Measuring household food insecurity in the UK and why we MUST do it

4 facts you should know

1. We currently have no way of knowing how many people in the UK are too poor to eat.

The UK government currently does not measure household food insecurity, also called food poverty. Food insecurity is when an individual or household has insufficient or insecure access to food due to resource constraints.

It was last measured only among very low-income households more than 10 years ago.

The administrations in Scotland, Wales and Northern Ireland are taking steps to measure household food insecurity; however, each is using a different measurement tool which makes it impossible to form a UK-wide picture.

New UN data from the 2014 Gallup World Poll suggested that an estimated 8.4 million people, the equivalent of entire population of London, lived in households where adults reported insecure access to food in the past year. Based on these preliminary estimates, the UK ranks in the bottom half of European countries.

2. There is a well-tested, internationally recommended way to measure household food insecurity.

The short list of questions could be easily added to existing survey instruments (such as the Health Survey for England and equivalents in devolved nations, or the UK-wide Living Costs and Food Survey) at marginal cost (approx. £50-75,000 per year). The method involves asking a series of questions about people’s experiences of accessing sufficient quality and quantity of food, cutting back on food and going without food, and experiences of anxiety relating to insufficient food access. The questions have a run-time of 1-4 minutes. This method enables a ranking of severity of household food insecurity, and can include a module focused on children’s experiences.
3. The number of food bank users is not a good proxy for the numbers living in food insecurity.

Evidence from other countries indicates that food bank use is a very poor measure of food insecurity. The recent preliminary data from the 2014 Gallup World Poll indicate that 17 times more people lived in food insecure households than those who lived in households receiving food from Trussell Trust foodbanks. The data from the Trussell Trust do not capture people receiving food parcels from other agencies or those receiving other forms of emergency food aid. But we also know that some people who are food insecure don’t use any form of emergency food aid for a whole range of reasons – stigma, access, or they may think their situation is not as bad as it could be, and the service should be reserved for those who are even worse off.


4. Food insecurity matters for many obvious reasons. But its health consequences are long-term, severe and expensive.

Insufficient access to food can result in compromised health for a number of reasons. It can lead to the adoption of risk-averse food purchasing habits, where, in the face of having little to spend, households prioritise purchasing foods that will not go to waste and that are most filling. Often this means a reliance on cheap foods that are nutrient-poor but calorie-rich, potentially putting individuals at-risk of weight gain and obesity. Food insecurity is associated with inadequate intakes of certain nutrients and fruits and vegetables. Among individuals with chronic diseases requiring dietary management, such as diabetes, insecure access to food can lead to increased risk of complications. Importantly, the stress of not having sufficient amounts or types of food within households causes harm to socio-emotional well-being, impacting on child development and mental health.

The number of negative health outcomes associated with food insecurity affects us all as taxpayers. The poor health outcomes lead to increased costs across the economy: days lost without pay, low school achievement, and child welfare costs. Not surprisingly, it also is associated with increased costs for healthcare systems. Recent evidence from Canada has shown that food insecure people used health care services much more than those who were food secure. People who were severely food insecure had annual health care costs which were 121% higher than those who were food secure (Tarasuk et al, 2015).

Food insecurity should be routinely measured in the UK so we know who is affected and can target policy and resources on prevention, thereby avoiding unnecessary increases in health care costs.