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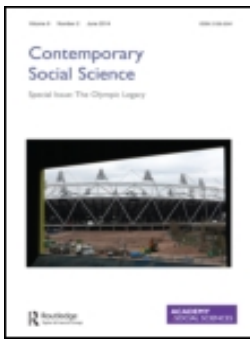
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# Covid-19 and the crisis of food insecurity in the UK

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## ABSTRACT

Over the past decade, food insecurity has been increasing across the United Kingdom. The 2020/21 Covid-19 global pandemic has further aggravated food insecurity. This article examines how Covid-19 affected food insecurity through, first, a review of existing literature on the UK and, second, through presenting research results from Scotland with a focus on four groups considered to be specifically vulnerable to food insecurity – namely people with a disability, the homeless, young carers, and (destitute) asylum seekers. The article finds that Covid-19 impacted food insecurity in three ways: (1) it led to rising need driven mainly by income reductions and income crises; (2) it created new and intensified food access challenges; and (3) it had a significant impact on the operation of food banks and their important ‘wrap-around’ services (e.g. benefits advice). The article concludes with a discussion of the role of the social sciences in understanding the food insecurity crisis during Covid-19. In summary, the article adds to the developing understanding of the consequences of Covid-19 on food insecurity, the effectiveness of policy measures and the role that social sciences can play in times of crisis.

## ARTICLE HISTORY

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## KEYWORDS

Food insecurity; food poverty; United Kingdom; Scotland; Covid-19

## Introduction

Over the past decade, food insecurity has been increasing across the United Kingdom (UK). Food insecurity – an experience that ranges from worrying about being able to obtain enough food to going hungry (Taylor & Loopstra, 2017) – is a risk ‘normally’ faced by the most vulnerable members of society. This includes those on low incomes and those lacking support networks (Joseph Rowntree Foundation, 2018). Evidence suggests that food insecurity grows during periods of economic crisis (Macleod, 2019). A recent review of the existing literature showed that women are specifically at risk of food poverty (Dempsey, 2020) while other research has shown single mothers and their children making up the largest number of Trussell Trust food bank users (Loopstra & Lalor, 2017). Not everybody in food insecurity uses food banks, but those using food banks should be, according to Sosenko et al., considered to be in ‘severe food insecurity’ (Sosenko et al., 2019, p. 10). The rise in food insecurity across the UK can be evidenced by the number of food parcels handed out. The Trussell Trust – the

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UK's largest food bank operator – more than doubled the number of such parcels in the UK between 2013/14 and 2019/20 when 700,000 households were using its food banks (Bramley Treanor, Sosenko, & Littlewood, 2021). The 2020/21 Covid-19 global virus pandemic, affecting the UK since early 2020 and leading to far-reaching 'lockdowns' of social and economic life, has further aggravated food insecurity. A survey by the Food Standards Agency (FSA), conducted in spring and summer 2020, demonstrated this in two distinct ways: the growth of food bank use between May and July 2020 by 10% and the extension of food insecurity to social groups hitherto not or barely affected by it (FSA, 2020).

This article examines how Covid-19 affected food insecurity through, first, a review of existing literature on the UK and, second, through presenting original research results from Scotland with a focus on four groups considered to be vulnerable to food insecurity – the homeless, people with a disability, (destitute) asylum seekers and young carers. The article also discusses how the UK and devolved governments but also local governments, have sought to mitigate the impact of the pandemic on food insecurity. Reactions from the third and private sectors to mitigate food insecurity are considered, too. The article concludes with a discussion of the role of the social sciences in understanding the food insecurity crisis during Covid-19.

By doing so, the article adds to the understanding of the consequences of Covid-19 on food insecurity, the effectiveness of policy measures, and the utility of social sciences in times of crisis.

### *The social dimension of Covid-19: the problem of food insecurity*

The following discusses the impact of Covid-19 on food insecurity across the UK through a literature review and by presenting insights from a research project conducted by the authors in summer 2020, on how Covid-19 impacted specifically on the four aforementioned groups. The review considers academic, grey and journalistic literature as well as organisational and project webpages published between March 2020 and June 2021. This broad understanding of 'the literature' was taken due to the rapidly evolving nature of the crisis, which meant that the academic literature was not always able to 'keep up with events'. Moreover, the authors decided that including a wider range of published voices was imperative to establishing a more comprehensive understanding of the situation. Search terms were used related to food insecurity (e.g. access to food, food aid, and food bank) and were used in conjunction with terms related to the Covid-19 crisis (e.g. Covid-19, SARS-COV-II, coronavirus). These were applied in various combinations to both academic databases and general internet search engines. The research project (see Dempsey & Pautz, 2021 for the full April 2021 report), supported by the long-standing partnership between the University of the West of Scotland and Oxfam Scotland, generated data through eleven interviews with representatives of organisations able to speak about how the four demographic groups were affected by Covid-19. Notes were taken to record the semi-structured interviews, which lasted between 30 minutes and one hour. All interviewees and their organisations were secured on an anonymous basis to allow interviewees to speak more openly. Because of the small number of interviews, the data generated allowed a 'snapshot insight' into an emerging crisis rather than a fully-fledged analysis. However, the research permitted first insights into what Covid-19 meant for these groups.

While the choice of an anonymous approach made it easier to secure interviews and sped up the university-internal ethical approval process and the delivery of the project, it may also have reduced the media echo of the report and, therefore, its impact on policy-makers and public. The absence of quotes attributed to identified authoritative voices from ‘the field’ proved problematic as journalists were keen to approach those interviewed for the project and felt that without such interviews, they could give the report no or less prominence in their media outlets. Nonetheless, the open-access report generated a considerable echo in the media across the UK – no doubt promoted by the fact that it was not ‘merely’ an academic report but one produced in collaboration with Oxfam Scotland.

### *The demographics of food insecurity in times of Covid-19*

As the UK officially entered recession in August 2020 (BBC, 2020a), Cummins et al. (2020) highlighted how the economic downturn would increase the number of low-income households due to rising unemployment or fewer working hours. The ONS found that workers on already lower incomes were more likely to see their income fall further (ONS, 2021). As reduced household incomes can lead to food insecurity, Loopstra compared survey data with data from the Food Standards Agency’s mapping of food insecurity in the UK prior to Covid-19. She found that 16.2% of respondents experienced food insecurity, suggesting a four-fold increase over 2018 (Loopstra, 2020). Beyond skipping or reducing meals sizes, respondents also reported going full days without eating because they could not afford or access food. An additional 21.6% of adults reported feeling ‘very’ or ‘fairly worried’ about obtaining food during the Covid-19 outbreak. Echoing such findings, Koltai et al. established through their survey that in April 2020, 7.1% of respondents reported food insecurity. By July, this had increased to 20.2%. They also found that the

prevalence of food insecurity rose for all socioeconomic and demographic and groups [...], but did so for some more than others. Some of the largest increases in food insecurity were among Asian respondents, the self-employed, respondents aged 35-44, and those living in Scotland, London, and the North West of England. (Koltai, Toffolutti, Mckee, & Stuckler, 2020, p. 5)

Connors et al. reported that increased vulnerabilities to food insecurity were suffered particularly by those in precarious (self-)employment and already living on low incomes. For example, those in casual work, on zero-hour contracts or in training schemes did not benefit from the ‘furlough’ job retention scheme. Likewise, some self-employed were ineligible for furlough and other support schemes (Connors et al., 2020).

Children in low-income households have been deemed particularly at risk of food insecurity because of the pandemic. Key reasons here are reduced access to (free) school meals as a consequence of school closures with the first lockdown in late March 2020 when only children of ‘key’ workers were able to attend school and receive food there (Van Lancker & Parolin, 2020).

Due to the pandemic, new forms of social separation appear to have developed between younger and older people, between those deemed at high risk of contracting the virus because of advanced age or existing health conditions and those deemed in

good health, and between those showing Covid-19 symptoms and those appearing healthy (Dempsey & Pautz, 2021; Groarke et al., 2020). Early on in the crisis, those with symptoms were instructed to 'self-isolate' in order to halt the spread of the disease, while those in the 'at risk' category were told to 'shield' by staying at home and avoiding social contacts. Taylor (2020) estimated the number of people at elevated risk from the virus in the UK to be as high as 17.6 million, and Loopstra warned about the consequences of social isolation on food security: 'People with health conditions are already at heightened risk of not being able to afford enough food to eat, and these social distancing measures will create new risks arising from being physically unable to access food' (Loopstra cited in Taylor, 2020).

During the crisis, the financial element of food insecurity intersected with social distancing rules, 'stay at home' requirements and appeals and self-isolating measures that made physical access to food more difficult. This intersection is particularly visible in the experience of people with a disability and their households. People in families with a disabled member are more likely to be at risk of poverty than people in families without a disabled member (Joseph Rowntree Foundation, 2018). When Covid-19 increased the reliance of those among the disabled who were shielding on online grocery shopping, food costs rose because of the extra costs of online shopping. Given the already existing digital exclusion of people with a disability (ONS, 2019), the Glasgow Disability Alliance argued that 'Covid-19 is supercharging inequalities already faced by disabled people' (GDA, 2020, p. 1).

A report by Sheffield University and Birmingham University examined how unpaid carers have had to increasingly use food banks since the start of the Covid-19 pandemic. It found that carers looking after someone outside their own household were twice as likely to use food banks as members of the general public during the pandemic. Among these carers, 3.5% said someone in their household had gone hungry in the previous week, an estimated 228,625 carers in the UK (Bennett, Zhang, & Yeandle, 2020).

### *Food affordability and food access problems*

The literature argues that the Covid-19 crisis made it more difficult for some people to afford and access food. For example, there were those who, despite having sufficient resources to buy the food they needed, found it more difficult to access because they were self-isolating or shielding (Connors et al., 2020; SPIRU, 2020). Rayner (2020) argued that 'panic-buying' and bulk-buying in the early weeks of the crisis had a detrimental impact on the availability of certain food stuffs, even if only for a relatively limited period. Lastly, food banks either closed or drastically re-organised their services whilst often struggling to obtain sufficient food of the right quality and having to cope with fewer volunteers.

Loopstra discussed some of these new Covid-19 related barriers to accessing food based on survey data. She found that in early April, out of all adults who stated that they had experienced food insecurity, 40% said that it was due to lack of food in shops only. This problem was linked to shocks to the supply chain and to a surge in demand. For 'economic reasons alone', according to Loopstra, around 16% said they experienced food insecurity. An equal percentage cited 'isolation' and 'shielding' as reasons for food

access difficulties. About 15% reported food insecurity arising out of a combination of these factors (Loopstra, 2020).

As the pandemic and the ensuing lockdown revealed the fragility of the UK's food system, Taylor implored the UK Government to 'reinvent' the way in which the British public feeds itself (Taylor, 2020). In a similar vein, Sanderson Bellamy et al. hoped that the Covid-19 crisis would open 'opportunities for innovation and for less-powerful actors to nudge the regime towards desirable longer-term outcomes: resilient food systems that are sustainable, just and inclusive' (Sanderson Bellamy, Furness, Nicol, Pitt, & Taherzadeh, 2021, p. 783).

Covid-19 impacted also on food aid services. Two reports argued that there was a sustained surge in food aid demand following the lockdown in late March 2020. The Trussell Trust reported an 81% increase in the need for emergency food parcels, along with a 122% rise in food parcels being given to children (The Trussell Trust, 2020b). Independent food banks witnessed a 175% increase in emergency food parcels distributed between February and May 2020 over the same period in 2019 (IFAN, 2020). This surge occurred at the same time – and for similar reasons – as food aid services struggled to maintain their operations. Power, Doherty, Pybus, and Pickett (2020) noted that the stock piling and 'panic buying' characteristic of the first weeks of the pandemic meant less availability and accessibility of food supplies to food banks as fewer food donations came from households and supermarkets. They also argued that, at least at the start of the crisis, food banks found it hard to purchase food in bulk from wholesale vendors and supermarkets as these were rationing their stock. Finally, some observed that food banks were overwhelmed by the increase in demand but needed to send older volunteers or others in the 'at risk' category home to protect them from the virus (Butler, 2020; Power et al., 2020; The Trussell Trust, 2020b).

As the Trussell Trust reports, some food banks faced difficult decisions about whether to stay open during the pandemic at all (The Trussell Trust, 2020a) and had to re-organise services to ensure that public health requirements were met. This included minimising contact in the buildings where the food banks operate, queues located outside the buildings rather than inside them, and a reduced number of food bank sessions. Other measures included setting up new services such as home deliveries (The Trussell Trust, 2020b). Some of the changes in service delivery were said to be detrimental for service users' wellbeing and may have increased the stigma around food bank use. As Power et al. put it:

There is a danger that care, sign-posting, and choice – essential to the dignity and agency of service users – will be removed from the food bank interaction. This may undermine the role of food banks in addressing social isolation and acting to prevent the reasons for food bank attendance – the root causes of food insecurity – through onward referral, and may exacerbate the pre-existing stigma of food bank use. (Power et al., 2020, p. 8)

While established food banks had to make difficult decisions about if and how to continue their services, the pandemic also saw new food aid providers enter the field. For example, associations of volunteers supporting their local community referred to as 'mutual aid' groups emerged across the UK. Early overview research by Volunteer Scotland in April 2020 found that in the 'space of only four weeks or so over 200 mutual aid groups have been formed with an estimated 116,000 members' in Scotland alone

(Volunteer Scotland, 2020, p. 3). While it is not clear how many of these delivered food aids, this development may suggest that the scale of the food aid sector has grown further because of the Covid-19 crisis.

### *Covid-19, food insecurity and the marginalised*

The available literature provides an overview of the impact of Covid-19 on food insecurity, if and how it changed the 'nature' of food insecurity in the UK, and how it impacted on the food system. Detailed understanding of what Covid-19 meant for demographic groups already at higher risk of food insecurity before the pandemic is, at the time of writing, less readily available. Over the summer of 2020, the authors conducted a small research project (Dempsey & Pautz, 2021) with the objective of generating a 'snapshot insight' of what Covid-19 meant for young carers, people with a disability, the homeless and to (destitute) asylum seekers with regards to food insecurity. These groups were chosen because they are at comparatively higher risk of food insecurity even in 'normal times'. For example, Clair, Fledderjohann, Lalor, and Loopstra (2020) found that nearly 18% of households using food banks in the UK were homeless.

Based on eleven interviews with members of organisations representing the concerns of these groups in Scotland (see the full report for more extensive use of interview excerpts), it was found that Covid-19 impacted food insecurity in three ways: (1) it led to rising need driven mainly by income reductions and income crises; (2) it created new and intensified food access challenges and (3) it had a significant impact on the operation of food banks and their important 'wrap-around' services. These findings confirm largely what research has already established for earlier crises, for example, O'Connell and Brannen's (2021) comparative work on how differing political economies, welfare systems and crisis management approaches impact on the food insecurity of disadvantaged groups.

First, the interviews confirmed that income reductions and income crises had been a prominent feature of the pandemic, with those already on low incomes being affected the most but also introduced new people to food insecurity. The rise in living costs was a severe problem. For example, travel restrictions made it impossible to travel to shops with lower-priced groceries. People with a disability saw their cost of living rising further and struggled (practically and/or financially) with the sudden need to buy groceries online. As one representative of a disability support organisation said:

Some people tend to shop around for cheaper options but have not been able to do that due to restrictions. Staying at home for longer periods introduces further costs, heating and electricity, and these will also aggravate food insecurity when competing with other essentials. (Interview 1)

Interviewees also reported that those on low incomes and in precarious employment found that the pandemic and some of the policy responses threatened their already difficult financial situation. For young carers, income losses occurred through losing casual work not covered by the job retention 'furlough' scheme while, for low paid workers, the furlough scheme meant a further reduction of already low-income.

The situation, including that around income, changed for (destitute) asylum seekers also. Destitute asylum seekers – that is, those in the asylum process without financial



support to meet their essential living needs – were taken into full board hotel accommodation for the duration of the pandemic. Over 400 asylum seekers with relatively recent claims and living in Glasgow were re-accommodated into hotels. They lost their small cash entitlement as it was replaced with hotel food that was not always culturally appropriate and of sufficient nutritional quality.

Second, food access became a problem for the four groups. As discussed earlier, the pandemic demonstrated the vulnerability of the emergency food aid ‘system’ to shocks. Food bank users – existing or new – found travel restrictions made access to food banks difficult. Those shielding and self-isolating became reliant on food aid delivered to their doors, leading to worries about the suitability of food in both health and cultural terms. The experience of government-organised food box schemes, in terms of the quality and quantity of food but also in terms of the reliability of the delivery service, was mixed. One interviewee said:

The nutritional quality was questionable, and there was food that could not be cooked on a normal cooker and only in a microwave which some of our members do not have. Also, some boxes contained catering-size tins of beans, dried food and tinned food. But there was no fresh food. (Interview 3)

While these services may not have been perfect, many homeless people and disabled people with further significant health conditions reported not having official ‘shielder’ status, excluding them from such services. This meant having to rely on other food aid services or having to use shops, despite health concerns. As online grocery shopping and delivery became more important, those without internet access or sufficient ability to use it for online shopping were at higher risk of food insecurity.

Third, the crisis had an impact on food aid services. While rising food insecurity meant a rise in demand for food aid, food banks were forced either to close or to re-organise their operation to comply with social distancing and lockdown rules. This included shielding requirements that affected the often-older volunteer force at food banks generating staffing problems.

The closure of food banks and the suspension of food banks’ ‘wrap-around’ services (e.g. welfare advice, mental health support, socialising support) meant that homeless people not only had more difficulty accessing food; in addition, as one interviewee said, ‘the support provided through participating in the community kitchen was lost. The ability to build support networks through eating together was also lost’ (Interview 2).

As many food aid services were re-purposed into large-scale food delivery services, concerns arose around this ‘charitable’ model of ‘doling out food’:

Food being handed out in this way rather than as part of a participatory service means that all semblance of dignity is lost, which is a big part of how we build the confidence of our clients.

This contributed, in some cases, to individuals requiring support disappearing ‘off case workers’ radars’ (Interview 4).

### ***The policies around Covid-19 and food insecurity***

Policies relating to food insecurity in the Covid-19 pandemic can be subsumed into two main categories. The first relates to the income and expenditure situation of households;

the second to the direct provision of food and access to it. The following discusses only some examples for both approaches and critiques them to highlight elements of the policy response where lessons could be learnt. The examples are limited to the jurisdictions of the Westminster and Holyrood parliaments, and their impacts on one or several of the groups that this project focusses on.

The loss of income through the closing down of economic activity during the first lockdown in March 2020 was mitigated in different ways. For households with people in-work, this included the ‘furlough’ job retention scheme introduced in late March 2020. Covering the entirety of the UK, the furlough scheme was designed to prevent mass unemployment (Burchell, Wang, Kamerāde, Bessa, & Rubery, 2020). To achieve this, the UK Government initially offered to pay 80% of wages, capped at a maximum of £2,500 per month, so that employers would not dismiss staff due to the loss of revenue caused by the lockdown.

Other areas of support relate to existing social security entitlements. On the 20th March, the UK Government announced an increase of Universal Credit benefit by £20 a week (UK Government, 2020a) that came to an end in October 2021. Also in April, the UK-wide local housing allowance – to support private tenants on low incomes with rent costs – was increased to cover at least 30% of market rent in the claimant’s area (UK Government, 2020b). This has operated in tandem with protections for tenants and owner-occupiers to halt evictions or repossessions because of rent or mortgage arrears (Scottish Government, 2020a; Simpson, 2020; UK Government, 2020c). In Scotland, the Scottish Welfare Fund was increased to allow support to more people in acute income crises. Between April and June 2020, £5.2 million in crisis grants were awarded, up 77% on the same period a year earlier. Over the same period, the number of crisis grants rose by 63% (Scottish Government, 2020b).

All of these measures were designed to relieve the pressure on household budgets and thus contributed to reducing food insecurity. However, the furlough scheme was criticised because it reduced incomes by 20% across the income scale, including those at the lower end (Collinson, 2020). In other words, already low incomes were further diminished so that those in in-work poverty before the crisis and now furloughed had even less to live off. Others criticised the scheme for not being inclusive enough and leaving some employees out (Koltai et al., 2020), particularly those in casual employment and, therefore, often women (Cook & Grimshaw, 2020). While benefit increases were welcomed alongside other measures to mitigate income reductions, concerns were expressed regarding the five-week delay period for the first Universal Credit payment to new applicants (Power et al., 2020). Support given for mortgage holders was criticised as inadequate because of its accessibility only to those in receipt of Universal Credit, Income Support, Job Seeker’s Allowance or Pension Credit (Joseph Rowntree Foundation, 2020). There were also demands to increase financial support for carers (Bennett et al., 2020). While the UK Government made no changes to Carer’s Allowance, the Scottish Government built upon the already existing Carer’s Allowance Supplement paid to recipients of Carer’s Allowance in Scotland since 2018 by implementing a one-off Coronavirus Supplement of £230.10 (Scottish Government, 2020c).

The second discernible area of policy interventions that deals directly with preventing food insecurity is that which supports access to food. The most prominent interventions were the various food box schemes for helping to protect clinically vulnerable people

from exposure to Covid-19 allowing them to stay at home and away from shops (Scottish Government, 2020d; UK Government, 2020d). Both the UK Government in relation to England and the Scottish Government provided guidelines on the delivery of free food parcels with standardised content to shielders' doorsteps (Power et al., 2020; Ready Scotland 2020; Scottish Government, 2020e, 2020f). Criticism of the governmental food box schemes concerned delays, nutritional quality and how the standardised contents were not always adequate with respect to cultural needs (McNeil, Dowler, & Shields, 2020). Regarding nutritional quality, this is a long-standing issue around food aid (Fallaize, Newlove, White, & Lovegrove, 2020). Many large supermarkets also supported vulnerable people by giving them priority access to delivery slots for online grocery shopping. Some supermarkets required evidence of being on the shielding list, others requested referrals from the local authority (Monro, 2020). Programmes such as Westminster's 'Everyone In' significantly reduced rough sleeping in England and provided homeless people with housing, usually in hotels and food (Whitehead et al., 2021).

Another area of support involved the provision of food for children and young people through schools – in the form of breakfast clubs, school lunches or holiday clubs. School closures due to the lockdown meant that these forms of food provision stopped. In their place, children eligible for free school meals received financial support through various schemes, administered by the local government. Some local authorities ran a voucher scheme for food redeemable at a large variety of shops, while others limited the voucher's validity to one supermarket chain. Few adopted cash approaches. In Scotland, only 10 out of 32 local authorities, in May 2020, had decided to give money to families, possibly implying that 'local authorities do not trust families to buy food for their children if they were to give them money' (Treanor, 2020, p. 485). Many Scottish civil society organisations insisted that the most dignified approach should be cash over vouchers (BBC, 2020b). To cover the school holiday period, the UK Government introduced for England a 'Covid Summer Food Fund' to provide food vouchers over the summer break to those eligible for school lunch vouchers (UK Government, 2020e). Similar schemes were put in place in Scotland (Scottish Government, 2020f). Criticism was voiced over the performance of the early replacement schemes for free school meals when 'half of free school meal eligible children could not access the scheme in April 2020' (Parnham, Laverty, Majeed, & Vamosa, 2020, p. 163), during the first lockdown.

Food aid services were also directly supported by governments across the UK. For example, the UK Government announced in early May 2020 that it would set aside an initial £16 million to allow charities in England to buy and distribute food during lockdown. Using this funding, millions of meals were to be provided over the following 12 weeks and at least '5,000 charities and community groups' in England were to benefit (UK Government, 2020f). Some have criticised these measures as inadequate to deal with the surge in food aid demand in England (e.g. Sustain, 2020). It was argued that governments should adopt a 'cash-first' approach and significantly increase hardship funds, administered by local authorities (Power et al., 2020; Sustain, 2020).

Government efforts to increase food supplies to food banks and build their capacity to provide more food were in addition to, in later phases of the lockdown, increased food donations by supermarkets, hospitality businesses, wholesalers, smaller retailers, suppliers and manufacturers. These were co-ordinated by the Institute of Grocery Distribution (IGD). For example, Tesco provided a £30 million package of support for local communities

tackling Covid-19, including a £25 million food donations programme, while Asda donated £5 million to community charities.

With regard to existing food banks and also to new services set up to prevent food insecurity during Covid-19 in Scotland, a survey amongst 211 community-based organisations found that, overall, the coordination of emergency food provision at the local level, between community organisations and local authorities, was appropriate and that resources were sufficient to meet the demands on their services. However, the report also highlighted anxiety amongst food providers about future sudden rises in food insecurity (SPIRIU, 2020).

### *Conclusion – the role of the social sciences*

Crises are often wake-up calls to long-standing public policy problems. The rise in food insecurity over the past ten years is one such problem. Policy changes, implemented in the wake of the coronavirus outbreak directly or indirectly addressed food insecurity. Many were put in place only for the duration of the pandemic, but some (may) have come to stay. Despite calls across the UK for the right to food being enshrined in law (e.g. Smith, 2020; UK Parliament, 2021), tangible policy solutions to combat food insecurity (generally or with respect to the four groups discussed here) and the flaws of the overall food system are not in sight.

The social sciences should be able to assist the development of such solutions. Already before the crisis, they contributed to a better understanding of food insecurity and the weaknesses of the UK's food system. They have done so together with other disciplines, as the often remarkably interdisciplinary 'feel' of many contributions to the debate shows. Whether and how insights and policy recommendations will make or already have made a difference to policy decisions requires separate critical analysis.

Throughout the pandemic, much has been made of policy decisions being 'led by science', 'guided by the sciences' or 'following the science'. Such claims were made to inspire public confidence in those who take decisions and to bestow additional legitimacy on decisions by de-politicising them. While the question of whether a society in which politicians 'follow the science' is desirable cannot be debated here, it is clear that the responsibility for policy decisions taken during the Covid-19 lies not with 'the experts' but with politicians. For this and other reasons, speaking of 'evidence-informed' (e.g. Cairney, 2016), the policy would more adequately describe how policy and expertise interact.

Another debate is certainly still to be had – that on the quality of academic research on and around Covid-19. With respect to the virus and its consequences, some have argued that 'never before in the history of academic publishing has such a great volume of research focused on a single topic' (Odone et al., 2020, p. 34). According to Gurney, the 'sheer volume of research has generated concerns about the robustness of refereeing and publication processes' (Gurney, 2021, p. 8). These concerns are not limited to publications primarily focussed on 'the virus itself' but are of relevance to social science publications – like the present one – as well.

These doubts aside, the literature review has shown that social scientists and others made timely and relevant interventions to inform policy-makers and the public through critical analysis or concrete policy recommendations specifically on food

insecurity. More generally, of particular importance is research on how class, gender and ethnicity matter in understanding the impact of Covid-19 more generally (e.g. IFS, 2020; Viswanath & Bock Mullins, 2021). Such research helps to debunk the myth, voiced in particular during the early stages of the crisis, that the virus was a ‘great leveller’ (Aiken, 2020). Research has made abundantly clear that Covid-19 hit hardest those already most vulnerable through the material and social disadvantage (e.g. Marmot, Allen, Boyce, Goldblatt, & Morrison, 2020), demonstrated how ‘the Covid-19 pandemic has illuminated the stratification of society in every nation-state it has touched’ (Nolan, 2021), and highlighted what Scambler has called the UK’s ‘fractured society’ (Scambler, 2020). Also, the geographical element of food insecurity – in the form of, for example, ‘food deserts’ where no (appropriate) food can be bought without travelling (e.g. Shaw, 2006) – came to the fore during the Covid-19 crisis. The research presented here and in full in Dempsey and Pautz (2021) shows how, for example, asylum seekers were affected by these.

Timely analyses can be used to underpin demands for long-needed ‘paradigmatic’ change, Klassen and Murphy argue, in this vein, that

COVID-19 is an opening to think about how societies might center justice and equity in efforts to build back better. Governments should take this opportunity to invest in structural changes to reduce persistent inequities in food access due to poverty, health outcomes, decent work and overall wellbeing, especially for racialized communities and migrants. (Klassen & Murphy, 2020)

Further insights pertain to the food system. Leitheiser et al. argue that

in many ways the COVID-19 crisis may feel like a sledgehammer that has dealt a shattering blow to the global food system. Yet the pandemic has merely laid bare the flaws of a system built on foundational vulnerabilities such as distant just-in-time supply chains and controlled by few multinational corporations. (Leitheiser & Horlings, 2021, p. 1)

Calls resulting from such analyses revolve ‘around the transformative change in food systems that build on principles of food sovereignty and support local markets’ (Clapp & Moseley, 2020, p. 1394). Again, this is about paradigmatic change which, according to Cummins, requires policy-makers to invest ‘foresight and careful long-term planning’ to create ‘a healthier, more resilient and sustainable local food retail system’ (2020, p. 6).

The Covid-19 pandemic presents major challenges for academics to work together to address complex social problems. Many of these problems pre-dated the pandemic, yet if anything good can come from the pandemic, then perhaps food insecurity is an area on which different academic disciplines could work together to raise the profile of as part of the Covid-19 recovery agenda. This article attempts to take this conversation forward.

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