



## FAQs: Distribution of infant formula via food banks and baby banks

### Background

Very high levels of food insecurity among families with young children<sup>i</sup> threatens their health and development. Babies under 1 year are the most vulnerable because of their unique and specific nutritional needs. Public health recommendations support breastfeeding as optimal for infant, young child and maternal health<sup>ii</sup>. The majority of expectant and new mothers in the UK want to breastfeed, but most babies are fed formula from the first weeks and months of their lives.

While breastfeeding protects babies against infection and ill health in the short and long term, babies who are formula fed are more vulnerable to serious illness such as gastroenteritis (including necrotising enterocolitis) and respiratory tract infections<sup>iii, iv, v</sup>. Research from the UK shows that the risks of formula feeding are magnified for babies living in poverty<sup>vi</sup> whose families may struggle to access the resources needed for safe infant formula preparation. Data from the US examining the impact of national formula shortages also show how inconsistent supply of formula can lead to dangerous practices like watering down formula or using home-made versions, especially among poorer households<sup>vii, viii</sup>.

Formula feeding requires significant resources that are more difficult to access if a baby's parents or carers are struggling to afford essentials. Food insecure families need a guaranteed supply of infant formula for as long as their baby needs it (typically to 12 months of age), and the resources for safe preparation, feeding and storage, including fuel to heat water, bottles and teats, and the means to clean and sterilise them.

Efforts to support families experiencing food insecurity to feed their babies must be comprehensive to prevent inadvertent harm in the short and long term. This means not disrupting breastfeeding, and if providing formula feeding support, doing so with a complete package of care for as long as the baby needs it. While well intentioned, one off/temporary and/or partial assistance which does not meet these needs in full, poses real risks to babies' health.

### FAQs

**Q: Does UK legislation prohibit or prevent food banks and baby banks from providing infant formula?**

**A:** UK legislation regulates the marketing and composition of infant formula. UK legislation does not regulate the distribution of infant formula through food banks and baby banks<sup>ix</sup>. **In fact, UK legislation does not include any provisions related to infant feeding in crisis situations.**

**Q: What does UK legislation restrict in relation to infant formula?**

**A:** UK legislation is meant to restrict the **marketing** of infant formula. It is informed by the World Health Assembly's International Code of Marketing of Breastmilk Substitutes and subsequent resolutions ('the Code'), but it is much weaker in content<sup>x</sup>.

**Q: What is the International Code of Marketing of Breastmilk Substitutes and what is its purpose?**

**A:** The Code (including subsequent World Health Assembly resolutions) was established to protect all infants and families by ensuring safe and appropriate feeding, protecting breastfeeding and ensuring safe and appropriate formula feeding where needed. The purpose of the Code is to prevent the profits of companies

from being put ahead of the needs of infants and families, by preventing inappropriate marketing of breastmilk substitutes, including formula milks, bottles and teats.

The Code includes provisions to prevent vulnerable situations from being misused by manufacturers and distributors of infant formula for marketing purposes. For example, some companies have used emergency situations to market their products or brand or have used vulnerable or emergency situations to 'dump' products (where they may have excess or product that is close to its expiry date). The Code intends to protect the public from such practices. The Code **does not** prevent infant formula from being made available or distributed appropriately to families who need it.

**Q: Is there Code-compliant guidance currently available in the UK to help food banks and baby banks safely provide infant formula to families who need it?**

**A:** In the absence of UK legislation that incorporates the Code in full, there is a *Guide for local authorities and health boards supporting families with infants under 12 months experiencing food insecurity*<sup>xi</sup> compiled by Unicef UK, First Steps Nutrition Trust and the National Infant Feeding Network in 2022. The guidance does not provide specific directives for food banks or baby banks but demonstrates how local authorities and health boards can collaborate with various community resources including organisations like food banks to ensure comprehensive support for families in need. Acknowledging that parents/carers presenting at food banks and baby banks in crisis may need immediate support, this guide incorporates the Code's standards and is based on the following principles:

- **Ideally infant formula would not be distributed by food banks or baby banks.** This is because the supply of infant formula cannot always be sustained and the cost of infant formula could be unmanageable for families, and because it may be challenging to re-establish breastfeeding in cases where a baby is being mixed fed. **The most appropriate way for families who need formula to be able to access it, is through UK public services.** For example, local authority and health board teams may partner with frontline organisations able to purchase infant formula through regular procurement channels such as through procurement officers and using the NHS Supply Chain (and not via free or subsidised supplies). Food bank staff can contact the health visiting service, public health team, locally commissioned specialist infant feeding team, where available, or Local Authority or Health Board to find out how to make a referral to the appropriate health professional and/or other local services available to support families in crisis. This can be called a local emergency infant feeding pathway. In some areas, local authorities or health boards provide crisis loans or shopping vouchers or gift cards which can be used for essential items like infant formula.
- **When other support options have been explored, need remains, and food banks are in a position to do so, cash payments or shopping vouchers or gift cards can be offered to parents or carers by food banks and baby banks to enable them to buy their usual infant formula.** If distributing infant formula directly, it should be procured and only given to infants who require it, for as long as they need it<sup>xii</sup>. It should be provided with appropriate, accurate information, counselling and additional support for its safe preparation (including access to skilled infant feeding support and an out-of-hours contact line).
- **Any support provided to families at risk of food insecurity should ensure that short- and long-term health and well-being outcomes are optimised, and any risks minimised.** For example, ensuring a continuous supply of infant formula for as long as needed, and that the family have the facilities to make up formula safely, etc.
- **Mothers who present at a food bank or a baby bank with breastfeeding challenges<sup>1</sup> and who request infant formula, but want to keep breastfeeding, should be provided with food and/or income support and referred for breastfeeding support<sup>2</sup>.**

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<sup>1</sup> e.g., problems latching, low milk supply or any practical difficulties with breastfeeding such as nipple pain, etc.

<https://www.nhs.uk/conditions/baby/breastfeeding-and-bottle-feeding/breastfeeding-problems/common-problems/>

<sup>2</sup> With respect to breastfeeding and food insecurity, it is a common misconception that if a mother is hungry or has a poor diet, she will be less able to breastfeed, or her breastmilk quality will be affected. The reality is that breastmilk production is resilient, and milk quality is not significantly affected by maternal diet. A mother who wants to breastfeed should be provided with the food and support

**Q: Despite the crisis situations faced by parents and carers, why are food banks or baby banks not the preferred source of support for families needing infant formula?**

**A:** Food banks and baby banks might be considered a first point of contact for families in crisis, however because they often rely on donations and may have limited opening times, they may not be able to guarantee a timely or consistent supply of the appropriate infant formula to meet the baby's needs. Many food banks and baby banks operate with limited resources and are not always able to fill all the gaps in statutory services. Food bank and baby bank staff and volunteers should not be expected to assess, plan and put into place the strategies needed to ensure that the short- and long-term needs of babies are met in what can often be very complex situations. This is the responsibility of the statutory services (including maternity, health visiting, public health and social services). There is potential risk of providing an inappropriate infant formula (for example, if the baby is under six months old, a follow-on formula would be inappropriate and could cause harm) or providing infant formula to a breastfeeding women and thereby undermining breastfeeding. There is also the potential risk of families being delayed from being referred for any further support they might require and are eligible for. **However, food bank and baby bank teams often need to provide immediate support and in this case the provision of cash payments, shopping vouchers or gift cards or the provision of infant formula purchased by the food bank is preferred than giving out donated infant formula.**

**Q: How does the Healthy Start/Best Start Foods allowance fit in?**

**A:** These schemes are intended to assist low-income families to purchase healthy foods and, if needed, infant formula. However, the current Healthy Start allowance of £8.50 per week for children under one year old is insufficient to cover the cost of many infant formula brands available in supermarkets (Best Start Foods provides £9.90). Additionally, restrictive eligibility criteria mean that many families experiencing food insecurity do not benefit from the scheme (such as families with no recourse to public funds). Significant improvements are needed to Healthy Start, including increased voucher value, expanding eligibility criteria and improving uptake. Families who have not yet been able to access Healthy Start should receive interim support to obtain infant formula, ideally through referral to a health visiting service or local authority health service or infant feeding team. This is important so that any additional support needs are identified, and appropriate referrals made, and to ensure that families can prepare infant formula safely.

**Q: Why does the *Guide for local authorities and health boards supporting families with infants under 12 months experiencing food insecurity* not specifically reference baby banks?**

**A:** Baby banks are a relatively new phenomenon, but the same principles apply to baby banks as they do to food banks when it comes to supporting families in crisis, including those struggling to feed their babies.

**Q: Why are donations of infant formula to food banks and baby banks discouraged?**

**A:** There are several concerns associated with donations of infant formula, including that a consistent supply needs to be ensured, the safety and proper storage of donated formula needs to be guaranteed, it needs to be ensured that families receive an appropriate formula for their infant (e.g., a follow-on formula should not be provided to an infant under 6 months of age) and any unintended consequences, such as undermining breastfeeding and safe and effective support for formula feeding need to be avoided. There is also potential for such situations to be misused (donations from companies have been shown to be used for marketing purposes and to create brand awareness and familiarity among consumers). For these reasons it is important that infant formula is not indiscriminately distributed, and that donations are not accepted. **Ultimately, the concern is that babies will become sick. Any infant formula purchased by food banks, baby banks, local authorities or health boards should be bought through the NHS Supply Chain<sup>xiii</sup> or from a nearby shop and other regular procurement procedures (by local procurement officers) and as above, provided for as long as needed and as a part of a comprehensive package of support.**

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she needs to meet her goals. Sometimes breastfeeding mothers worry they are not producing enough milk. Most mothers can produce enough milk, but a minority of women might not. However, with proper support, milk supply can usually be increased.

**Q: What actions should be taken to improve the situation for families?**

**A:** Priority actions should include<sup>xiv</sup>:

- Price controls on infant formula, to bring the cost down across the board and in the long term so that it is affordable to all families who need it, when they need it,
- Stronger, enforced formula marketing regulations, to remove commercial influence from decisions about infant feeding,
- Universal, accessible breastfeeding support so all women can meet their breastfeeding goals,
- Reform of Healthy Start, to ensure it can act as the nutritional safety net it is meant to be for the most vulnerable.<sup>xv</sup>

Additionally, the Government could consider investigating the provision of a national infant formula, provided in standardised packaging.

**Summary**

Infant formula should always be accessible to families who need it for as long as they need it, and any additional support needs they may have to use it safely should also be met to minimise risks to their baby's health.

Rather than relying on food and baby banks, the Government needs to take action to address infant food insecurity at a population level so all women and families can meet their infant feeding goals, and to ensure optimal health and development of our young children.

Decisions around distributing and using infant formula should be based on accurate information as detailed above and within the *Guide for local authorities and health boards supporting families with infants under 12 months experiencing food insecurity*. Parents and carers struggling to afford to feed their babies or themselves should also be offered routes to advice and support to maximise income and any additional support needs they may have should be met through statutory services.

**Further reading:**

- International Code of Marketing of Breastmilk Substitutes and subsequent World Health Assembly resolutions: <https://www.who.int/teams/nutrition-and-food-safety/food-and-nutrition-actions-in-health-systems/code-and-subsequent-resolutions>
- Baby Feeding Law Group UK. Current UK Laws: <https://www.bflg-uk.org/uk-laws>
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  - Reducing infant and maternal food insecurity in the UK. (November 2024.) [https://www.foodaidnetwork.org.uk/\\_files/ugd/95a515\\_e28c4ccc767a41b287f1b62f39796369.pdf](https://www.foodaidnetwork.org.uk/_files/ugd/95a515_e28c4ccc767a41b287f1b62f39796369.pdf)
  - Infographic. Building pathways to income max support. [https://static.wixstatic.com/media/6bacb0\\_618c85e9402f49a2a98d1343ee58a3c1~mv2.png](https://static.wixstatic.com/media/6bacb0_618c85e9402f49a2a98d1343ee58a3c1~mv2.png)
- Scottish Government. February 2024. Guide to Responding to and Preventing Infant Food Insecurity in Scotland. <https://www.gov.scot/publications/guide-responding-preventing-infant-food-insecurity-scotland/>
- Making infant formula safely: <https://www.firststepsnutrition.org/making-infant-milk-safely>
- National Breastfeeding Helpline: Tel: 0300 100 0212
- The Breastfeeding Network: <https://www.breastfeedingnetwork.org.uk/>

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## References

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- <sup>x</sup> Ibid
- <sup>xi</sup> <https://www.unicef.org.uk/babyfriendly/wp-content/uploads/sites/2/2022/10/A-Guide-for-Local-Authorities-UNICEF-UK-Baby-Friendly-Initiative.pdf>
- <sup>xii</sup> Article 10(4) of Commission Delegated Regulation (EU) 2016/127 supplementing Regulation (EU) No 609/2013 of the European Parliament and of the Council as regards the specific compositional and information requirements for infant formula and follow-on formula and as regards requirements on information relating to infant and young child feeding. <https://www.legislation.gov.uk/eur/2016/127/article/10>
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