

Healthy Start Expansion: Methodology Note

October 2026

About these estimates

Healthy Start helps eligible pregnant women and families with young children buy essential food, including fruit, vegetables, pulses, milk and infant formula. However, some families who could benefit do not receive the scheme, while others are excluded by its current eligibility criteria.

The Food Foundation has estimated how many additional people could become eligible if Healthy Start were expanded, and the potential cost of different policy options. These estimates illustrate the possible reach and cost of changes to the scheme; they are not predictions of how many people would claim it or how much would ultimately be spent (for example, associated administration costs).

The estimates draw on published government and population data, alongside assumptions where official data is unavailable. This note explains the three scenarios modelled, how we calculated the figures, and the key assumptions and limitations that readers should consider when interpreting them.

Healthy Start operates in England, Wales and Northern Ireland. Scotland has its own scheme, Best Start Foods, so all estimates in this note exclude Scotland.

The three scenarios

We model three scenarios to estimate the potential reach and cost of expanding Healthy Start.

1. The current scheme

We assess the number of people currently eligible for Healthy Start which includes those who are registered and those who could claim but are not currently registered to receive the payments. This provides a baseline against which to assess the potential impact of expanding the scheme.

2. Expanding eligibility

We estimate the number of people who could benefit if Healthy Start were expanded to include pregnant women (eligibility begins at 10 weeks) and children under five in households receiving Universal Credit, regardless of household earnings.

Under this scenario, approximately 750,000 additional pregnant women and children could become eligible for Healthy Start. This figure captures the potential impact of changing the eligibility criteria alone.

3. Expanding eligibility and increasing the value of payments

We also estimate the cost of expanding eligibility alongside an increase in the value of Healthy Start payments, to help account for food price inflation.

For this scenario, we model an illustrative standard payment of £6.25 per week and an infant payment of £12.50 per week. These are estimates informed by inflation to date and projected inflation in 2027, rather than confirmed future payment rates.

Summary of scenarios

Scenario	Eligibility	Weekly payment	Take-up assumption	People	Annual cost of payments
1. Current scheme	Existing eligibility rules of a £408 monthly earnings limit for working Universal Credit claimants, or receipt of an equivalent qualifying benefit (such as Income Support, income-based Jobseeker's Allowance or Pension Credit)	Existing value of £4.65 as standard; £9.30 for infants under one	number of people based on the assumption that current uptake is 66%	347,127 registered; 525,950 eligible	£101.5m for those registered; £153.8m if everyone eligible claimed
2. Expanded eligibility	All pregnant women (from 10 weeks of pregnancy) and children under five in Universal Credit households,	Existing value of £4.65 as standard; £9.30 for infants under one	100%	1,275,081 eligible, of whom 749,131 are newly eligible	£360.6m

	regardless of household earnings				
3. Expanded eligibility and higher payments	All pregnant women (from 10 weeks of pregnancy) and children under five in Universal Credit households, regardless of household earnings	£6.25 standard; £12.50 for infants under one	100%	1,275,081 eligible	£484.6m

The 100% uptake assumption represents the potential reach and associated cost in payments if everyone eligible received payments. Actual uptake may be lower.

What Healthy Start is and who can get it

Healthy Start gives low-income families a weekly payment on a prepaid card to spend on fruit, vegetables, milk, pulses and infant formula, plus free vitamins. It is run by the NHS Business Services Authority.

To qualify today, a family must be at least 10 weeks pregnant or have a child under 4, and receive one of the following:

- Universal Credit, but only if the family's take-home pay from work is £408 a month or less
- Income Support
- Income-based Jobseeker's Allowance
- Pension Credit (including the child addition)
- Income-related Employment and Support Allowance (pregnancy only)

Pregnant women under 18 qualify whether or not they receive benefits. Full eligibility rules and payment rates are set out on the [NHS Healthy Start website](#).

Who	Weekly payment (from April 2026)	Per year
-----	----------------------------------	----------

Pregnant women (from week 10)	£4.65	about £127.50
Children from birth to 1	£9.30	about £484
Children aged 1 to 4	£4.65	about £242

Annual values are approximate and assume 52 weekly payments.

The current eligibility rules exclude some low-income working families receiving Universal Credit whose earnings exceed the £408 monthly limit. Support also ends when a child turns four, potentially leaving a gap before they start Reception and become eligible for Universal Infant Free School Meals.

The expansion modelled in this note would remove the earnings limit for households receiving Universal Credit and extend eligibility to children under five.

How we calculated the estimates

1. Estimating the number of people currently eligible

[Government data](#) recorded **347,127 people registered for Healthy Start in August 2026**. This represents the current number of registered recipients, rather than everyone who is eligible for the scheme.

Not everyone who is eligible registers for Healthy Start. Reasons may include a lack of awareness or difficulties navigating the application process. However, the proportion of eligible people who claim the scheme is no longer published. The latest available historical figures indicated take-up of around 60% or more, although the Department for Work and Pensions has cautioned that these figures may have overstated the number of eligible people.

In the absence of a more recent reliable figure, we assume that **66% of eligible people currently receive Healthy Start, as this was the last uptake figure published by the government**. This is a working assumption, not a confirmed current take-up rate.

We use this assumption to estimate the total number of people who could currently receive Healthy Start if everyone eligible claimed it. Dividing the registered caseload by the assumed take-up rate gives an estimated eligible population of approximately 526,000:

347,127 registered recipients ÷ 66% assumed take-up ≈ 526,000 eligible people.

Subtracting the number already registered gives an estimated **179,000 people who are currently eligible but not receiving Healthy Start.**

We also use this estimated eligible population to calculate the potential annual cost of the current scheme if everyone eligible received payments, applying the relevant payment rates to the estimated number of recipients.

2. Estimating the impact of expanding eligibility

We estimate how many additional people could become eligible if Healthy Start were expanded to include all pregnant women and children under five in households receiving Universal Credit, regardless of household earnings.

Children

We use ONS population and government data from DWP and NISRA to estimate the number of children living in Universal Credit households. We adjust these figures to reflect the proposed age limit and account for children already registered for Healthy Start, to avoid counting existing recipients twice.

Pregnant women

The Department for Work and Pensions does not publish a directly comparable figure for the number of pregnant women living in Universal Credit households. We therefore use a proxy to estimate this group and subtract those already registered for Healthy Start.

Combining the estimates

Combining the estimates for children and pregnant women gives approximately **750,000 additional people who could become eligible** under the expanded criteria.

This estimate assumes that everyone newly eligible claims the scheme. It represents potential additional recipients, rather than a forecast of actual take-up.

We calculate the associated annual cost by applying the relevant Healthy Start payment rates to the estimated number of recipients, accounting for the different rates for infants under one and other eligible recipients.

3. Estimating the cost of increasing payment values

Finally, we estimate the cost of expanding eligibility alongside an illustrative increase in payment values.

We compare the estimated annual cost of the expanded scheme at current payment rates with the cost using the following illustrative rates:

- **Standard payment:** £6.25 per week.
- **Infant payment:** £12.50 per week.

The higher rates are intended to reflect food price inflation to date and projected inflation in 2027. They are illustrative assumptions for costing purposes, rather than a prediction of the payment rates the Government will adopt.

We estimate the additional annual cost by applying these higher payment rates to the estimated number of recipients under the expanded scheme and comparing the result with the cost at current rates. All figures are calculated from unrounded data and then rounded to one decimal place. As a result, components may not sum up to the totals shown. Costs cover the weekly payments only.

Scenario	People	Annual cost of payments
1. Current scheme	347,127 registered; 525,950 eligible	£101.5m for those registered; £153.8m if everyone eligible claimed
2. Expanded eligibility	1,275,081 eligible of whom 749,131 would be newly eligible	£360.6m in total; £206.7m for those newly eligible
3. Expanded eligibility and higher payments	1,275,081 eligible	£484.6m

Key assumptions and limitations

These estimates illustrate the potential reach and cost of expanding Healthy Start. They should not be interpreted as precise forecasts.

Current take-up: We assume that 66% of eligible people currently receive Healthy Start, based on historical NHS Healthy Start data, later withdrawn. This is a working assumption rather than a confirmed current take-up rate. If actual take-up differs, the estimated number of people currently eligible and the associated potential cost at 100% up-take would also change.

Take-up under expanded scenarios: We have made the calculations based on looking at everyone who would be newly eligible registering. This allows us to estimate its potential reach and maximum payment cost under the scenarios modelled. Actual take-up would depend on factors including awareness, accessibility, payment amount and the ease of applying.

Estimating the ratio of standard and infant rate payments: Published data does not show how Healthy Start payments split between the standard rate (£4.25 a week, for pregnant women and children aged 1 to 3) and the higher infant rate (£8.50 a week, for children under 1). To estimate this split, we use ONS population data as a proxy. This approach assumes that uptake is the same across all eligible groups. For example, it assumes that families with a 1-year-old take up Healthy Start at the same rate as families with a 2-year-old. In practice, uptake may vary by age, which adds uncertainty to the estimates.

Estimating the number of pregnant women currently registered, eligible, and in different expansion scenarios: Pregnant women are eligible for Healthy Start from the 10th week of pregnancy, so our estimates only count pregnant women from that point. There is no government data that splits Healthy Start recipients between pregnant women and families with young children. We therefore estimated this split using ONS population and birth data. We applied a factor to the birth data so that it only covers the part of pregnancy during which women are eligible. This approach assumes that eligible pregnant women and eligible families with children take up Healthy Start at the same rate. However, pregnant women may be better able to stay in paid work than mothers of young children, and so less likely to qualify or apply, in which case our method would overestimate the number of pregnant recipients. We also found no government data on the number of pregnant people on Universal Credit. We therefore used data from DWP and NISRA on households receiving Universal Credit and applied a factor derived from population data to estimate the number of eligible pregnant people, from the 10th week of pregnancy

onwards. The same equal take-up assumption applies here, so the same caveat about possible overestimation holds.

Payment values and inflation: The higher payment rates are illustrative assumptions informed by food price inflation to date and projected inflation in 2027. They are not confirmed future payment rates, and actual costs would depend on the rates ultimately adopted.

Cost estimates: The annual costs depend on the estimated number of eligible people, the assumed take-up rate and the applicable payment rates. They represent potential costs under the modelled scenarios rather than predictions of actual government expenditure. They do not include any associated administration costs of delivering the policy.

All figures are estimates based on the data and assumptions described above. They are intended to inform discussion of potential policy options and make the basis of The Food Foundation's campaign estimates transparent.

Data sources

- [NHS Business Services Authority: Healthy Start registration figures, August 2026](#)
- [Department for Work and Pensions: Stat-Xplore, Universal Credit household data](#)
- [Northern Ireland Statistics and Research Agency \(NISRA\): Universal Credit data for Northern Ireland](#)
- [Office for National Statistics: population estimates by single year of age](#)
- [Healthy Start eligibility criteria and payment rates, April 2026](#)