

Mother's & Infant's Right to Food must be met

Food insecurity compromises optimal formula feeding & optimal breastfeeding putting infants at risk.

Key Recommendations

Urgent action must be taken to protect the health of mothers & infants in Forth Valley by:

1. in depth data collection & monitoring
2. engagement with key stakeholders to implement a formal pathway

Meet the
Authors



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A scoping review of infant food insecurity in Forth Valley: challenges of breastfeeding & formula feeding when food insecure

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Background

There is a social gradient of infant feeding. Infants in ↓SES groups are predominantly formula fed but data shows a rise in breastfeeding rates, driven by an increase in combination feeding. Food insecure families are **struggling to access** the extra **calories** required for breastfeeding or the **formula** required for formula feeding.

Method

Health care professionals, local authorities & 3rd sector staff were invited to participate in a rapid scoping evaluation of infant food insecurity across NHS Forth Valley health board. Subjects were asked key questions to determine their awareness of

- a) the scale of the issue
- b) the unique challenges faced by food insecure breastfeeding & formula feeding women
- c) the formal support available for food insecure families with infants
- d) the collection of data on this issue.

Results

Breastfeeding **provides** some infants with **food security**, but physiological demand affected by stress & calorie intake limits this. Concerns were raised over informal donor milk & women's reproductive rights.

No official emergency formula provision **pathway** in Forth Valley exists. UNICEF guideline implementation has led to **barriers in access**. **Demand** is increasing, resulting in **unsafe** feeding practices, maternal shame & **stigma**

Aim

1. To determine how food insecurity impacts on infant feeding practices across Forth Valley
2. To identify support pathways available for food insecure families with infants
3. To understand the infant feeding challenges experienced by food insecure formula feeding & breastfeeding women

Results

"mums worried about if they will be able to breastfeed if they themselves aren't eating much because of food insecurity."

Breastfeeding Network volunteer, Forth Valley

"This puts extra pressure on a mum who may prefer to stop breastfeeding but feels she can't afford to make that choice"

Breastfeeding Network volunteer, Forth Valley

*"One volunteer reported the added **stigma, embarrassment** and **time** of not being able to get formula at the foodbank, meaning she needed to seek out a second source of support"*

Third Sector volunteer, Forth Valley

*"making formula up with **less powder**, keeping bottles of formula to use later & stretching the time between feeds. A couple of mums have spoken about making their own formula from **online recipes**."*

Third Sector volunteer, Forth Valley

Tackling twenty-first century poverty – addressing the impacts of poor housing conditions for children with asthma in West Yorkshire

BMA Public Health Medicine Conference 2023

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‘Why treat people and send them back to conditions that make them sick?’

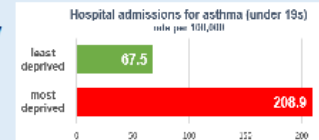
- Michael Marmot, *The Health Gap 2017*

Background

West Yorkshire has high prevalence of asthma (all ages) and high admission rates for under 19s from asthma¹. Cold homes, damp, and mould can increase the risk of respiratory problems and be asthma triggers².



Example of damp in a property in West Yorkshire
– Janice Dawson, leaseholder in Birstall



Admissions for children with asthma are three times higher in the most deprived than the least deprived decile¹

1. [Office for Health and Disparities Public Health Profiles](#)
2. [Asthma and Lung UK \(2022\). 'What is asthma?'](#)

3. [BBC News \(2022\) Poor housing: Doctors and schools left 'picking up the pieces'](#)

How have we responded in West Yorkshire?

- The West Yorkshire Integrated Care System, known as the Health and Care Partnership [invested £1 million](#) to keep people warm 2021/22 in the 'Winter Warmth' fund
- The money was shared across each of the 5 local authority areas in West Yorkshire based on the proportion of fuel poor households in that area. Some areas chose to invest in existing services, whilst others are piloting new services.



Case Study - Addressing inequalities in asthma for children locally

Greenwood Primary Care Network (PCN) is in the Kirklees area (West Yorkshire). The PCN had identified inequalities in asthma as a clinical priority within their population, and a working group of partners across the PCN including Calderdale and Huddersfield Foundation Trust, Kirklees Council public health, and Locala (the community provider) were brought together to look at improving rates of asthma admissions, management, and inequalities.

We have worked together to use the Winter Warmth fund in an innovative way focused on improving people's living conditions.

A service has been commissioned for energy efficiency experts to help vulnerable households save energy and money and live in a warmer, more comfortable home, with interventions ranging from home improvements to behaviour change and signposting to financial and welfare support.

The PCN are working with Social Prescribing Link Workers to identify and refer eligible patients on the criteria:

- 0-19 year olds with a clinical indication of poorly managed asthma
- cold / damp housing OR fuel poverty are a concern for the household

This will be a pilot which we will work with the Partnership to evaluate, hoping to establish proof of concept and expand the service if more funding can be secured.

Resources to support families and healthcare professionals

- We created an [affordable warmth webpage](#) and patient information leaflets on where to get help
- We ran a webinar on signposting families and carers to Affordable Warmth and Housing Services
- We have worked with colleagues to add questions relevant to indoor air quality to primary care clinical templates for asthma
- We have created resources on the West Yorkshire Healthier Together website on [Indoor air quality and asthma triggers](#), [keeping your home warm, damp and mould](#), and [housing](#) to support families and healthcare professionals know what advice to give and what services are available locally
- We made a commitment at our System Leadership Executive and Children, Young People and Families Board that no child or young person in West Yorkshire should suffer severe or uncontrolled asthma symptoms due to fuel poverty or poor housing conditions



“It’s there to catch you”

How a financial inclusion approach supports population health in Derbyshire

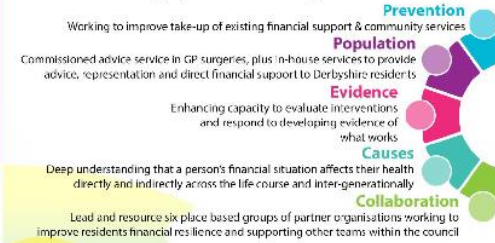
Abstract/aim

A public health approach to financial inclusion can support population level health. However, need and demand are growing and this requires strategic intervention upstream.

In Derbyshire...

63,756 households estimated to experience **food insecurity** (2021)
49,987 households estimated to be in **fuel poverty** (2019)
27,006 pupils eligible for **Free School Meals** (June 2022)
69.2% adults classed as **overweight/obese** (2021)

Methods - taking a public health approach



This case study features Delia who is aged 60 and lives alone. Delia had her Employment and Support Allowance benefit stopped as she was found "fit for work". This was despite having several health conditions, significant pain and limited mobility.



Delia was offered a wide range of support. This included crisis support which helped with food and heating costs, and supported a new claim for Universal Credit. Specialist support which helped secure £323 extra per month via a tribunal appeal. Further support to claim Personal Independence Payments, potentially totalling £3,328 a year. A referral for Occupational Therapy, along with home adjustments.

Potential negative impacts on Delia

- Increased pain and deterioration in condition
- Destitution - lack of food, heating, essentials
- Increased debt, missed bills and arrears
- Risk of homelessness
- Negative impact on mental health
- Unable to attend medical appointments
- Increased isolation
- More susceptible to financial abuse and scams

Potential negative effects on Delia's health

- Cold home increases the risk of cardiovascular and respiratory disease, as well as increased risk of falls and injury.
- Food insecurity is linked to diabetes, poor management of diabetes and obesity.
- Stress is linked to poor mental health, impaired memory, negative affect on the nervous, circulatory & endocrine systems (1).

Discussion

Need is rising – trends in the drivers of poverty (employment, earnings, benefits, housing costs & inflation) suggest that poverty is going to get worse in the UK in the next few years (2). These drivers are largely out of the control of Local Authorities and require national policy action (3).

Positive impacts on Delia

- Income reinstated and Delia can spend more on her food shop, gas and electric and other essentials
- Additional income could mean that Delia can get out and about and meet with friends
- Delia safer at home
- Increased independence
- Less stress and worry
- Resilience against scams
- Delia knows where to turn for help in future

Potential positive impacts on Delia's health and wellbeing

- Reduced risk factors for non-communicable disease & risk of falling
- Strong social connections are good for brain health
- Improved mental health and wellbeing

Conclusion

A **public health approach** to financial inclusion is beneficial to health and wellbeing and is achievable in a local authority. Need and demand are rising and whilst there is a need for upstream action, taking a local, evidence based partnership we can mitigate and try to catch as many people before they fall.



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References: (1) Bowden J, Coble L. (2014) The social determinants of health: it's time to consider the causes of the causes. Public Health Rep. (2) Joseph Rowntree Foundation (2023) UK Poverty 2023 www.jrf.org.uk/report-uk-poverty-2023 (3) Local Government Association (2023) Response to IAC debate on tackling poverty and the cost of food www.local.gov.uk/poverty-and-benefits-and-response-to-shine-tackling-poverty-and-cost-food-house-income