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# Understanding the lived experience of low-income UK parents' and carers', management of infant feeding challenges in the context of the current cost of living crisis: the Diet and Health Inequalities (DIO Food) project.

HUNTER, E. and DOUGLAS, F.

2025

**Understanding the lived experience of  
low-income UK parents' and carers',  
management of infant feeding challenges  
in the context of the current cost of living crisis:  
The Diet & Health Inequalities (DIO Food) Project**



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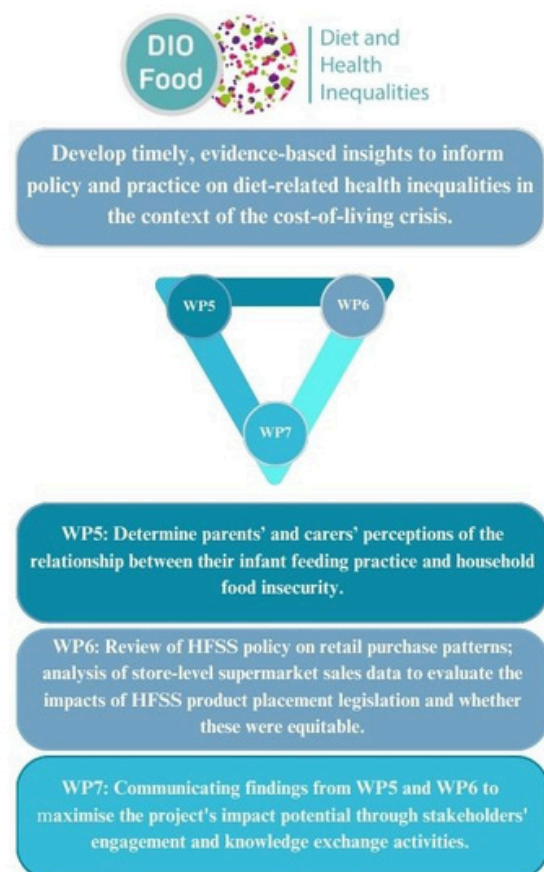
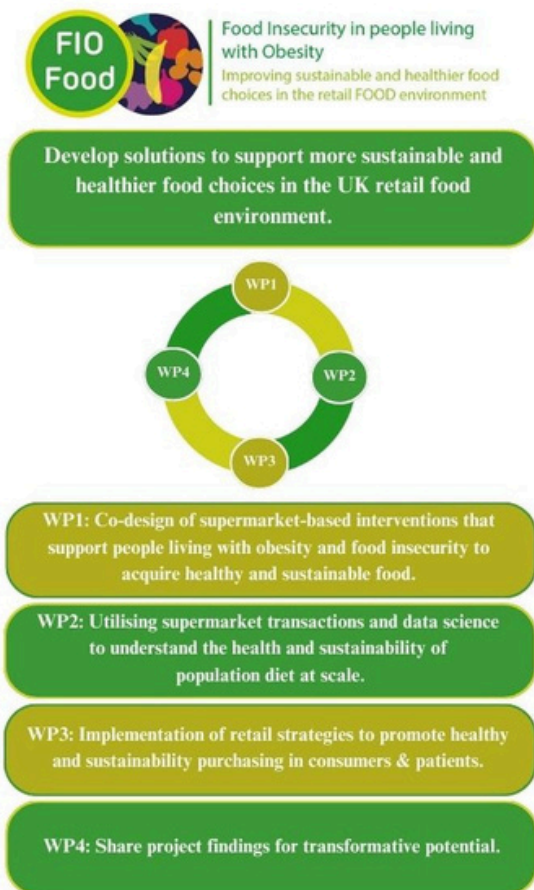


# THE DIET AND HEALTH INEQUALITIES (DIO FOOD) PROJECT

The DIO Food project is part of the larger Food Insecurity in People Living with Obesity (FIO Food) project, which seeks to inform policies on retail strategies to reduce dietary inequalities and support healthier, sustainable food choices in the UK.<sup>1</sup>

DIO Food enhances the scope of FIO Food by connecting not only with people living with obesity but also with vulnerable citizens, including children, who are facing diet-related health inequalities.<sup>2</sup>

While efforts have been made to monitor household and childhood food insecurity and to secure the Right to Food for children in the UK through policy development,<sup>3</sup> a paucity of research on maternal and infant food insecurity in the UK still remains. This research aims to address this gap.



## Outline of the FIO & DIO Food projects.

Results presented are part of the Work Package 5 outputs.



1. Lonnie, M., Hunter, E., Stone, R. A., Dineva, M., Aggreh, M., Greatwood, H., ... & Sriharan, N. (2023). Food insecurity in people living with obesity: Improving sustainable and healthier food choices in the retail food environment—the FIO Food project. *Nutrition bulletin*, 48(3), 390-399.

2. Crabtree, D. R., Hunter, E., Jenneson, V., Fildes, A., Kininmonth, A., Pontin, F., ... & DIO Food team. (2024). Diet and health inequalities: Connecting with vulnerable groups to address food insecurity—the DIO food project. *Nutrition bulletin*, 49(4), 561-571.

3. The Food Foundation. (2022) Children's Right2Food. Available from: <https://foodfoundation.org.uk/initiatives/childrens-right2food> [Accessed 28th September 23]

# DIO FOOD PROJECT AIMS AND OBJECTIVES

## AIM

Capture parents' and carers' lived experiences and explore influences that they feel impact or impacted infant feeding, associated with the current cost of living crisis.

### OBJECTIVE 1

Investigate food and feeding-related challenges parents and families have experienced during the first 6 months of their infants' lives



### OBJECTIVE 2

Explore parents/carers' experiences of realising (or otherwise) their feeding intentions during their infant's first 6 months

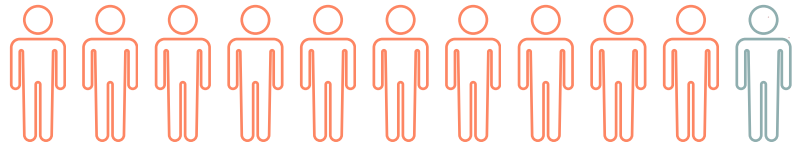
### OBJECTIVE 3

Investigate parents/carers' perceptions of factors that help or hinder their infant feeding experiences

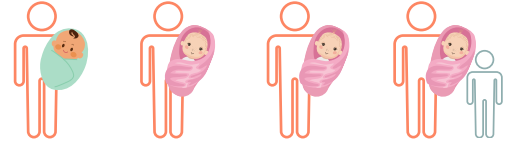


# PARTICIPANTS

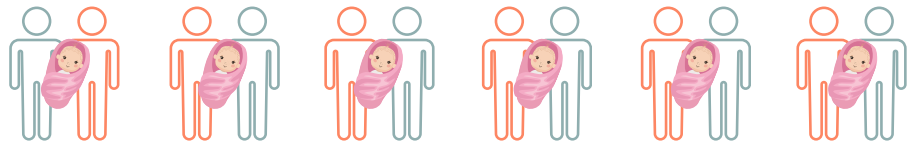
10 MUMS, 1 DAD



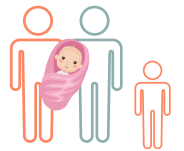
4 SINGLE PARENT FAMILIES



6 FAMILIES OF THREE  
(MUM, DAD AND 1 CHILD)



1 FAMILY OF 4  
(MUM, DAD AND 2 CHILDREN)



6 FAMILIES LIVING IN ABERDEEN, 2 FAMILIES IN ABERDEENSHIRE, 1 FAMILY IN INVERCLYDE AND 1 FAMILY IN KINROSS

## FEEDING PRACTICES

	feeding intention n (%)	feeding practice n (%)
breastfeeding	7 (64%)	2 (18%)
bottle feeding	4 (36%)	8 (73%)
combi feeding	0	1 (9%)

Reasons for not feeding in line with intentions included lack of support, anxiety around milk production and baby not getting sufficient milk (not related to food insecurity of parent)



# SYNOPSIS

Parents living on a low income face many challenges securing food for themselves and their infants. This qualitative investigation aimed to explore infant feeding intentions and practices within the UK context.

Following extensive recruitment efforts involving various organisations and stakeholders who engage with low income families and assured us that low income parents were utilising their services, eleven participants, 10 mothers and 1 father, were recruited. This somewhat low recruitment rate highlights the challenges of reaching this potentially vulnerable group who may be reluctant to share their struggles and experiences for fear of repercussion. All participants, primarily of White ethnicity, resided in Scotland.

One to one interviews were conducted and aimed to:

**1) investigate food and feeding-related challenges parents and families have experienced during the first 6 months of their infants' lives**

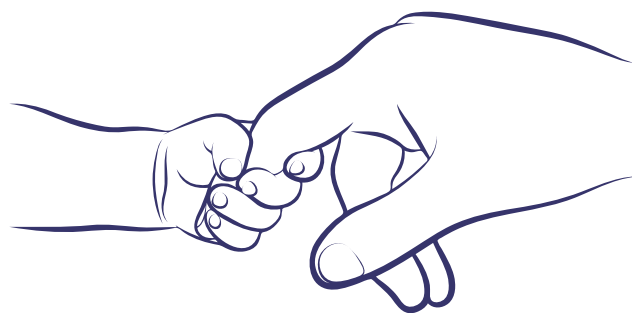
**2) explore parents/carers' experiences of realising (or otherwise) their feeding intentions during their infant's first 6 months**

**3) investigate parents/carers' perceptions of factors that help or hinder their infant feeding experiences.**



In relation to **Objective 1**: three main themes were generated: **i) the struggle to afford food and formula in the face of reduced income**, relates to the notion that living on a reduced income i.e., moving to maternity pay or being in receipt of benefits coupled with an extra mouth to feed leaves limited funds for food and formula **ii) hard work and sacrifice, parents actions to secure food for their baby** details the strategies used by parents such as using low-cost ingredients, freezing food, and accessing food banks and community resources, to ensure their baby's nutritional needs are met, **iii) don't ask, don't tell: conversations with health professionals** highlights lack of discussion with healthcare professionals around parents financial situation and strained bottle feeding conversations and underscores challenges finding suitable infant formula.

For **Objective 2**, two main themes were identified in relation to parents acknowledgement of **i) acknowledging breastfeeding benefits but encountering challenges**, where parents recognise health and emotional benefits and often perceive breastfeeding as budget friendly whilst also speaking to the challenges and difficulties in establishing and maintaining this method of infant feeding and **ii) realising bottle feeding intentions** which highlights parents decisions to bottle feed such as a pre-existing health condition of the mother and managing anxiety, despite acknowledgment of the potential high costs.







Concerning **Objective 3**, three main themes were generated, **i) earning but struggling; not eligible for financial assistance** highlights a lack of financial assistance for those families who do not qualify for government benefits, **ii) income shortfall struggles; the essential support of family and the 3rd sector to meet needs**, which demonstrates how low income parents are often required to seek and receive financial support from family and third sector organisations, leading to the third theme, **iii) stigma and guilt accessing and receiving support** which highlights stigma both perceived and experienced and the guilt experienced by parents in relation to accessing and receiving support.

Overall, the research underscores how financial and food insecurity experiences of those living on a low or reduced income and infant feeding practices interact with and may be impacted by, various support systems including health services, third sector organisations and family. A joined-up approach where healthcare professionals and third sector organisations work together with parents to enable the delivery of both immediate and long-term support may be necessary. New parents favour upstream, Government level changes including easier access to formula for those on low incomes, introduction of a cap on the retail price of formula and a review of rate of statutory maternity pay.



# OBJECTIVE 1

The food and feeding-related challenges parents and families have experienced during the first 6 months of their infants' lives

## THEMES & SUB THEMES

### THE STRUGGLE TO AFFORD FOOD AND FORMULA IN THE FACE OF REDUCED INCOME

- More mouths to feed: Benefits and maternity pay don't cover outgoings, leaving limited funds for food
- High cost of infant formula

### HARD WORK AND SACRIFICE, PARENTS' ACTIONS TO SECURE FOOD FOR THEIR BABY

- Using strategies and multiple sources to maximise food budgets
- Cutting back or going without food to ensure baby is fed

### DON'T ASK, DON'T TELL: CONVERSATIONS WITH HEALTH PROFESSIONALS

- No discussion around financial circumstances
- Strained conversations around infant formula
- Trial and error and sources of advice on suitable formula



# THE STRUGGLE TO AFFORD FOOD AND FORMULA IN THE FACE OF REDUCED INCOME

## More mouths to feed: Benefits and maternity pay don't cover outgoings, leaving limited funds for food

There was a sense that, after paying their bills, parents were left with limited money for food to feed themselves and their family. Parents described having to use food banks, buy cheap food items and limit themselves to one meal a day.



*'at the minute I can't. So, I'm on Universal Credit, which I get £488 a month for everything, you know, and that does not, I mean, once I've paid my bills, like I'm still using food banks...'*

Participant 01 (female, single parent with 1 child)

*'our food bills definitely did go up and have stayed up and probably gone up, well, they're at the highest we've ever been paying just now but, yeah, it was expensive, particularly on statutory maternity pay. I think it's criminal that they expect people to be able to feed a new person but pay you way less than you would normally be getting'*

Participant 02 (female, family of four)



*'we were buying like cheap freezer foods and things like that, especially cause we didn't want to admit to people, to start with, that we were finding it a bit tough. So, we were maybe having one meal a day, erm we were just kind of saving ourselves to dinnertime'*

Participant 10 (female, family of three)

# THE STRUGGLE TO AFFORD FOOD AND FORMULA IN THE FACE OF REDUCED INCOME

## High cost of infant formula

While the high cost of infant formula is not exclusively impacting parents living on a low income, the struggle to access infant formula may be amplified for this group and parents reported having to rely on others to help cover the cost. Parents also expressed worries about the future, specifically the higher costs they faced due to the continually increasing amount of formula required to support their growing infant.



*'when we went onto the Comfort formula, that was twice the price of the Aldi stuff.....the formula he's on now [SMA Soya Milk] it's like the most expensive one. It's, you know, so I think it's like £15.50 and it's...it just is what it is, you know, I get what I can with what I have and then if I am short, I just have to rely on people the best I can, which isn't great.'*

Participant 01 (female, single parent with 1 child)

*'she's going from 4oz, which is four scoops, to 6 at the moment, so that's already 50% extra each one, so it's going to kind of exponentially get faster and faster that we go through it, which is going to get more and more expensive.'*

Participant 03 (male, family of three)



# HARD WORK AND SACRIFICE, PARENTS' ACTIONS TO SECURE FOOD FOR THEIR BABY

## Using strategies and multiple sources to maximise food budgets

The second theme points to the work undertaken and the sacrifices made by new parents to secure food for themselves and their baby. Participants described actions such as careful planning, shopping in multiple stores for various items and the use of apps.



*'So, I get her bottle, I get her milk from one place, her nappies from another place and her wipes from another place. Yeah, which takes a bit more time than just getting everything just in one place. I go to the shops a lot, but I'm lucky, the shops that I've found, it's all kind of walking distance, so, it's not so bad. It's just a lot of planning.'*

Participant 08 (female, family of three)

*'Morrisons do this thing, I can't remember the exact name for it, but they have an app where you can buy parcels of things that are on their last legs, like Too Good To Go, I think it's called, erm, and they give you just a big box of loads of stuff that's maybe on its last couple of days of use and it's almost similar pricing to the pantry... you kind of get what you get. But if you're able to cook, if you're able to have storage to freeze and refrigerate stuff then you should be fine'*

Participant 03 (male, family of three)



# HARD WORK AND SACRIFICE, PARENTS' ACTIONS TO SECURE FOOD FOR THEIR BABY

## Cutting back or going without food to ensure baby is fed

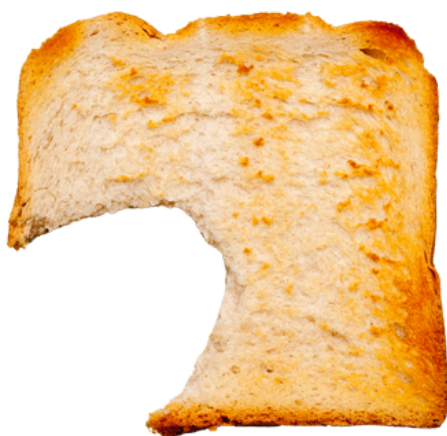
Parents spoke about sacrificing their own nutritional requirements, buying food for themselves from reduced sections in supermarkets or going without food altogether to ensure their child was fed.

*'I kind of find myself skirting about the reduced aisle a little bit more to see what there is cause, rather than just picking what you normally would or if you're going into like a different shop and, say Aldi you walked into, I am a bit more mindful that it's more important for her to be healthy and fed then it is us'*

Participant 06 (female, family of three)

*'it's not been like eating the same as that like most of my money goes on my daughter's food or nappies and wipes so, it's not been the same to eat as I was, obviously, when I didn't have her.'*

Participant 04 (female, single parent with 1 child)



*'I've gone days sometimes and not really eaten very much to make sure that my children have got food in their stomachs'*

Participant 09 (female, single parent with 2 children)

# DON'T ASK, DON'T TELL: CONVERSATIONS WITH HEALTH PROFESSIONALS

## No discussion around financial circumstances

Parents could not recall conversations with health professionals in relation to their financial circumstances. While one participant expressed a belief that there was not much health professionals could do unless someone was financially destitute, another reflected on discussions with healthcare staff as lacking information that is vital to those on a low income, in this case the cost of a supplement the parents were advised to purchase.

*'They never asked that, [ability to afford to buy dairy free formula for baby] no. And I think, but even if, I'd of, let's just say they had asked that...I don't think, what they would suggest? like I know you can get a payment from the social work to support you if you're kind of financial destitute but that obviously comes with stigma attached to it as well, erm, that wouldn't be a regular payment, so I don't know.'*

Participant 02 (female, family of four)

*'it [conversations with health visitor] was more kind of...if baby has this problem, this is maybe a solution...for example, if they have reflux, you can use Gaviscon, or you can use probiotics, but they didn't say where you can get them from or how expensive they are, which are the kind of key pieces of information you want to know... I don't know, I mean, we all like to make assumptions, it's human nature so they just thought, oh, you guys should be fine, I don't know, cause I don't know the scope of other families that they deal with'*

Participant 03 (male, family of three)



# DON'T ASK, DON'T TELL: CONVERSATIONS WITH HEALTH PROFESSIONALS

## Strained conversations around infant formula

Parents described conversations with health professionals surrounding bottle feeding being shut down, strained, vague and robotic.



*'It was quite funny because they, they were saying something about, you know, the formula, they would start with, I should, I'm not allowed to say it but...I think they are troubled...I think it's just, I do understand historically why, why they had to do it but I think it's just went a little bit too far'*

Participant 07 (female, family of three)

*'our health visitor for baby was very supportive and, you know, gave recommendation but it was a little robotic in that, she's say things like, I'm not allowed to advocate for set product but we'd recommend doing this, but if you want to do that you can, so it was a little bit vague'*

Participant 03 (male, family of three)





# DON'T ASK, DON'T TELL: CONVERSATIONS WITH HEALTH PROFESSIONALS

## Trial and error and sources of advice on suitable formula

Potentially due to this lack of or strained conversations around bottle feeding with health professionals, parents spoke of the often lengthy and potentially costly journey of trial and error in accessing suitable infant formula for their baby. Parents also described seeking information on infant formula from unregulated sources including social media platforms Facebook and TikTok.



*'It was Aldi's, then we tried Cow and Gate...then we moved onto SMA comfort formula for colic and constipation, which made an ever so slight difference, but he was still screaming in agony for hours, and then last week, I went onto to SMA soya formula.'*

Participant 01 (female, single parent with 1 child)



*'so we're on Kendamil...It's not the easiest brand to get but that's the one she won't, the other ones she was sick with, like the, the blue coloured ones, I can't remember its name...we've read up on it and.. it's becoming a big thing because a lot of like YouTubers and TikTok'ers, like influencers, are using it'*

Participant 04 (female, single parent with 1 child)

*'there's Aberdeen, sorry, Mum's in Aberdeen and Shire Facebook group and it's quite, quite handy and a lot of mums were saying that the Lidl and Aldi own brand, they are quite, they are good. So, that's what we are using and she's looking fine.'*

Participant 07 (female, family of three)

# OBJECTIVE 2

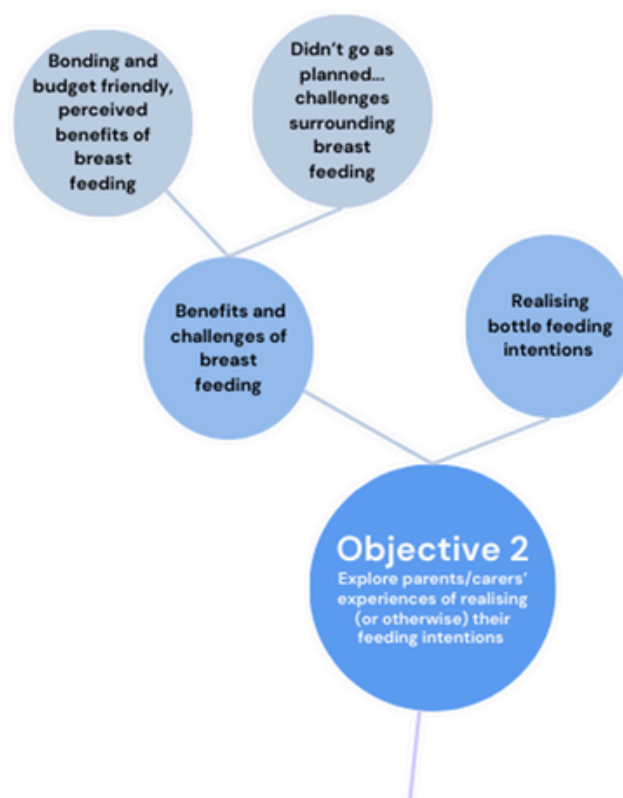
Parents/carers' experiences of realising (or otherwise) their feeding intentions during their infant's first 6 months

## THEMES & SUBTHEMES

ACKNOWLEDGING BREASTFEEDING BENEFITS BUT ENCOUNTERING CHALLENGES

- Bonding and budget friendly, perceived benefits of breastfeeding
- Didn't go as planned...challenges surrounding breastfeeding

REALISING BOTTLE FEEDING INTENTIONS



# ACKNOWLEDGING BREASTFEEDING BENEFITS BUT ENCOUNTERING CHALLENGES

## Bonding and budget friendly, perceived benefits of breastfeeding

The majority of participants described intending to breastfeed their baby. New parents living on a low income shared that this decision stemmed from knowledge of the physical health benefits breastfeeding provides for both mother and baby as well as emotional benefits in terms of bonding. Breastfeeding was also often viewed as cost saving or free.



*'my reasons for breastfeeding were health for the baby, health for me, bonding, the whole of being like, you know, you breastfed your child and ease, definitely was one of the big reasons as well, cause it's just so easy, you don't need to mess about, I know from doing a bit of the formula feeding with the prescribed formula that it was a faff. But, and also, it [prescribed formula] just doesn't smell or taste very good, well, I never actually tried my breast milk, but I'd imagine it tasted better'*

Participant 02 (female, family of four)

*'we always had the conversation of breastfeeding, and we always thought, well, because of the benefits of it we'll give it a go...when we were doing the kind of pros and cons, the nutrients the baby gets from them was the main thing'*

Participant 03 (male, family of three)

*'breastfeeding's on demand, it's free, the right temperature, you don't need to take anything with you'*

Participant 06 (female, family of three)

# ACKNOWLEDGING BREASTFEEDING BENEFITS BUT ENCOUNTERING CHALLENGES

## Didn't go as planned...challenges surrounding breastfeeding

While seven parents indicated they intended to breast feed, only three reported exclusively breastfeeding or combi feeding their baby.

Breastfeeding challenges included anxiety around whether their baby was getting enough milk and problems initiating feeding. Even those participants who continued to breastfeed acknowledged the challenges, despite reporting good support from health professionals.

*"I tried in hospital, and I started getting really anxious really quickly that she wasn't getting enough, and the nurses had told me, no, you're fine... I couldn't let go of that idea that she wouldn't be getting enough from me... So, I asked if I could try pumping, and I got a pump given by one of the nurses, nothing came out but, again, I think I was spiralling, thinking oh my god, I can't, I need to formula feed...we're still formula feeding now cause I think it's, it's easier for everybody, if someone's looking after her, it's just easier "*



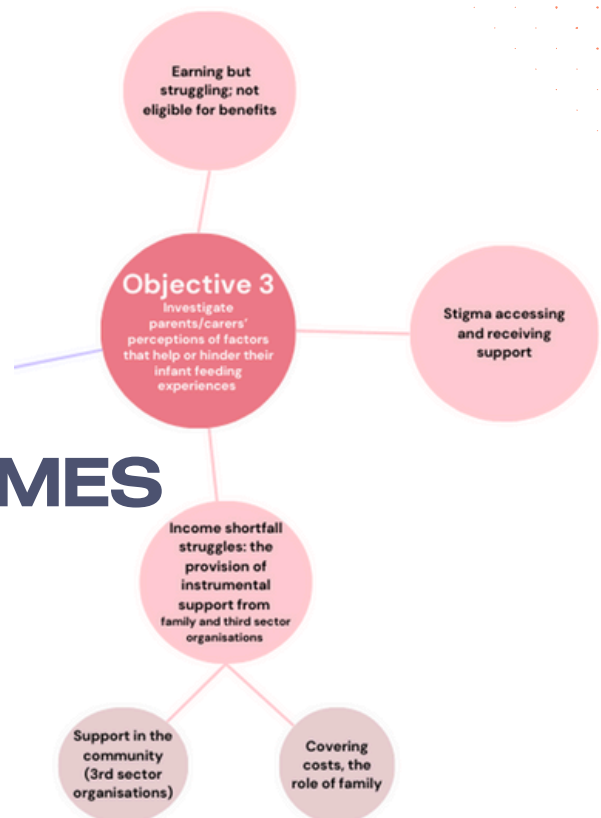
Participant 06 (female, family of three)

*'I got a great help from, I had an amazing health visitors, and the midwives and everything but, you know, I know it's, it's natural to, to breastfeed your baby but it's not actually coming so easy for every, for everyone...I don't think I had the, the, the, depression after birth or nothing like that but every day there was a, a few times a day when I would be just sit in the bathroom and crying because I can't feed her, she's screaming, I don't know what else to do and I think it's understandable that a lot of mothers will be forced to give up'*

Participant 07 (female, family of three)

# OBJECTIVE 3

Parents/carers' perceptions of factors that help or hinder their infant feeding experiences.



## THEMES & SUBTHEMES

EARNING BUT STRUGGLING;  
NOT ELIGIBLE FOR  
FINANCIAL ASSISTANCE

INCOME SHORTFALL STRUGGLES: THE ESSENTIAL  
SUPPORT OF FAMILY AND THE 3RD SECTOR TO  
MEET NEEDS

- Covering costs, the role of family
- Support in the community (3rd sector organisations)

STIGMA AND GUILT ACCESSING AND RECEIVING  
SUPPORT

## EARNING BUT STRUGGLING; NOT ELIGIBLE FOR FINANCIAL ASSISTANCE

Many participants included within this project reported being ineligible for government assistance/ benefits due to either their partners income or being on maternity leave from paid employment and in receipt of maternity pay. Participants called for financial support for those families in work who are struggling.

*'I am a bit bitter there's not, you know, most of the supports, and quite rightly so, are aimed at the, you know, the low income families in the area, but you do feel sometimes like there's a sort of middle group of people, not the high earners, not the non-earners, that are like kind of ignored in it but they'd still be struggling because of the cost of living essentially, that's all it comes down to, if things had stayed the same as pre-Covid, or even during Covid, we'd probably be quite okay but it's because of the cost of living like everything's just gone up so much that you think, well, what, what support are you entitled to as somebody who's earning though.'*

Participant 02 (female, family of four)



*'we feel like we're in a really bad category because, obviously, people there are kind of not as, in a, maybe at a less sort of financial situation, they obviously get the help of benefits to bring up their wages, and then the people who have got good businesses, plenty of money, they're fine, they're comfortable, but us as like the working class, like me and my husband...we feel like we hit a brick wall all the time when it comes to trying to get help from different places and we, it's almost like you're being punished for something, but you don't know what it is because you've always worked, you've never not worked'*

Participant 10 (female, family of three)

# INCOME SHORTFALL STRUGGLES: THE ESSENTIAL SUPPORT OF FAMILY AND THE 3RD SECTOR TO MEET NEEDS

## Covering costs, the role of family

New parents living on a low income, often described the generosity of their family in alleviating financial shortfalls and providing monetary assistance or helping secure food during times of need.



*“my sister's quite good, she works...she'll buy a tin of formula and she's quite good to help us out if needed“*

Participant 04 (female, single parent with 1 child)

*“my mother, you know, was helping us a little bit as well, you know... when she was coming over, every time she come over she would take us shopping”*

Participant 07 (female, family of three)

*“then there's, my mum, she's a great help to me as well if I'm ever, ever struggling. She'll either give me money that I'm need, whatever I'm needing, or she'll go and get what I need for me if I can't get”*

Participant 05 (female, single parent with 1 child)

# INCOME SHORTFALL STRUGGLES: THE ESSENTIAL SUPPORT OF FAMILY AND THE 3RD SECTOR TO MEET NEEDS

## Support in the community (3rd sector organisations)

The supportive role of third sector organisations were described as a lifeline for many low income parents. These organisations provided much needed equipment (i.e., bottles) or financial aid (i.e., the cash first response which provided parents the monetary resources required to acquire infant formula).



*“the first round of bottles I got he didn't like and the second round of bottles I bought, he didn't like so by the third ones, these were just like ones that I managed to scrape together in a charity shop, and he did like them. Couldn't afford them cause they were the most expensive bottle on the planet, so I had to use AberNecessities and they rocked up at my door with like ten bottles and saved the day...”*

Participant 01 (female, single parent with 1 child)

*“CFINE actually gave us some funding. They gave us £60, which then meant we could get four tubs [of formula], and that's lasted us about a month. So, maybe a tub or a week or so, give or take...”*

Participant 03 (male, family of three)





# STIGMA AND GUILT ACCESSING AND RECEIVING SUPPORT

Participants described perceived stigma around accessing support from a food bank as well as a sense of guilt from receiving support from family members given the expense of equipment such as sterilisers.

*'it's like, like, I used to have a really good job...taking your newborn baby and son over to queue outside a food van, it's embarrassing but, I had to do it,'*

Participant 09 (female, single parent)

*'we've got a food bank as well now, but not a lot of people uses it because of like, if someone sees you going in there it's like, it'll be the talk of the town, like, that's how [name of town] is, cause it's a small town...it's just, really things like that, it knocks a lot of people down like.'*

Participant 04 (female, single parent with 1 child)



*'so my mum and dad helped quite a lot out...And my granddad as well, he got, got us a couple of things...But I kind of feel like I couldn't ask for them so I kind of waited until like the last minute and they kind of offered. I was like, oh thanks...Especially cause like things are, you know, you've got, things are not cheap...Even like a sterilizers £15, £20 nowadays, you know, for like a, a basic one.'*

Participant 08 (female, family of three)



# THEMATIC MAP

Full updated DIO Food thematic map

## Thematic map DIO Food





*We would like to thank all the parents who took the time to speak with us and share their valuable expertise.*

*Additionally, we extend our gratitude to the members of our DIO Food Advisory Group for their guidance and support in the development and delivery of this project.*



**If you have any questions or comments, please get in touch with our study authors...**



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