Dying in Poverty

Briefing for Local Government

Summary

- Research published by Marie Curie in late 2024 highlights the growing scale of poverty at the end of life.
- The last months, weeks and days of life should be a time to focus on what really matters: making memories with family and friends and living well for as long as one can. But too often financial pressures add further worry and strain to an already difficult time.
- In our first report in 2022, we found that 90,000 a year died in poverty. Our latest report found that this had risen to 111,000 - a 23% rise.
- Working-age people are at a much greater risk of dying in poverty: 28% of working-age people who died in 2023 died in poverty, compared to 16% of pension-age people.
- Poverty also affects some groups more than others, including women and minoritised ethnic groups, and there are significant geographical variations in the proportion of people dying in poverty.
- We also know that energy costs can increase dramatically for someone living with a terminal illness. At least 128,000 people died in fuel poverty in 2022, struggling to heat their homes or run vital medical equipment.
- Whilst much of the action needed to address poverty at the end of life sits at a UK Government level through changes to the social security system, local authorities also have powers to improve the financial situation of people dying in poverty.

Marie Curie is encouraging councils to:

1. Review their council tax support schemes to ensure that households including someone living with a terminal illness are adequately supported.
2. Ensure that this group are prioritised for other discretionary support schemes, including the forthcoming Crisis and Resilience Fund.
3. Ensure they have a cold homes strategy in place.

Thank you to everyone who supports us and makes our work possible.
To find out how we can help or to make a donation, visit mariecurie.org.uk

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The impact of terminal illness on financial security

Terminal illness can cause a significant reduction to a household's income (for example, if the person living with a terminal illness or another household member needs to reduce or stop working due to health or caring responsibilities). At the same time, it can also have significant impacts on expenditure, with costs like energy, transport and childcare often increasing dramatically. We also know that poverty at the end of life doesn't only affect the dying person – it affects unpaid carers as well. Marie Curie research into the financial and employment impacts of caring for someone at the end of their life found that up to three quarters of a million people across the UK provide unpaid care to terminally ill loved ones every year, with up to 15% living in poverty. This number more than doubles to 32% in the year following bereavement.

Who dies in poverty?

Some people who die in poverty have already been living in poverty before the last year of their life. Across the UK, one in five people are living in poverty at any one time, in part because of the inadequacies of the social security system. The combination of loss of income and higher costs that often accompany a terminal illness increases the risk of poverty for people at the end of their life, even for families who were previously comfortable. Across every demographic breakdown – age, ethnicity, sex or geographic location – people in the last year of life are at higher risk of poverty than the people not in their last year of life.

One especially stark dividing line is age. A key reason for this is that the State Pension and other pension-age benefits are normally paid at a significantly higher rate than the equivalent financial support for people of working age. This means that people of working age are less protected in the event of being diagnosed with a terminal illness.

There are also alarming differences between other demographic groups. People from minoritised ethnic groups are more likely than white people to die in poverty, and women are at greater risk of dying in poverty than men.

And there are stark differences between local authorities and regions, with people in some local authorities being almost three times as likely to die in poverty as in others. Among working-age people, poverty rates in the North East in the last year of life were 34% – a full 50% higher than the areas with the lowest rates of end-of-life poverty.

Council tax and other discretionary support

Whilst we recognise the significant financial pressures facing local government, councils do have the powers to take action on improving the financial situation of people dying in poverty. Council Tax Support provides a reduction in someone's council tax bill depending on their income. Since 2013, local authorities in England have had the discretion to set their own rates of Council Tax Support for working-age people. Since then, most councils have reduced the support available, increasing the amount that low-income residents are required to contribute towards council tax. In 2024/25, around two-thirds of local authorities in England have a minimum payment that is owed by someone with no income, with some requiring a minimum payment of half of the original bill.

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Case Study: Manchester City Council's Council Tax support for terminally ill residents

Manchester has a particularly high rate of poverty at the end of life, with around 42% of working age and 30% of pension age residents dying in poverty.

In June 2025, Manchester City Council amended its Discretionary Council Tax Policy to ensure terminally ill residents on a low income receive a full council tax exemption. Any household that already receives some amount of Council Tax Support qualifies for the support if anyone in the household is likely to die in the next 12 months. The person – or someone on their behalf – just needs to send their SR1 form to the local authority (this form is completed by a clinician which confirms a person has a progressive disease, and consequently their patient is expected to pass away within a 12-month period). Their Council Tax Support will then cover the full council tax for the property, up to the end of the financial year in which the person dies.

This policy change will ensure that the most vulnerable households in Manchester are supported financially throughout the last year of life. It is estimated that this will benefit around 175 residents in Manchester each year, the majority of which would be of working age.

Local authorities should also prioritise people living with a terminal illness for support through their future Crisis and Resilience Fund (which will combine the Household Support Fund and Discretionary Housing Payments) schemes. The recent Spending Review committed £1 billion funding, committed over multiple years and available from April 2026, which is designed to enable councils to provide a more stable, longer-term approach to supporting those most in need in their local area. We would suggest that support for terminally ill residents should be designed into these schemes from the outset.

Fuel poverty and cold homes

Energy costs are one of the biggest costs that can increase when someone is at the end of their life. This can be due to the need to run medical devices, maintain a particular body temperature or simply spend more time at home due to terminal illness. Being unable to afford energy causes financial stress and the discomfort of living in a cold or dark home, but it can also directly affect health, including causing or worsening respiratory problems, mental health outcomes, and increasing the risk of heart attack. At least 128,000 people died in fuel poverty in 2022 – more than one in five of all people who died that year.

National Institute for Clinical Excellence (NICE) has issued guidance which makes a number of recommendations to Health and Wellbeing Boards in England. However, our research has shown implementation of the NICE NG6 guideline is patchy, with 40% of councils in England not having a cold homes strategy in place and nearly half not having a single-point-of-contact referral service. People living with a terminal illness and those nearing the end of life are particularly vulnerable to fuel poverty. As energy prices rise, many more terminally ill people are at risk of falling below the poverty line as a result of spiralling energy costs and the health impacts of living in cold homes. Improving compliance with NICE's NG6 guidelines will ensure local authorities are doing all they can to support people living with a terminal illness who are at risk of fuel poverty.

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Policy recommendations for local authorities:

- Review your Council Tax Support scheme and ensure that households on a low income that include someone living with a terminal illness are adequately supported.
- Ensure your council prioritises households that include someone living with a terminal illness within the Crisis and Resilience Fund.
- Use your leadership role on the Health and Wellbeing Board to ensure the Joint Strategic Needs Assessments and Health and Wellbeing Strategies outline solutions to minimise winter deaths in line with NICE's NG6 guidelines.

Take further action

- You could put forward a council motion supported by us.
- You could take our Dying in Poverty report and your local data on deaths in poverty to your council, or ask a question to full council, to encourage council-wide action;
- You could arrange a meeting with our team to discuss options for financially supporting terminally ill residents in your local area.

About Marie Curie

Marie Curie is the UK's leading end of life charity. We are here for anyone with an illness they're likely to die from, and those close to them. We bring 75 years of experience and leading research to the care we give at home, in our hospices and over the phone. And we push for a better end of life for all by campaigning and sharing research to change the system.

For more information or to arrange a meeting to discuss the contents of this briefing, please get in touch with us local@mariecurie.org.uk

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