4 September 2026

Rt Hon Louise Haigh MP
Minister for the Cabinet Office
Cabinet Office
70 Whitehall
London, SW1A 2AS

RE: Ensuring nutritional adequacy and equity in national household resilience and food preparedness guidance

Dear Minister

I am writing to you on behalf of the British Dietetic Association (BDA), the professional body and trade union representing over 12,000 registered dietitians and nutrition practitioners across the United Kingdom.

We note with keen interest the Cabinet Office's developing public resilience campaign, which advises households to prepare for national emergencies, severe climate events, and external disruptions by keeping emergency stores of food and water.

The BDA welcomes proactive cross-government planning to safeguard national resilience, and we urge the Cabinet Office to ensure that advice on household stockpiling and crisis food provision is grounded in robust nutritional science and public health equity.

Some UK households can approach a short disruption to food pragmatically, coping with store cupboard foods for a few days. Others are more food insecure and will require additional support. Fluid is a consideration for every household, and all households would benefit from specific information on this.

Longer term, emergency food security cannot simply be measured in calories or random tins, however; it requires a healthy nutrient balance, cultural appropriateness, dietary safety, and explicit consideration of vulnerable populations including infants, older people and people with long term illnesses.

Dietitians have historically been at the forefront of national resilience planning including practical guidance for food parcels for those shielding during the COVID-19 pandemic and the formulation of the UKs rationing system.

As your department shapes guidance for the public, we ask that you embed the following dietetic principles into the national resilience strategy:

- **Nutritional quality:** Advising the public to "stock up on long-life foods" without guidance risks households acquiring high salt, fat or sugar products that can exacerbate chronic conditions; or conversely purchasing a prescribed list of foods which us unfamiliar or unpalatable to their household or doesn't meet their individual needs. Guidance should first outline the recommended period to plan for, then suggest choices around balanced, shelf-stable options; supporting households to consider what acceptable meals could be for them in these circumstances. Recommendations should include a mix of carbohydrate foods, protein, fruit or vegetables and some fats. Together this balance of nutrients supports how people feel and function in the short and longer term.

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- **Affordability and health inequalities:** With many UK families facing tight household budgets, blanket advice to stockpile extra provisions is impractical for those without disposable income. The strategy must explicitly clarify how government emergency reserves will protect low-income households and individuals unable to build personal reserves.

- **Specialised and clinical diets:** Emergency plans must account for individuals with specific medical dietary requirements, including infants requiring specialised formula, people with coeliac disease or food allergies, and patients reliant on oral nutritional supplements or enteral feeds. Some forms of essential nutrition are made on prescription so a medicines resilience plan should also consider this.

- **Preparation realities:** Disruption caused by extreme weather, infrastructure failure, or cyber-attacks often entails the loss of power and cooking facilities. Public advice must detail foods that require no cooking or minimal clean water for safe preparation.

The British Dietetic Association stands ready to support the Cabinet Office. We offer our expertise to:

- Co-design clear, evidence-based practical public guidance or checklists for household emergency nutrition.
- Advise cross-departmental resilience working groups on nutritional impacts of supply-chain vulnerabilities.
- Assist in establishing robust protocols for clinically vulnerable populations during severe supply disruptions.

We would welcome the opportunity to meet with you and your resilience team to discuss how dietitians can support your department in building a healthier, more resilient UK.

Yours sincerely



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CEO, British Dietetic Association

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