

Policy Statement Food Poverty

Summary

Since 1976, the UK Government has been required under the International Covenant on Economic, Social and Cultural Rights (Article 11) to secure the human right to adequate food for everyone in the UK.

Despite this, increasing numbers of people are in or at risk of food poverty, with millions of people in the UK, including many children, struggling to access a sufficient and nutritious diet. Food poverty impacts people at every age, and for different reasons.

Poor diet increases risk of illness, reduces a person's quality of life and reduces their life chances. Governments, local authorities, health services and industry need to do more to counteract these worrying trends.

The BDA believes that:

- Nobody should live in food poverty.
- UK Government and local authorities must take urgent action to lift people out of food poverty and prevent others from falling into food poverty. This should include enshrining a "Right to Food" in UK law.
- People directly affected by food poverty must be actively and authentically involved in any efforts to fight food poverty.
- Dietitians have the knowledge and skills to support people directly, but should also be supported to work in public health at a population health to prevent and reverse food poverty. Dietitians should work with other health care professionals to help them identify those at risk of food poverty, signpost them to appropriate support and provide effective advice on how to eat a healthy nutritious diet on limited income.
- In line with the position of Trades Union Congress¹, the roll out of Universal Credit should stop immediately, and the policy replaced by a system that does not drive anyone into poverty.
- Food industry should engage with the issue of food poverty beyond supporting food charity as part of corporate social responsibility. Emergency food charities should emphasise and focus on their social and political contribution to progressive responses to food poverty and realising the human right to food in the UK.

¹ <u>https://www.tuc.org.uk/research-analysis/reports/universal-credit-update-briefing-unions</u>

Background

Scale of food poverty in the UK

Food poverty does not have a precise definition, but can be summarised as the inability of individuals and households to obtain an adequate and nutritious diet in socially acceptable ways, or the uncertainty that they will able to do so². The term "food insecurity" is sometimes used instead. Food poverty or insecurity is complex and can affect those living on low incomes, but also people with limited access to transport, poor housing or physical or mental ill health.

Recent evidence has shown that food poverty is rising within the UK. Statistics from the Trussell Trust, one of the UKs largest food bank networks, are often referenced. The trust has reported year-on-year increases in food bank use; in 2018-19, 1,583,668 three-day emergency food supplies were given to people in crisis³.

However, it is likely that scale of food poverty is much worse. The Food Foundation in 2017 estimated that in 2014, 17 times more people were food insecure than were visiting the Trussell Trust⁴. The UN Food and Agriculture Organisation's (FAO) Food Insecurity Experience Scale (FIES) estimates that 2.4 million people are experiencing "severe" food insecurity, defined as occasionally going a whole day without eating⁵.

The UN's Special Rapporteur on extreme poverty and human rights, Professor Philip Alston, released a worrying report in July 2019 based on his visit to the UK. He praised the work of Trussell Trust and others, but was clear that "it is not an adequate substitute for a Government fulfilling its obligations"⁶.

The Poverty and Social Exclusion Research Project in 2013 estimated that around four million children and adults are not properly fed by today's standards. This figure has increased since the turn of a century, taking us back to levels last seen in the 1980s. They also found that more than one in four adults (28%) skimped on their own food last year so that others in their households could eat⁷.

A survey carried out for the Trades Union Congress (TUC) by Greenberg Quinlan Rosner Research in August 2017 found that 33% of those surveyed felt it had got harder to meet their food expenses, with younger, ethnic minority and female respondents more likely to say things had got tougher. In the same survey, 13% said they had missed a main mean because they were short of money⁸.

Causes of food poverty

Causes of food poverty or insecurity are multifaceted. Financial hardship, low wages, and insecure employment certainly play a key part. The rising cost of living, and specifically the cost of the typical food shop, has occurred during a period when incomes have been particularly stagnant. Income after housing costs fell 13.4% between 2002-03 and 2017-18 for low income households. Over the same time period, food prices (in real terms) increased 3.9%⁹.

² http://www.healthscotland.scot/health-inequalities/fundamental-causes/poverty/food-poverty

³ https://www.trusselltrust.org/news-and-blog/latest-stats/end-year-stats/

⁴ https://foodfoundation.org.uk/wp-content/uploads/2016/07/MeasuringHouseholdFoodInsecurity.pdf

⁵ http://www.fao.org/3/a-i4830e.pdf p39

⁶ <u>https://undocs.org/A/HRC/41/39/Add.1</u>

⁷<u>http://www.poverty.ac.uk/system/files/attachments/The Impoverishment of the UK PSE UK first results sum mary_report_March_28.pdf</u>

^{8 &}lt;u>https://gqrr.app.box.com/s/lbj4s0g852r7fzvuwury46hud22u4m4x</u>

⁹ https://www.gov.uk/government/publications/food-statistics-pocketbook/food-statistics-in-your-pocket-pricesand-expenditure

The benefit system – from pensions to Universal Credit - has been shown to be a significant factor. Research for the Trussell Trust by Heriot-Watt University showed that two-thirds of those referred to food banks had reported issues with the benefits system¹⁰.

However, income is not the only contributory factor. Access to and availability of affordable nutritious food can play a role, especially for those that are older or less mobile. Lack of equipment, and pressure to abide by particular social rules are further potential constraining factors.

The impact of food poverty

The impact of food poverty is obvious. Poorer people are more likely to be categorised as obese¹¹, and/or to suffer from type 2 diabetes¹² or heart disease¹³, and are more likely to have other diet-related health conditions. Those living in poverty are much more likely to have poor mental health¹⁴, and the stress of food insecurity is likely to be a significant factor.

There are not specific figures available for the cost of food poverty to the wider economy, but the economic cost to the NHS of diseases related to poor diet was estimated in 2006–07 at ± 5.8 billion¹⁵, and it is also estimated that as 10% of all morbidity and mortality in the UK is attributable to poor diet¹⁶.

Malnutrition amongst the adult and particularly elderly population can be caused by a number of factors, including disease, frailty and food poverty. Age UK amongst others have highlighted the impact of cuts to older people services as causing more older people to suffer the effects of poverty, including not having enough to eat, despite the pension "triple lock"¹⁷. The BDA has published a policy statement specifically relating to the management of malnutrition¹⁸.

Food poverty amongst children is of particular concern, as children often do not have the capacity to improve their diet themselves. We know that malnutrition (undernutrition) can cause many problems for children. They can have growth failure and stunting, delayed sexual development, reduced muscle mass and strength and impaired neuro-cognitive development. Equally, malnutrition caused by calorie-rich, nutrient poor food can lead to obesity, type 2 diabetes and other life-limited conditions.

A baby born to a mother in the most deprived decile is nearly twice as likely to have a low birth weight as those in the least deprived decile¹⁹. More generally, we know that children living in poverty experience higher levels of asthma, tooth decay and obesity than children in more affluent areas²⁰. Diet has an important impact on a child's ability to learn and

¹⁰ <u>https://www.stateofhunger.org/</u>

¹¹ https://www.ncbi.nlm.nih.gov/pubmed/28510579

¹² https://www.diabetes.org.uk/about_us/news_landing_page/uks-poorest-twice-as-likely-to-have-diabetes-andits-complications

¹³ <u>http://www.ox.ac.uk/news/2016-10-13-social-inequality-uk-womens-heart-disease-risk-due-smoking-obesity-and-physical</u>

¹⁴ https://www.mentalhealth.org.uk/publications/poverty-and-mental-health

¹⁵ https://academic.oup.com/jpubhealth/article/33/4/527/1568587

¹⁶ http://jech.bmj.com/content/59/12/1054

¹⁷ https://www.independent.co.uk/life-style/health-and-families/welfare-gap-old-age-elderly-food-food-povertya7999011.html

¹⁸ <u>https://www.bda.uk.com/resource/the-management-of-malnourished-adults-in-all-community-and-all-health-and-care-settings.html</u>

¹⁹ <u>https://www.gov.uk/government/publications/health-profile-for-england/chapter-5-inequality-in-health#patterns-</u> in-health-inequality

²⁰ http://adc.bmj.com/content/early/2016/02/08/archdischild-2014-306746

develop²¹. Children who have a poor diet have worse educational attainment, which in turn reduces life chances, increasing the risk that children will be poorer in adulthood.

A 2017 survey²² of more than 250 paediatricians across the country revealed that:

- Poverty and low income contribute significantly to the ill health of the children that they treat.
- Housing problems or homelessness were of grave concern.
- More than 60% of respondents said that food insecurity contributed to the ill health of the children that they treat.
- And 40% had had difficulty discharging a child in the last six months because of concerns about housing or food insecurity.

Universal Credit

Universal Credit replaces six existing benefits (Child Tax Credit, Housing Benefit, Income Support, Income-based Jobseeker's Allowance, Income-related Employment and Support Allowance, Working Tax Credit) with one single payment²³. It was intended to make access to social security payments less complicated and, to support people into work. Universal Credit was initially trialed in North West England, before being rolled out initially in parts of Scotland and England and then the rest of the UK.

Universal Credit is a monthly payment to help with living costs. Application is online only (with some specific exceptions) and takes around three hours. The long wait for payments at the beginning of the claim process is a particular cause of problems, and many are finding the system very complicated. Evidence from Citizens Advice Bureau (CAB)²⁴ has shown that Universal Credit risks leaving many people without the support they need, pushing them into debt and leaving them unable to make ends meet. CAB Scotland reports:

- A 15% rise in rent arrears issues compared to a national decrease of 2%
- A 87% increase in Crisis Grant issues compared to a national increase of 9%
- Two of five bureaus in impacted areas have seen a 40% and a 70% increase in advice about access to food banks advice, compared to a national increase of 3%

More recent analysis of the rollout of UC by the Trussell Trust in the Five Weeks Too Long²⁵ report found that after 24 months, usage of their food banks increased 48%.

The Commons Public Accounts Committee in their report on Universal Credit²⁶ have concluded that the introduction of UC has caused "unacceptable hardship" and that the Department of Work and Pensions has been "dismissive" in its approach to people facing challenges as a result of UC.

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²¹ https://www.bda.uk.com/foodfacts/DietBehaviourLearningChildren.pdf

²² http://www.independent.co.uk/news/uk/home-news/poverty-low-income-children-sick-paediatricians-ukinequality-health-problems-a7728416.html ²³ https://www.gov.uk/universal-credit

²⁴ https://www.cas.org.uk/news/press-release-citizens-advice-scotland-calls-halt-universal-credit

²⁵ https://www.trusselltrust.org/what-we-do/research-advocacy/universal-credit-and-foodbank-use/

²⁶ https://publications.parliament.uk/pa/cm201719/cmselect/cmpubacc/1183/1183.pdf