the stakes of inaction are quite high.

3) **Volatile Overspending**

This type refers to customers whose mental health problems make them prone to poor budgeting and financial management. In particular, some participants described how they struggled to keep their spending under control.

Of the eight participants with bipolar disorder, the majority recognised that their financial habits and outlook are closely aligned with phases of mania and low mood. When in an elevated mood, around half of those with bipolar disorder said they were at risk of spending large amounts of money over a very short period of time and with little consideration of the consequences. Similarly, overspending can be used as a coping mechanism by people experiencing depression and/or anxiety who said they might use spending as a temporary fix for their low mood.

“I’ll buy like 10 of the same thing, different colours…especially when I’m on a high…it just gives me a lot of pleasure doing things like that…I can’t control myself, especially now with
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these smartphones and internet shopping. It’s really, really taking its toll, especially with my finances…I’ve had so much credit that I thought I could afford.”
Female, with bipolar disorder, Nottingham

“Sometimes if you’re really low and depressed, and you think, ‘Yeah, I deserve to spend this money’, you can use the mental health as a kind of tool to tell yourself why you can spend the money.”
Female, with depression, Somerset

This behaviour often had a knock-on effect on relationships with essential service providers in the energy sector, as customers found their volatile overspending put pressure on their other financial commitments.

“When I get my salary, I live beyond my means. I’ll get takeaways to make myself feel better… Mum took my debit card off me, as I was just spending and not paying my bills. I’d get letters [bills] coming through and mum would come around and ask why I wasn’t opening them.”
Female, with depression and anxiety, Manchester

Issues relating to volatile overspending could be seen to affect all the key aspects of relationships with providers:

- **Choice of product / tariff:** primarily, Volatile Overspenders are vulnerable at certain times to sales techniques that do not ensure the suitability or affordability of the product/tariff for the customer. This means they are more likely to sign up to inappropriate tariffs that they are unable to pay for in the longer term. (Furthermore, if the individual is also a Reluctant Communicator, it is entirely possible that they may stay locked in to such contracts for their duration).

- **Account management:** as long as Volatile Overspenders are able to meet their financial commitments, management of their energy accounts is not an issue. However, if finances are overstretched in one month, this can then lead to them missing bill payments and accrue debt or fall behind on repayment plans.

  “When dealing with general admin tasks, like paperwork, if I get bills that come in or payments that are overdue…I’ll put it off and put it off, until it comes to the stage where it’s really going to be serious if I don’t do something about it, then I do something about it because I think the consequences of leaving it will be more severe than the discomfort I’m experiencing trying to make myself deal with this thing.”
Male, with depression and PTSD, Nottingham

- **Problem resolution:** the problems that Volatile Overspenders encounter are, by definition, financial in nature and may be very hard to resolve. Even with repayment plans for debt in place they may struggle to budget and control their spending. Around a
quarter of the participants have a history of volatile overspending and may find it difficult to stay out of their overdraft or remain out of negative spirals of debt. They often have experience of being chased by their providers or debt collectors for unpaid bills.

4) Change Aversion

This type covers those people whose mental health problems mean that they place great value on stability in their day-to-day lives. The predictability of daily/monthly routines was felt to be an important factor in maintaining mental wellbeing and unexpected change was seen as disruptive and unbalancing.

“I get really annoyed when change happens. If there is a routine, there is a set routine I follow. Little ups and downs I can manage, but when it’s completely different it just affects me, and then my moods can swing – and then I get very angry, then that anger comes out when I’m teaching or in my day-to-day functioning or maybe in the house.”

Male, with anxiety and depression, Nottingham

This outlook applies to energy services as much as any other aspect of daily life. This aversion to change seemed to operate as a powerful and often dominant driver of behaviour, regardless of the benefit that could result from making a change. Not only did such individuals tend therefore to avoid instigating change themselves, they also struggled when change was unexpectedly thrust upon them.

“I tend to stick with the providers I know, or which already come with the house. I haven’t had issues for now, so I would be scared to switch and then end up paying more or something.”

Female, with depression, Glasgow

The impact of change aversion is perhaps most significant when it comes to the decreased likelihood of switching to a more favourable tariff:

- **Choice of product / tariff**: the importance of stability can make these people particularly reticent to even engage with the idea of shopping around and switching tariffs or providers. For them, stability is more important than getting the very best deal, which may well leave them paying over the odds or in the worst-case scenario contribute to their financial problems.

- **Account management**: change aversion also has an effect on ongoing account management. If there are any changes made to the terms of the contract or the way in which customers are required to manage their accounts, these individuals will struggle to get to grips with these and are likely to find the process very stressful and disruptive.

- **Problem resolution**: Any problem with actual service delivery e.g. a disruption to supply, is likely to have quite a negative impact on an individual’s mental health. Those
who are averse to change describe being thrown ‘out of kilter’ by such incidents and how this can prolong or aggravate a period of poor mental health.

1.2 The impact of other factors on relationships with energy providers

Mental health problems frequently exist alongside other issues and dynamics in people’s lives. In our research we saw that beyond mental health problems, the factors that were most likely to have a significant impact on relationships with energy providers were those which left people either financially insecure or socially isolated. These included: unemployment, caring responsibilities, low or fluctuating income, physical health problems, difficulties accessing benefits, family breakdown and living alone.

Mental health problems greatly affect and are affected by these other factors. For example, there is often a cumulative effect when a person faces multiple challenges including mental health problems, where an individual’s ability to cope may be compromised further than if each issue existed in isolation.

From a research perspective, it is sometimes difficult to distinguish between experiences explicitly linked to an individual’s mental health and challenges which are part of their broader life circumstances. The following case studies illustrate the interconnected nature of mental health problems and other challenges in people’s lives. They also demonstrate how these factors work together to generate problems in how people are able to manage their relationships with essential service providers.

Nathan lives in London with his girlfriend and their 2-year-old child. His experiences illustrate the interconnectedness of issues with unemployment and access to benefits, and relationships with an energy provider.

Nathan, with anxiety, depression, PTSD and anger management issues, London

Nathan lives with multiple mental and physical conditions and currently struggles to deal with these, so much so that he has had to quit his job as a security guard.

He has ongoing problems accessing Personal Independence Payments (PIP) and Universal Credit. His claim for PIP was initially rejected but he feels he is unable to work due to his physical and mental health conditions and is currently going through tribunal proceedings to try to access the benefit. This is taking a toll on his mental health and his finances. He is living on a significantly reduced budget compared to when he was working.

As he has become more frustrated with the ongoing negotiations around his benefits, Nathan’s anger management issues have worsened. He has become increasingly
frustrated with everyday tasks, including dealing with his energy provider. As a result, his partner is gradually taking on more responsibilities in the household including taking a lead in interactions with their energy provider, as they split the bill.

“Every time…I have a bad experience, it makes it a little bit harder for me to pick up the phone the next month.”

“My partner is having to take on more and more. Some days I can handle going out, other days there’ll be no chance I leave the house.”

Ralph lives in Somerset with his wife. His experiences illustrate how being in insecure work can impact relationships with an energy provider.

Ralph, with depression, Somerset

Ralph has had a diagnosis of depression since his teens (he is now in his early 40s). His depression has fluctuated over the years but currently affects his day-to-day life “a little”. He is working as a freelance website developer as well as a labourer on an ad-hoc basis. He describes his working situation as “precarious” at the moment, and he finds it stressful that his income varies so much month-to-month.

He feels that he generally manages his energy account well but recently experienced an issue with the credit in his account. He tried to change when he makes his monthly payments to better align with when he can expect to be paid from the short-term contracts they work on. However, during this interaction Ralph was misled about the ‘credit’ in his account (which is actually used to cover higher usage in winter months) and withdrew it, needing the money to cover other bills. However, it meant he had to pay this back into the account which increases their bills. This adds to his anxiety about covering all his bills each month.

He does not think his energy provider is aware of his mental health but would share information if there were clear benefits to doing so and disclosure was part of ‘everyday’ processes.

“We were re-jigging monthly payments and we were in lots of credit, and they failed to tell us that the credit was basically what’s left over. So, you build up credit during the summer, which you then eat into over the winter. They didn’t explain that to me, so we took that all out as credit, and then obviously our monthly payments went up to account for the shortfalls. That really could’ve been handled a bit better.”
Chapter 2: Experiences with energy providers

The quality of the relationships that people with mental health problems have with their energy provider, as well as their other essential service providers, is driven by two key factors relating to the underlying structure of the market:

- Perceptions of competition in the sector and ability to select the most appropriate product/tariff
- The risk of disconnection / forced cessation of service

In comparison to other sectors, participants viewed their relationship with energy providers as being somewhat problematic, although not to the same extent as their relationship with telecoms companies. In contrast, relationships with water companies were viewed as the least problematic.

The diagram below outlines how the four markets we looked at in this research ranked according to these two factors:

Most participants in the research had a broadly good relationship with their energy provider and had been able to manage their accounts sufficiently well. However, there were some more serious problems that had developed for a small number of participants, as people had struggled to engage effectively with the competitive energy market or to keep up with payments. There were also some issues with billing and accessing discount schemes that a few participants had experienced.

**Competitive market issues**

There was broad awareness of the variety and complexity of different tariffs and packages available in the energy market, which could cause worry about whether an individual was on
the most suitable deal. Navigating the market is seen as challenging, with Reluctant Communicators and those with Change Aversion at risk of ending up on inappropriate tariffs and paying above the odds. When shopping around, tariffs were felt to be hard to compare, even with the aid of comparison websites. For anyone in our research who had experience of fluctuating management, being able to actively shop around and compare the merits of complex deals during periods of poor mental health was seen as highly unlikely. There were also specific concerns and confusion around prepayment meters and smart meters, with a few people stating they were unsure whether these would be beneficial to them or not. For those on low incomes in particular, it was unclear as to whether a prepayment meter would actually be cheaper.

“It would be better if all the providers were only allowed to offer 4-5 tariffs, so that it would be easier to compare and find the best deal. They seem to make it deliberately confusing so that most people give up. It made me a bit angry.”

Male, with depression, London

In periods of worsened mental health, Fluctuating Managers may feel more vulnerable to persuasive sales techniques, in which a new energy arrangement is suggested. They may feel unable to engage with the details of their proposed new tariff and are at risk at these times, of agreeing to a tariff that might not be appropriate for them. Reluctant Communicators are less able to query tariffs they don’t understand or feel are unsuitable for them, and may struggle with conversations to attempt to negotiate a better tariff. There were two examples in our research where salespeople had encouraged customers to change either their provider or their tariff and had felt that they had ended up worse off – both in a financial sense and with regards to their mental wellbeing.

The following two case studies illustrate how energy providers do not always explain their tariffs and prepayment schemes sufficiently to vulnerable customers. They also demonstrate the need for energy providers to ensure their sales techniques do not put people with mental health problems at risk of ending up on an unsuitable energy scheme:

Janet lives in Somerset with her husband and 3 teenage sons. Janet’s experiences illustrate how pushy sales techniques can lead to customers being on an unsuitable tariff, and how for Reluctant Communicators in particular, it can be difficult to try to rectify this.

Janet, with depression and anxiety, Somerset

Janet is currently struggling to manage anxiety and depression, as well as other health problems. She is unable to work at present due to both her mental health and her physical health. She often struggles to leave the house.

She is currently receiving ESA – and as a family they struggle to live on this and her
husband’s income.

A doorstep salesman came to her house and advised her she switch tariff to reduce her spending on energy.

She was initially happy with the change but has since found that as a household they are spending much more on energy than they were previously. She also struggles to leave the house to make top-ups, so often relies on her husband to do this.

Despite disliking communication over the phone, Janet has been in touch with the energy provider to query how much they are spending but has been frustrated with their response. She reported that they were unable to offer any help, and suggested she manage her usage better.

“As time has gone on, whereas before with our previous meter we put £20 a week on we’re now putting £50 a week on. And when we have asked them about it, they’ve said that’s the rate it is”

“It kind of makes you feel like you’re a bit silly, because obviously with things like electricity we don’t necessarily understand the units and the prices and everything, they make it so complicated that you’ve got no chance of understanding.”

Martin lives alone in Manchester in social housing. His experience of switching energy providers illustrates how pushy sales techniques can leave people with mental health problems in an unsuitable contract, in this case without additional financial support previously available.

**Martin, with depression, Manchester**

Martin is currently unemployed after having to quit his job as a carpenter due to physical health reasons. Since being out of work Michael has experienced depression, receiving a diagnosis 12 months ago.

Martin had been with his energy provider since moving into his council flat four years ago and had received the Warm Home Discount for one winter.

He was cold-called by a salesperson from another energy provider, who explained he could be on a cheaper tariff with them. Managing on a very limited budget, Michael tries to save where he can, and he agreed to move to them. The salesperson assured him that he could still access the Warm Home Discount with them. He also liked that he would be switching to a smart meter, so he could keep an eye on how much energy he is using.
However, when he switched to his new provider they said they could not offer him the Warm Home Discount. He then also called his previous provider to try and switch back, but they said they couldn’t give him the Warm Home Discount either as he had cancelled his account.

Not having this financial support has had a major impact on Michael - he now has to ration how much energy he can use, and this has a negative impact on his mental health.

“I thought I was being smart, but I wasn’t. I’ve lost 140 quid.”

In relation to smart meters, there is some concern about the ways in which customers are informed about them being available. A couple of individuals recall being asked whether they would like a smart meter through what felt like sales techniques e.g. through cold-calling. These techniques pose a risk for Reluctant Communicators – they may be unable to handle calls as well as they would like and agree to have a product they are unsure they want. For the example below, receiving multiple cold-calls about smart meters from his provider felt at odds with his expectations that his mental health would be considered after disclosing details of his mental health to them.

“I spent what felt like the whole of Friday trying to contact [my energy provider] to make a complaint about being cold called. I had four calls from a company working for them about smart meters. It’s on their record that I suffer with mental illnesses but that hasn’t stopped them harassing me.”

Male, with depression, PTSD, anger management issues, London

There were also a small number of participants who were concerned about the perceived disruption of having a smart meter installed. Those people whose mental health problems made them averse to change were those who raised concerns.

Disconnection/service disruption issues

On top of this, many are worried about the risk of disconnection. In our research five people had been without energy in their home because they had been unable to top-up their prepayment meter or payment card. These were individuals who displayed behaviours associated with Volatile Overspending and who typically struggled to manage household budgets. Without the flexibility that customers on direct debit payment schemes have, these individuals were more at risk of having to limit their energy usage. This could mean being in a cold and dark house until they find money to top up or rationing their usage so that energy/gas is only used at ‘priority times’.

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1 For more on self-disconnection see the Citizens’ Advice report: Switched on: Improving support for prepayment consumers who’ve self-disconnected
Martin lives alone in Manchester in social housing. His experiences illustrate the impact of being without energy, in this case as a result of a provider error.

Martin, with depression, Manchester

After moving to a new energy provider, he understood that he was meant to have £15 emergency credit. However, when he ran out of credit, instead of going ‘into the emergency’, he was cut off.

In response he rushed to the shop and topped up £10. He came back to his flat and it still had not come back on. He rang customer services, had to input many different numbers into the smart meter (with guidance from the person on phone) and it came back on.

However, the provider representative couldn’t explain on the phone why the emergency credit didn’t work.

“It was lucky the grandkids weren’t here. That wouldn’t have been ok. The whole thing was a bit of a stress.”

This threat of being cut off is a source of stress in itself, especially for those with prepayment meters who had the day-to-day worry of having to top up. Individuals tried avoiding using their emergency allowance where possible, but sometimes had to use it. Those who did use it, felt anxious about having to repay it at a point in the future.

“I didn’t pay my phone bill and I’m on my emergency for electricity.”
Female, with bipolar disorder, Birmingham

We also saw that service disruption was a particular concern for people who tend to spend a lot of time in their home. For example, there were those in our research with depression, anxiety disorders or phobias who spent a lot of their time at home. They are aware that it is entirely feasible they could be disconnected, and for these individuals this threat often looms large in people’s minds. This is one of the ways in which the energy market presents a particular cause for worry for people with mental health problems – and there is seen to be a two-way relationship between energy and mental health.

For those on direct debit payment schemes, a lack of flexibility around bill payment can also be an issue with energy providers. This particularly affects Volatile Overspenders, who may struggle to budget to pay their bills on time. It is worth noting that few individuals had positive experiences when they had been unable to make a monthly payment and their energy providers had changed the payment date in response. However, this type of arrangement usually requires some dialogue with the energy provider and for Reluctant Communicators, reaching out to their provider in this way could have been extremely challenging.
The energy market and people with mental health problems

“Gas and electric can be helpful, and, in the past, they have allowed us to pay off a debt over a longer period. However, some of that was their fault but it was still a very appreciated move to help us survive financially.”
Male, with depression, Birmingham

Billing issues

In comparison to other sectors, issues with billing seemed to occur more frequently with energy providers, chiming with data from the Energy Ombudsman which suggests that 3 out of 4 problems providers receive relate to billing issues.²

Simply understanding bills from energy companies was a key complaint amongst participants. Energy bills are highlighted as being particularly confusing as it was described as hard to understand from reading a statement both the unit costs and/or how much energy had been used.

“All bill people just make it as difficult as humanly possible to comprehend it.”
Male, with depression, Somerset

“When it comes to energy they make information too complicated for us to understand. They should break it down for us. Any other way would be better.”
Male, with depression, Nottingham

Whilst this in itself points to a consumer-wide issue, people with mental health problems – especially Fluctuating Managers and Reluctant Communicators – are at greater risk of unclear bills having an adverse effect on them. This is because Fluctuating Managers, who experience periods of poor mental health, will find they lack the energy and focus to engage with and process complicated bills during this time. Reluctant Communicators are a group of people with mental health problems who are less likely to take action to get their queries resolved. Reluctant Communicators spoke of feeling silly or stupid as a result of struggling to understand their bill and may avoid getting in touch with their energy provider for more clarity on a confusing bill. They may wait instead until a more serious problem on the account develops.

The second issue related to billing in the energy sector is that large quarterly bills can cause problems for household budgets. This is something more likely to affect Volatile Overspenders, who may already be struggling to keep their budgets in check when an unexpectedly large energy bill arrives, potentially leading to a missed or late payment as well as much anxiety.

The energy market and people with mental health problems

“I had to save extra as during December both my gas and electricity charges increased due to winter. This year my bill was more than double than what it was before which I was not pleased about.”

Male, with depression, Nottingham

Issues with accessing discount schemes

Furthermore, a small number of participants (three in our research) had experienced issues in accessing discount schemes such as the Warm Home Discount. For example, issues included being unable to cash the discount cheque (which was something experienced by one individual who is not able to leave the house due to anxiety and phobia) and being rejected after being told they were eligible.

“I had an issue with the cheque for Warm Home scheme because it could only be cashed by me in person. My partner went for me and spent 45 minutes persuading the Post Office to let him cash the cheque. He had to go back a second time and show them my birth certificate, driving license, and bill, and he also had to show his own bill from his house – all of this just to get money for gas.”

Female, with anxiety, phobia, panic attacks, Nottingham

“Well when I did change over to [the new supplier] they did say that I was entitled to the Warm Home Discount but when I applied for it they said I was too late. I had only been with them for a week, but they said I wasn’t entitled to it. I wasn’t happy about that.”

Female, with depression and anxiety, Birmingham
Chapter 3: Awareness of existing support

In comparison with other sectors, energy providers (along with providers in the water sector) are generally seen as having the most responsibility to deliver a consistent and fair service, as well as having a requirement to provide additional support to vulnerable customers.

“My energy provider raised the issue of any form of vulnerability. I was impressed...Everyone deserves to be warm and safe, so this is a good thing. Far too many people die in the cold weather mostly because they don’t have the support or are afraid to speak out. These schemes save lives and should help protect vulnerable people.”

Male, Depression, Somerset

As a sector it is seen as doing better than other essential service sectors in offering support to vulnerable customers – although many assumed this didn’t extend to people with mental health problems and many also couldn’t name specific support programmes on offer.

Those who tend to know about specific support mechanisms for vulnerable people have either accessed them personally or have a close family member or friend who has. Others who have heard of types of support often didn’t see themselves as eligible or the target audience for such schemes.

Of the four essential service markets, awareness was highest with regards to the support schemes on offer in the energy sector specifically. Within the energy sector, financial support is the best-known type of support – including the Warm Home Discount and the Cold Weather Payment. Many people (around a third of participants) had heard of the phrase ‘a Warm Home Discount’ but didn’t necessarily know how it works and how much the discount would be. Much fewer could recall the Cold Weather Payment scheme. Amongst those who could recall it there was an assumption that is for older people specifically. There is an assumption that ‘additional support’ in general just means financial support, such as money off the bill, being given a discount or being put on a lower tariff – this is what people spontaneously think of when asked about support.

“I know they have the Warm Home Discount…but that’s only if you’re on low income, that’s not to do with mental health.”

Female, with depression and anxiety, Manchester

It is strongly felt, particularly by those who say their mental health has a significant impact on their lives, that more should be done to understand the needs and struggles of people with mental health problems, and to do more to support these consumers. Often, individuals feel that there are schemes in place for people facing other kinds of vulnerability such as low income and physical disability – but that these are often not on offer for people with mental health problems. Even among those who have received additional support, they most often see this as because of factors other than their mental health, such as being on a low income, having young children or being a carer, managing other physical health issues etc.
Two types of support in the energy market were known about by some of the people included in this study. Where participants were unaware of these types of support, they were given an explanation of how they might work and were prompted on how beneficial they could be to them.

1. **Warm Home Discounts** offered by energy providers are reasonably well known. In general, discount schemes offered by the energy sector are much better known than other types of support offered by other essential service providers. Despite this, there is a concern that providers don’t advertise this kind of support as widely as they could and that it would be easy for customers to ‘miss the boat’ if support is offered on a first come, first served basis.

   Those who have accessed these are positive about the benefits. These include reducing stress about covering bills over the coldest months, reducing worry about having to interact with energy companies and reducing embarrassment about not being able to turn energy on when guests visit.

   “It was a godsend. I’m counting every penny so knowing that was covered was just such a weight off my shoulders. Before I had it, before the grandkids came around I’d spend a day or two without the heating on, just so I had enough to turn it on when they were here.”
   Male, with depression, Manchester

   “It’s been very useful. That £140 has lasted. My house is not insulated so it’s been really, really cold. It would’ve been hard without it.”
   Female, with anxiety and phobia, Nottingham

   “I know that many of the energy companies offer a Warm Home Discount scheme as I have previously qualified for this myself. Certain customers are eligible who are on a low income due to unemployment or health reasons.”
   Male, with depression, SAD and anxiety, London

   For those previously unaware of the scheme, when probed, the prospect of having a reduced tariff or money off a bill was very appealing, particularly for people with mental health problems who are also managing on low incomes.

   There is desire for clarity around who may be eligible for this kind of support. Individuals would like to know how much someone’s mental health may need to impact their life in order to meet the minimum requirements for support. They would also like to know how this can be evidenced.

2. Very few of the people that we spoke to during this study were on a priority services register or even aware that these registers existed. Once given an explanation of what being on a register could mean for them, many were very positive about the idea of provision of priority services in certain instances, such as in a power cut and/or known...
service interruptions. Some reported they would investigate whether they could be eligible.

“I’m not aware of this but I think it’s a brilliant idea. I’ll look into it. Support in a power cut would be good, but advanced notice of service interruptions would be particularly valuable.”
Female, with bipolar disorder, Cardiff

Others were positive about receiving advance notice of key disruptions, particularly those averse to change who can experience anxiety around events out of their control.

“I’d like to have advanced notice because that way I can plan and then the change will be less sudden…I don’t like change, but this way I can be ready.”
Male, with depression and anxiety, Nottingham

Other individuals who report struggling to pay bills on time, and/or to control spending behaviours, very much liked the idea of having the ability to nominate a friend or family member to receive bills to ensure that they are paid on time.

“If I could nominate a family member to help get bills paid that would help. I don’t open letters when I’m stressed, or I throw them in the bin, so that would help.”
Female, with bipolar disorder, Birmingham

From the small number of individuals who knew they were on a priority services register, most were unclear about how they are being ‘prioritised’ and what being on the register means for them and their family. Some also weren’t sure why they were on the priority services register – i.e. whether it was a result of their mental health or of another factor (e.g. low income or receiving benefits). As a result, some feel frustrated at what they see as their supposed prioritisation not counting for much in day-to-day interactions with providers – for example, spending as much time as before waiting on the phone or explaining their situation to each new staff member they speak to.

“When I went with [my energy provider] on the initial forms they asked me if I had any problems. I said yes, and they put me on a different scheme so that if the power goes out I’m more protected. But when I’ve phoned them back up since I’ve found them abrupt. I’m not really sure what else I get from being on [the scheme].”
Male, with anxiety, depression, PTSD and anger management issues, London

There appears to be a need to raise awareness of priority services registers per se. But there is also need to inform customers of the benefits and additional support this offers, and when they are on a register, ensuring they receive the additional support they should be.

The small number of people in our research who were aware of support schemes were of the view that providers were reluctant to market such schemes too widely, as a means to avoid them becoming ‘oversubscribed’.

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“There needs to be more awareness [for the Warm Home Discount]. If I hadn’t seen it on TV, I wouldn’t have known about it. They weren’t going to tell me.”
Female, with anxiety and phobia, Nottingham

Some are confused about who is and is not eligible. For many individuals, this perceived ‘secrecy’ is seen as unfair. They claim that ‘luck’ in hearing about support should not play a role in whether someone receives help they may need. Individuals with mental health problems feel that providers should be doing more to let consumers know about eligibility for support schemes. Further research is necessary to identify the extent to which, if at all, providers in essential service markets advertise these schemes.

“I always feel like everyone gets the same level of service, however those in vulnerable circumstances due to money, health including mental health, or lack of family should be helped first…this kind of thing should be better publicised or advertised.”
Male, with depression, Birmingham
Chapter 4: Improving support

4.1 Provider awareness

Most people with mental health problems included in this study assume their energy providers are currently unaware of their mental health problems unless they could recall explicitly telling them. Those with more severe problems are more likely to know if their energy provider is aware of their health condition. This may be because their mental health problem is such a large part of their lives and/or identity that they are used to disclosing it to others. A small number of individuals impacted less by their mental health describe sharing details of their problem when they have experienced issues with service. The most typical prompt to disclosure was the risk of being disconnected as a result of unpaid bills, often in an attempt to secure greater leniency from providers.

There is an understanding among individuals with mental health problems that because many providers do not currently have information on their mental health, their ability to offer appropriate additional support is limited. In this context, when asked about providers knowing about their mental health problems, the majority were relaxed about sharing this information if there were clear benefits to doing so. In particular, many were open to sharing information about their mental health if there is potential for greater understanding, leniency and, above all, a different level of customer service from their provider as a result. A small number of individuals expressed greater willingness to disclose information with energy providers than providers in other sectors, perhaps as a result of their view that energy companies have a greater responsibility to provide a fair and consistent service than other sectors do.

However, a small number of individuals were less willing to share information about their mental health with their energy company. They described being very private about their mental health problems in all aspects of their life – for example, one participant had chosen not to tell members of her family at all. There is a perception from these individuals that stigma around mental health problems persists and they would therefore be concerned about potential repercussions of disclosure to a provider. There was a worry that this information could accidentally be shared with others with whom they did not wish to disclose their status e.g. if a family member were to accidentally intercept communications from a provider that included detail about their mental health problem. There was also a concern that information could be shared with other organisations, which in turn could impact their ability to access credit or be used ‘against them’ when applying for a job. Some were generally uncomfortable with the notion of sharing mental health information with anyone beyond very close friends or loved ones.

“I guess that information would get logged somewhere, I would need that to be kept securely.”

Male, with depression, Somerset
Other barriers to sharing information about mental health with energy provider include having a negative experience with a particular provider. Such experiences generate mistrust. As a result, individuals may believe there is next to no purpose in sharing information about their mental health. In these circumstances, there is little faith that revealing such information would lead to any greater leniency or additional support.

Despite the majority being generally happy to disclose information about their mental health, many do not feel as though there is an appropriate moment to make this disclosure among the more routine interactions they have with their current energy provider.

Many suggest that the process of setting up with a new energy provider feels like the most appropriate moment to be asked/to disclose information regarding mental health. Such information could be couched within existing personal questions required to set up an account. It was also suggested that mental health information could be captured in yearly prompts for personal details.

People with mental health problems want the gathering of this information to feel as unobtrusive as possible. There is desire for providers to create opportunities and allow space for consumers to disclose details of their mental health, and as far as possible, avoid consumers having to tell providers when they are in the midst of a difficult situation with their mental health and/or their account.

### 4.2 Customer service

Customer service is front-of-mind when people with mental health problems think about how their experiences with their energy provider could be improved. Individuals with mental health problems suggest three key areas for improvement:

- **More consistent, and where possible, more personalised customer service:** including training frontline staff to be more aware of mental health problems and to be better able to identify someone struggling with their mental health. Most individuals willing to share information about their mental health, were open to all customer-facing staff having this information available to them, if it meant they were treated appropriately. Enabling frontline customer service representatives to ‘go off script’ to be more sympathetic towards individuals struggling with their mental health also appeals.

- **Clear and simple interactions and communications, and provision of clear records of interactions:** individuals with mental health problems can struggle to remain calm during interactions with energy providers, and many report forgetting key parts of conversations or key actions, and/or getting upset at having to re-explain their situation. Many also describe becoming ‘flustered’ by confusing bills/statements. As such, clear records of conversations kept on record and sent out to consumers is seen as helpful.
Energy providers showing greater flexibility around late payments and disconnection: individuals with mental health problems want providers to have better understanding that ‘business as usual’ actions can have more negative impacts on people with mental health problems. For example, the threat of disconnection, or ‘threatening’ letters relating to unpaid bills can cause significant anxiety to people with mental health problems, particularly those who display fluctuating management in periods of poor mental health, reluctant communication or change aversion.
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