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Updating ‘stockpiling as resilience’ in the context of the cost-of-living crisis: tracking changes in resilience strategies in the U.K

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ABSTRACT

Using the seven resilience strategies identified in the previous paper entitled “Stockpiling as Resilience,” this study offers an update on the previous study 1 year later with interviews with the same households. The first paper was the result of interviews with 19 households held between April and May 2020 across the UK, and explored how these households managed lack of access to food during the COVID-19 lockdowns. This paper presents the same participants’ experiences following the UK lockdowns in the context of the sharp rise in the cost-of-living in the UK. Taken together, both phases of interviews bring into clear relief the influences affecting the UK food system, one characterized by increasing inaccessibility of food. This follow-up paper establishes that four of seven resilience strategies are still actively used, whereas three have become unnecessary. Two further themes are made salient in the interview data: weight management and convenience. Overall, this paper acts as a preliminary investigation into strategies that households are likely to utilize in the coming months and years in the context of the cost-of-living crisis.

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1. Main text introduction

This literature review uses the COVID-19 lockdowns in the UK as a line in the sand from which other influences can be momentarily frozen and examined.¹ Confirmed COVID-19 cases approaches 21 million and the death toll at time of publication is approximately 228,000 (U.K. Government 2023) – putting the UK’s, and especially England’s, pandemic experience within the top six globally in terms of lethality (Statista 2022). Alongside this ongoing public health event there are a number of other factors affecting the food supply, including Brexit and the cost-of-living crisis. Taken together, these influences mark a move to individualized responsibility for health and wellbeing, despite the significant structural influences that pre-date them.

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These influences are not new, but they are brought into clear relief as they have returned following the lockdowns in the UK

1.1. Food inaccessibility: Brexit

It is worth briefly mentioning the impact of the UK leaving the European Union (often referred to as Brexit) as this acts as a background to the following issues in food inaccessibility (Strong and Wells 2020). The UK produces less and less of its own food internally, and so increasingly the UK food supply is reliant on imports (Department for Environment and Rural Affairs 2021a). First, labor provided by workers usually residing outside of the UK have been severely affected by the changes to visas and entry requirements enforced when the UK left the European Union (Milbourne and Coulson 2021). This meant that although food was produced internally, it could not be picked or packaged effectively which meant food could not be transported or sold, and this results in food shortages (Ranta and Mulrooney 2021). Additionally, there has been a great shortage of HGV truck drivers, who had already faced lengthy delays due to new administrative checks required by Brexit (Hadfield and Turner 2021), meaning that a major artery in food transportation is compromised and waiting for further staff and staff training before resuming. The few trade agreements that have been made so far do not compensate for the decline in EU trade (Barons and Aspinall 2020; UK Government, 2022c). Having no replacement trade deal compounds the access difficulties discussed in the coming sections (Lang 2019).

1.2. Food inaccessibility: myth of stockpiling

During the earlier weeks and months of the first lockdown, food shortages were common and there was a great deal of public attention given in the UK to the notion of stockpiling. Although there is evidence this did not occur in the way understood by the medias (Benker 2021), it was still a matter of considerable media attention and discussion. It is notable that there has since been a renewed academic interest in stockpiling internationally (Ahmadi et al. 2021), though there is little consensus on whether stockpiling is a rational, considered behavior or a choice encouraged by panic and fear.

The UK is one of the only European countries where the government has no general recommendation in place for individuals to retain a store of food for several days in case of emergencies and/or natural disaster (Ritzel et al. 2022). Therefore, there was a general trend globally for supermarket visits and/or amount of foods bought to increase/change at the beginning of the announcement of the global pandemic, though this was mediated by the amount of food that households had in store already (ibid.). Given the lack of national forward-planning for food, U.K. citizens were more likely to need to buy extra food to prepare for a possible self-isolation period.

It should be noted that other parts of the world also saw a shift in food buying habits at the start of the pandemic, though often with longer-reaching consequences, which in turn raises some concerns for the longer-term resilience of the global food system (Béné 2020). Although extra food procurement has been seen in much of the European continent, many nation-state-based food systems experienced relatively short periods of shortage/empty shelves (Toffolutti, Stuckler, and McKee 2020) and

there have been mixed outcomes. For example, in Qatar, there is evidence that diets were healthier during the initial phases of the pandemic because food outlets were closed, therefore there was decreased availability of unhealthy foods (Hassen, Bilali, and Allahyari 2020). Further, in Tunisia, there was a reduction in food waste (Jribi et al. 2020). In sub-Saharan Africa, however, extra procurement was especially marked among households with sufficient finances, which meant that poorer households were less able to procure food during this period (Amuakwa-Mensah et al. 2022). The initial phase of the pandemic acted as a stressor on global food systems and individual behaviors, the wider ramifications of which are complex and situational.

Stockpiling as a time-limited phenomenon in the UK remains largely unquestioned by academics in many disciplines (Chen et al. 2020). The narrative has been that due to fear of anticipated shortage, people bought more food than they would usually buy, thereby creating food shortage for others through their actions. This was also the narrative put forward in the media. Turning to statistical evidence, however, these food shortages are more accurately understood as a combination of the closure of take-away food outlets and restaurants, and the failure of supermarket's JIT (Just-In-Time) re-stocking algorithms to catch up quickly enough with the increase in supermarket consumption (please see Benker 2021; Lawrence 2004 for a more detailed discussion). Regardless of the cause of empty supermarket shelves, the result was the same: widespread, short-term food shortage, with the wealthier sections of the population who are used to abundance being presented with empty shelves and inability to access their usual foods.

1.3. Food inaccessibility: food poverty and food insecurity

There have also been increased problems of access due to increased levels of food insecurity and food poverty aggravated by the economic choices made during and before the pandemic by the government. Prior to the pandemic, the Food Foundation estimated that one in every 6.5 people in the U.K. were experiencing either food poverty or food insecurity, so either eating fewer than three meals a day due or not knowing from when or where the next meal will come from (Food Foundation, 2020). In most estimates, domestic food shortage has risen significantly for a variety of reasons both pre- and during the first lockdown, including limitations of the benefits scheme, limitations of the furlough scheme, mass redundancies associated with COVID-19 (M. Brown, Mills, and Albani 2022), and stagnating/declining wages and rising food prices (Pool and Dooris 2021).

Further, during the periodic school closures introduced as part of the lockdowns meant that the children living in poverty/low-income households who would usually be in receipt of free school meals were not able to access them (Holt and Murray 2021). A public campaign by Marcus Rashford, a footballer on the Manchester United football team, was needed to encourage the government to reverse their decision not to extend free school meals outside of term time due to this additional need (Mills 2021). Although after several weeks the campaign was successful, this contributed to an overall increase in hunger in both children and the adults taking care of them – an extended form of “holiday hunger” (Long, Defeyter, and Stretesky 2022). This will have had further deleterious impacts on compulsory schooling for these children in terms of attention

and therefore attainment (Social Market Foundation 2020). This in turn will result in lower grades and fewer options for further study in later years, affecting the earning potential for this and future generations.

1.4. Food inaccessibility: cost of living crisis

In addition, since the beginning of 2021, there began an ongoing, sharp rise in the cost of living (Hearne 2018), often referred to as the cost-of-living crisis (Khan 2022). This is caused by a number of factors, including high interest rates, increases in the cost of food, drink, oil and petrol, alongside falling or frozen wages in real terms (Institute for Government 2022). While this is partly caused by wider influences in the global economy, within the UK it is also a long-term result of profit generation by multinational corporations which exacerbate the problem (International Monetary Fund 2023). Poorer households are more impacted by than wealthier households, and so poorer households are more likely to enter food insecurity or food poverty due to these influences (House of Commons Library 2022). The increases in inflation and cost of goods are expected to continue until at least 2024 (Bank of England 2022). These are, as above, likely to have a negative generational impact on food habits and preferences, school attainment and therefore competitiveness on the job market – this will in turn have a negative generational impact on life expectancy (Hefferon et al. 2021).

1.5. Food inaccessibility: convenience

There is, further, a marked return to convenient food. A significant influence on food habits prior to the COVID-19 lockdown was convenience (Buckley, Cowan, and McCarthy 2007), and this has returned. This is seen in many facets of the U.K.'s food habit, including the spread of smaller versions of supermarkets so that procurement is convenient (Maguire, Burgoine, and Monsivais 2015), a great incidence of take-out meals (Kantar 2020b), the popularity of pre-prepared meals sold in supermarkets, including pre-chopped, pre-combined and pre-cooked elements sold separately and the proliferation of meal replacement shakes (Remnant and Adams 2015). In this idealized food culture, all food labor should be removed from the individual consumer: food must be quick to procure, fast to make, easy to eat and the washing up created should be minimal (Carrigan, Szmigin, and Leek 2006). This convenience imperative is also encouraged by a range of economic changes in the U.K.; household finances increasingly requiring everyone in a household be employed, longer working hours more generally (Wardle et al. 2000) and generational reductions in food knowledge (Grunert, Wills, and Fernández-Celemín 2010). In short, there is rarely the time or space to cook, and so reliance on pre-prepared or take away meals becomes more and more rational. There is of course variability in this experience dictated by social and economic position (Department for Environment and Rural Affairs 2021b), but saving time is inherently and intimately supported by the current economic system (Jackson and Viehoff 2016). Despite these factors of limited time, limited knowledge and often limited space, it is for the individual to choose and logistically co-ordinate cooking from scratch amidst cheaper, easier and quicker alternatives – and given the economic environment, this is a choice that fewer and fewer individuals are able to make. The need for individuals to

resist these influences if desired is the reason that convenience has also been organized under “inaccessibility” in this paper.

It can be seen through this section that the U.K.’s food is increasingly inaccessible, and this experience of shortage is very likely to have ongoing impacts both individually and generationally. The best defense against inaccessibility is a high income, which provides access to cooking facilities and the money to pay the energy bills required to use these facilities, the money to afford nutritious ingredients and, often, the time to cook regularly. More widely, in order to maintain access to food, and maintain one’s own good health, the individual must rectify these using their own resources (be this financial, emotional, social, etc.). It is in this environment of shortage and personal responsibility that these interviews took place.

2. Materials and methods

This project was a follow-up research project for a previous project; therefore, this section will first offer a summary of the first phase of research and then discuss phase two.

In the previous paper, 19 semi-structured interviews were conducted remotely between May and June 2020. A short online semi-structured anonymous Qualtrics questionnaire was distributed online between April and May 2020 online, via social media websites and research-focused mailing lists (see [appendix 1](#) for these questions). The final sample was largely a result of snowball sampling. Respondents were asked to contribute their e-mail addresses if they consented to a remote interview. As a result, 19 interviews were held with individuals in 19 different households between 11th May and 21st June 2020 (please see [appendix 2](#) for the interview schedule).

This follow-up paper publicizes the results of 18 semi-structured remote interviews held with the same participants in the same households between 4th May 2021 and 7th June 2021 (see [Appendix 2](#) and [3](#) for these interview schedules). Participants were contacted using the same e-mail addresses given in the original survey. One participant did not reply (please see [Table 1](#)).

There were some changes to participant’s households between the first and second phase of interviews, and these are indicated in [Table 1](#) through italics. All interviewees were aged between 24 and 69 and had a yearly income of at least £21,000 and enough disposable income to spend the U.K. without-children average of £63.70 a week on food (Office for National Statistics 2021). Due to the sampling strategy utilized, out of necessity, both phases of these interviews cannot and does not report on households at risk of food poverty or food insecurity. Interviewees lived permanently in five major cities in the U.K.: London, Manchester, Bristol, Edinburgh and Liverpool, or neighboring areas. In the 18 households that responded, there had been some minor changes to composition – one household contained one adult (was two adults and one carer in the last phase of interviews), eight households contained two adults, nine households contained two adults with between one and four children (of which, 5 were independent children, and since the last interviews, two children had moved out again from one household, while in another there was a new child).

The commitment to a postmodern perspective is maintained in this second round of interviews, in that the context in which the interview took place is understood as an important feature of the research itself (Gilbert and Thomas 2016). There is an average of

Table 1. Participant information (italics reflect changes in the last 6 months).

Name*	Gender	Household Income/Year	Age	Household	Location
Rowan	Woman	£30–39,000	20–29	2 adults	London
Isabel	Woman	£31–40,000	50–59	2 adults	Edinburgh
Barbara	Woman	£30–39,000	60–69	<i>2 adults, 1 carer</i> 1 adult	Bristol
Sarah	Woman	£50,000+	30–39	2 adults	Town Near Bristol
Laura	Woman	£31–40,000	40–49	2 adults	Town in Midlothian, Scotland
Natalie	Woman	£21–30,000	20–29	2 adults	Stevenage
Sophie (Shielding)	Woman	£50,000+	40–49	2 adults	Worcester
Lauren	Woman	£21–30,000	30–30	2 adults, 2 children	London
Carol	Woman	£50,000+	50–59	<i>2 adults, 3 children</i> 2 adults, 1 child	Town Near Bristol
Vicky	Woman	£31–40,000	50–59	2 adults, 2 children	Town in West Lothian, Scotland
Abi	Woman	£31–40,000	30–39	2 adults, 2 children	Town Near Leicester
Kathryn	Woman	£41–49,000	30–39	2 adults, 2 children	Bristol
Naomi	Woman	£50,000+	30–39	2 adults, 2 children	Bristol
Debbie** (Shielding)	Woman	£21–30,000	50–59	<i>1 adult, 1 child</i>	Manchester
Herbert	Man	£30–39,000	20–29	2 adults, <i>2 adults, 1 child</i>	Birkenhead
Stephen	Man	£20–29,000	30–39	2 adults, 2 children	Liverpool
David (Shielding)	Man	£41–50,000	30–39	2 adults, 4 children	Town Near Manchester
Paul	Man	£50,000+	60–69	2 adults	Town Near Bristol
Peter	Man	£31–40,000	30–39	2 adults, 2 children	Manchester

*Names are pseudonyms chosen by participants.

**Did not participate in this second round of interviews.

precisely 1 year between each interview, though this ranges from 50 to 55 weeks in actuality. The first phase of interviews were conducted during the latter half of the first lockdown, the second round of interviews were conducted during the final phases of the third and longest lockdown in the UK. The third lockdown began in January 2021 and the last restriction was lifted 24 weeks later in June, though a great number of restrictions were lifted 15 weeks later in April. This was the longest lockdown to date, and these interviews took place approximately 3 weeks after Boris Johnson announced the “Road Map out of Lockdown” (U.K. Government 2021). There was a pervading sense of weariness and precarity within these interviews which replaced the anxiety that characterized the first phase of interviews.

Ethical approval was given by UWE’s Ethics Committee before commencement of the project (UWE REC REF No.: HAS.21.06.158). All interviews were conducted remotely due to the ongoing COVID-19 pandemic and with informed and ongoing consent. Consent was requested electronically twice before the interview stage, once through leaving an e-mail address and once through a signed consent form, and then it was asked for verbally during the interviews. Interviews were recorded with permission and using the same recording method as the participant had requested in the first interview; either using the recording function through Microsoft Teams or using a Dictaphone to record telephone conversations. Recordings were kept on a password encrypted remote hard drive, and following transcription, all recorded data was destroyed. Once they had been transcribed, interviews were analyzed thematically using NVivo (Nowell et al. 2017). A new coding framework was developed and compared with the themes from the previous project in order to offer more insight. Participant’s interviews were

compared with the answers given in the first round of interviews for the first paper, and then analyzed alongside the rest of the interviews within other households. All stages of this data collection and analysis were completed by the same researcher who is also the author of the paper. In order to maintain consistency between data sets, this data was reflexively thematically analyzed (Braun and Clarke 2019) with a critical bricolage framework (Kincheloe 2005) and grounded theory (Chun, Birks, and Francis 2019; Glaser and Strauss 1967). In short, this means that the data was in a consistent rotation between analysis, triangulation, and participant validation (Torrance 2012). The data generated from these interviews were understood as the result of co-constructed acts (Miller 2017).

Rigour (or trustworthiness) within the analysis was ensured through applying the four features stated in Maher et al. (2018): credibility, transferability, dependability, and confirmability. To ensure credibility, during interviews the interviewer reflected conclusions to participants and participants were invited to confirm whether or not this was an accurate perspective. Further, participants were offered a copy of the findings which refer to them directly once they had been written up asked to confirm that this was an accurate and fair representation. The data was written with as much detail and richness as possible in order to enable the reader to assess the transferability for themselves, and the process is included here to enable dependability if this study was repeated. Confirmability, akin to objectivity in quantitative research, surrounds the personal environment within which the study took place, and this is outlined clearly here.

Considering the co-constructed nature of these interviews, and the context in which they took place, rapport was managed very carefully throughout these interviews. Overall, the researcher enjoyed strong rapport during this second phase of interviews, but it was an ethical imperative not to encourage a false sense of friendship (Glesne 2006), rather than rapport. Rapport is encouraged in research to increase the likelihood of generating rich, valid data (Prior 2018), and so it is also a device to the researcher's benefit and should be carefully managed. Given that the first phase of interviews took place during the first lockdown, and this second phase had taken place as the last, and longest, lockdown was ending, both participants and researcher could unwittingly stretch ethical boundaries due to the complexity of participating in rapport-focused research during the pandemic (Connolly and Reilly 2007). This is because the pandemic is a stressful event, traumatic for some, and so this created potential for increased vulnerability in both researcher and participants which had to be managed carefully through clear, bounded communication. The next section discusses the findings, which reviews the resilience strategies highlighted in the last article: extra procurement, changes in food outlets utilized, buying earlier and extra, the informal economy, preservation, changes in the home economy, and planning.

3. Results

These results are based on 18 follow-up interviews lasting between 1 and 2 hours each with the same households one year after the first interviews. The main thrust of these results centers on the changes in resilience strategies 1 year after the first round of interviews. Of the seven initial resilience strategies identified four remain active in these interviews, though these are carried out differently in these interviews (see Table 2 for a summary). Following the changes in these resilience strategies, two further themes have appeared in the data: a preoccupation with weight and a return to convenience as a dominant consideration in

Table 2. Summary of changes in resilience strategies utilised by households from prior to first lockdown to interview two.

Timeline Resilience Strategy	Prior to First Lockdown (19 households)	Interview One (19 households)	Interview Two (18 households)
Extra Procurement	Rarely done, sometimes if items were reduced in price or as part of a promotion, more would be bought and stored	All households in the sample procured one or two of several key items in case of sickness, more reported in households with caring responsibilities	On average, most households kept a more significant store of food in case of future shortage, but overall households reverted to buying usual amounts
Use of Alternative Outlets	All households primarily used supermarkets, either visiting the shops in person or receiving home deliveries	Four households reported no change, 15 households report often seeking unavailable items in other outlets (e.g., different food shops, markets, online procurement, etc.)	11 households reverted to primarily using supermarkets, though the rest of the households described deliberately “moving away” from either their usual supermarket or on supermarket dependence altogether
Earlier, Unusual Procurement	No households reported buying extra earlier	All households in the sample bought earlier (and if necessary, unusual) food items, and more reported in households with caring responsibilities	No discussion of buying more food than usual or alternative options
Informal Economy	Two households procured food for elderly relatives on a regular basis, but no reliance reported on the informal economy for household’s own procurement	18 households relied on this for food procurement in two or more weeks in the 10 weeks since the beginning of the first lockdown	No discussion of continued reliance on the informal economy
Preservation	Preservation measures taken rarely – foods frozen either if bought in bulk for cost purposes or if bought frozen	Regeneration of the freezer as a regular method of preservation in all households	Households discussed a reduction in preservation, complete reversion to pre-lockdown
Ordering of the Domestic Food Economy	Women in households largely responsible for food procurement. Individual food items bought “meals-first,” so based on the meals desired for that week or day.	Women in households largely responsible for food procurement. Food shopping lists bought around what could be made from preexisting items in store cupboards	Women in households largely responsible for food procurement. Individual food items bought “meals-first” approximately half of the time
Planning	Households reported buying usually either 1 days, 3–4 days or 1 week ahead, and repeated the patterns. The most common pattern for households with children was once a week, and households without families would usually “pick up extra bits” based on convenience/geographical location of food outlets.	Households planned food shopping trips partially based on availability, most usually one week ahead though for shielding families this was up to two/three weeks ahead (which in turn made preservation essential)	Households have largely resumed prior habits, planning for and visiting food outlets once a week or less

food shopping habits. Taken together, these interviews reveal the incredible flexibility demonstrated by all of these households in changing where, how, when and why foods were bought amidst great uncertainty regarding the trajectory of the COVID-19 pandemic and the increasing cost of living.

3.1. Resilience strategies

In the previous article, 7 resilience strategies were identified which the participating households relied on in order to ensure adequate food procurement in rapidly changing circumstances, which included variable stock and access, changes in food retailer restrictions, and both size and price changes in their usual foods. For example, for a time 1.5 kg bags of flour were widely unavailable in many supermarkets, and so participants discussed buying either larger sacks of flour, or paying more to source a 1.5 kg bag from a different retailer, or buying a large sack of flour in a group and distributing more manageable amounts between different members of the group. All of these resilience strategies were options that each household relied on with subtle differences based on the foods that were unavailable, taking into account personal resources (including physical space, social networks and financial options), shelf life and the capacities of alternative sources of foods. Shielding households, and/or households without financial flexibility, could take far fewer of these options, and in turn they were far more likely to experience hunger during the initial stages of the pandemic. Four resilience strategies, namely extra and earlier procurement, reliance on the informal economy and preservation are almost entirely no longer used by the households interviewed. In practice, this means that households are much less likely to visit a food shop ahead of time just in case they needed to, they were much less likely to rely on other people sourcing food for them or source food for others and they were much less likely to freeze the food in their homes once procured. This is connected to the vast increase in the availability of food since food shops have removed their restrictions on shopping visits, opening hours, number of customers and physical movements around the shop floors. The remaining three resilience strategies will be revisited first, mapping the extent to which they are still being utilized. Following this, two other major themes of weight change and convenience will be discussed in the context of the cost-of-living crisis.

3.1.2. Extra procurement

Extra procurement featured in the last series of interviews as an alternative to stockpiling which was widely assumed to be happening in March 2020. It was shown through Kantar's (2020a) statistics that approximately 3% of the population bought significantly more than they would usually for approximately one week in March, and following this, restrictions were introduced in supermarkets which prevented this from continuing. The interviews also revealed that most households bought slightly more than they needed, so for example, an extra can of baked beans if one usually purchased one or two cans, or an extra loaf of bread (Benker 2021), and this aligned with the financial capacity each household had and how much space there was in the home to store extras. The extra procurement seen during the COVID-19 pandemic was predated by six participants keeping more food than they needed in anticipation of disruptions in availability and price in the food system created by Brexit.

In the current interviews, participants discussed the need to keep more food in storage to prepare for anticipated shortages also still caused by Brexit, but there were also a wide variety of other reasons discussed. Importantly, participants found alternative phrases to stockpiling to describe their behavior, as seen in Isabel's comments:

Isabel: I keep a bigger store cupboard than I used to of things like pasta, rice, lentils, tinned tomatoes, garlic, oil, I used to maybe have a packet of pasta and then when that ran out, now I have about 4-5 packets of pasta it's my Brexit store, I don't think I am unusual in this, there

were points in the month or two after Brexit where I noticed that there is less stock on the shelves but that started during covid and I don't know, I can't tell whether its covid or Brexit or some nasty combination

Participants were also more likely to keep a stock now than pre-pandemic for several other reasons than Brexit. Kathryn discussed keeping extra food, but notably stated that it was a way of managing the time burden of food procurement on her time. In this comment below, Kathryn also distinguishes her extra procurement from “stockpiling,” preferring instead the phrase “stock”, (much as Isabel did above with the term “store”):

Kathryn: it's not emergency food it's just stock, it's a stock of food isn't it rather than a stockpile of food. I think it's just so that when we run out we just reach into the cupboard and get another one out . . . I mean it's just like doing an extra click and collect because I can afford to chuck £5 on my shop and I see that as more worthwhile then the time that it would, you know, put more value on my time

Rowan discusses keeping more canned food just in case there is shortage of fresh:

Rowan: Some things also have, like, we have dropped I suppose more sort of tinned food recipes are more in our repertoire, so things like chilies for example where it is almost entirely tins . . . we do that and we do like some curries but just use tinned chickpeas and things, so we do have, I suppose, a few things up our sleeves where if we have run out of fresh stuff we can easily make it

Prior to the pandemic, Rowan's household had been particularly sure to consume as much fresh fruit and vegetables as possible, so this move toward tinned food suggests that avoiding shortage is a key priority for this household.

Many households were more likely to keep more food items in storage, mostly in case of anticipated Brexit-related shortages, but also for a variety of other reasons, including managing access to fresh food and in order to manage the time demands of food procurement on a weekly basis. This response to the pandemic has therefore been to increase the amounts of dried, canned, jarred and tinned foods kept in many households (storage space and finances allowing), though it is not clear how long this may persist for. It does go some way to explaining the record profits announced by the 6 supermarkets with the highest share of the food retail sector in the first half of 2022 (Kantar 2022).

3.1.3. Use of alternative outlets

At the start of 2020, shortages were reported in all six of the UK's major supermarket chains, and use of alternative outlets was a way of counteracting this shortage. Household interviews in the last article revealed that of the households interviewed, all but two regularly shopped at supermarkets, and following experiencing shortage, the vast majority of households went to a variety of other food retailers in order to procure the unavailable food items. Notably for the most recent round of interviews, several households had maintained their changes, and this had been largely away from supermarkets and toward smaller food retail companies such as independent greengrocers and dairies. Changes were made on the basis of price, supporting small businesses, environmental concerns and/or animal welfare reasons:

Naomi: I think we go to the butcher a bit more, it's cheaper he can get a whole carrier bag of meat

Abi: and then we have on a Friday, we have a milk delivery now on a Friday to support them, so we get a carton of milk and some eggs, it get delivered about 5 o'clock in the morning and we always say, the dairy fairy has been!

In a small number of households, the alternative outlets enabled a move away from buying from supermarkets, a move which was welcomed. As an example, Kathryn started to order deliveries of milk and eggs on both animal welfare and environmental grounds, and since those started, if further food needs buying, Kathryn prefers to go to local greengrocers. This small move away from supermarket foods served to “untether” Kathryn’s household from supermarket procurement altogether, as is seen in the statement below:

Kathryn: I think underpinning that shift away from big shops is the milk, because we are not having to go to the supermarket to buy milk. And like I say, as soon as I went to buy a pint of milk at Sainsbury’s or Aldi, I came back with all the other stuff that you would have waited for had you not been going in to get the milk or would just not have brought at all . . . I have been popping to the veg shop a bit more for specific items

Households which had the means to be able to maintain alternative, and often more expensive procurement options chose to continue these alternative procurement options, and for a small number, this was a deliberate move away from supermarkets while maintaining convenience. However, for the vast majority of participants, convenience was re-instated as a primary importance (please see [section 3.2](#) for further discussion of this).

3.1.4. Risk, changes in the ordering of the domestic food economy and planning

In this section, three resilience strategies that are interconnected show a great deal of change due to the easing of the restrictions within supermarkets. In the last article, there was a great time burden discussed by many participants of planning during weekly supermarket visits. This planning was exaggerated by a desire to build meals around what was already in the home rather than buying opportunistically or based on preference – and so meals were often planned at least a week in advance in order to limit the visits to shops to the government recommendation and minimize the risk of contracting COVID posed by supermarket visits. In these most recent interviews, time demands had been greatly lessened by increased access to supermarkets and lesser risk – thus they are discussed together because they have both been eased by the same changes.

Participants discussed no longer planning or strategising to limit the number of supermarket visits in a week, and so it was no longer necessary to optimize the one weekly shopping visit. The sense of risk presented by supermarkets had declined because, the majority of participants had contracted COVID and/or received vaccinations,² which positively influenced the potential generalized risk posed by COVID-19 (Beck 1992, 1999):

Abi: then we got vaccinated of course. So although we are not like, you know, completely yeah we can do anything . . . but yeah, it’s just like we had covid and then we felt pretty alright afterward, we felt quite safe. And then um, we got, my parents got vaccinated and we got vaccinated so it was like, OK, we started to feel a bit more secure and stuff . . . I am like, yeah, although we are much more relaxed, I still am cautious of not being like, oh yeah, I could do with chocolate bars or whatever

For others, the decline in stress had simply been a matter of time rather than the result of any intervention per se. In the last interviews, Isabel was among the more concerned in the sample about COVID:

Isabel: But it is also that I have been going to the supermarket for a year and haven't died. There is a limit to . . . to how long you can stay at a pitch of anxiety and then you just, you can't maintain it any longer

For some participants, the sense of risk remained, and so shopping trips were amended to maximize safety:

Carol: And I think it comes from, I have had 1 vaccination which has helped. It comes from also not feeling so nervous about being around people in the supermarket. But, also, I would say that I have changed supermarket because I used to go to Tesco's, now I go to Sainsbury's mid-morning, Sainsbury's is a bit more expensive but its bigger, wider aisles and the people that are in Sainsbury's give you more space, it's not as busy.

David: [I] go at the quietest time so I will regularly turn up like an hour before it shuts at my local Aldi and I will be in there for an hour. You can spray your trolley as you go in and you can wipe it down and do your hands, you go through and pick up your stuff and then as soon as you finish loading it into the boot you do your hands again. That's my shopping experience done. I can time myself to go for the last hour simply for my own fear I think, my own protection, however you want to see it

Additionally, it is interesting that David uses both of the terms “fear” and “protection” in the statement above. It mirrors the divided opinion on COVID in the U.K. The government's COVID-19 strategy, to remove all restrictions, is in direct contrast with scientific advice and alongside this division, public opinion is cleft also. Therefore, when David uses the phrase “fear,” it suggests that he is “just” afraid, though there is little to be afraid of, his concern is illegitimate. The phrase “protection” legitimizes his concern because there is something which one needs protection from. In the government's abandonment of all COVID-19 legislation, the individual's capacity to maintain bodily boundaries in the face of infectious pathogens, which is very important for a sense of social and psychological safety and wellbeing has been subsumed into political choices, where scientific understanding is discounted. These important choices are necessarily based on something flippant and throw-away, “however you want to see it.”

Kathryn discussed the need to manage one's own risk and how this is continuing to dominate her household's shopping choices:

Kathryn: you are left making a personal choice about whether you stay an extra 10 minutes to browse in the home section or whether you go in, get your essentials and get the heck out. And then it's about personal responsibility. It's about how well you are, how people around you are, you know, it's all of those things

The sense of personal risk was variable for each household, though for many the time burden of planning several days to 3 weeks in advance had been relaxed, assuming that the individual was willing to manage their own risk in more frequent supermarket visits (Saad-Filho 2020). Many in this sample were, given that they had already contracted COVID-19 and/or received vaccinations. These feelings of risk (Beck 1992, 1999), relaxing of planning needs and the relationship these have with the way that the domestic

food economy functions are also related to the return of convenience in relation to food procurement – this was a great relief for many participants who discussed it.

3.2. The return of convenience

Each of these resilience strategies takes one further and further from the ideal of convenient food, or labor-free food – this is at all stages: planning, procurement, preparation, consumption and the cleaning up afterward. In the last interviews, each household in this article needed to expend more time on food labor than anticipated, and much of this was done by the women in the households – this is not unusual (Kemmer 2000). In the second round of interviews, the options for food consumed domestically had become almost as convenient as it had been before the pandemic began, although eight participants expressed continued safety concerns about eating in restaurants.

For some, this return of convenience was overwhelming. For example, Barbara had been caring for her husband until his death shortly before our second interview. Barbara had been shielding in order to protect her husband in his ill-health, and so food procurement was exceptionally difficult and for her in the first lockdown. Following her husband's death during the third lockdown she recounted resuming her usual habits with bittersweet relief after the third lockdown ended – she no longer needed to isolate or order home food deliveries to protect her husband's health:

Barbara: I can go down to any of the local shops at any time it's a very strange feeling because I used to go down to the shops every morning [before the pandemic]

It should be noted at this point that all participants stated that they found the third lockdown in the U.K. especially difficult (emotionally and/or financially), and this fueled the desire for a relief at the return of convenience. All but 3 participants made comment about how difficult the third lockdown was, and all but one said that food labor had felt excessive (please see Sarah's comment below for an example). Isabel discusses the challenges presented by the third lockdown with particular clarity:

Isabel: I think when we first spoke it was like so new and we were, you know, Joe Wicks was doing telly and we were all in it together, clapping in the street, it was a big thing, and now it's become kind of an ingrained part of life and that's actually harder

Take-away restaurants re-opening were the first re-introduction of convenience following the first lockdown, and several participants mentioned that these were especially likely to be relied upon during the third lockdown. For example, Sarah discusses the weariness with needing to consistently manage each stage of food labor eventually meant that she developed entirely new food habits:

Sarah: I had a bit of cooking fatigue around the end of the third lockdown and I just couldn't do it at the same level so I definitely got more ready prepared things, so I might get like a quiche I sometimes buy meat that has been marinated already that you can buy because then I don't have to think about seasoning it . . . actual microwave ready meals Waitrose do actually really nice ones for days when I really, really cannot be fucked, me a few years ago just wouldn't have done that

Overall for the vast majority of households, decision-making around food has changed in recent months because there is a sense of having less time, or time being swallowed by

competing demands on their time. As seen in these statements, every convenience is welcomed:

Sophie: we would have physically ended up taking up time on a Saturday to go in and do the shop, but we don't miss that, so yeah, default position goes to oh look, that store is open or it's Sunday, its 4.30 we haven't brought anything, it's fine, Co-Op down the road is still open until 11

Herbert: we moved house as well and the supermarket is closer and faster, I can do everything in one place so now we don't go to the market so I switched the shopping so Lidl instead of Sainsbury's because it's the closest

It was clear across the interviews that each household returned to more convenient foods as soon as was possible and affordable, especially in the third lockdown during which employment and schooling expectations were maintained as usual. This hurried and relieved return to convenience was predicated by greater time demands in other areas of life which were not present in the first lockdown. Therefore, it is clear to see how the use of convenience foods are underpinned by individuals being consistently busy – first documented in Weber's *Protestant Ethic* (Weber 1930), an enduring feature over 100 years later in the "Ethic of Busyness" (Welsh 2005). This convenient food also enables a return to the pre-pandemic individualized lifestyle, with easily procured and prepared food which does not require any domestic labor, or the surrounding relationships, to prepare them (Khandpur et al. 2020).

3.3. Weight changes

A frequent topic of conversation in the second generation of interviews was the effect that changed eating habits had on the shapes and sizes of participants' bodies. The 5 participants who reported no weight change were men, which, given the gendered relationships often found with food is expected (DeVault 1991; Oakley 1974). Something particularly notable was that the process of gaining additional weight was spoken of euphemistically, so participants spoke of "getting friendly with the fridge" (Sophie), or "needing a size up in jeans" (Naomi). This was a way of negating the stigma attached to weight gain in these interviews. Weight gain was also related to a range of reasons including boredom, changed daily routines, loss of a sense of usual time and routines, interest, stress relief, misery and the increased influence of cohabiting partner's purchases as more time was spent at home. Weight changes are caused by a wide variety of influences, both emotional and practical, and this is an established understanding (see Blades 2001). What was notable is how readily solutions were offered, and in doing this, participants demonstrate staying in control of both their weight changes and the reversal in their weight change:

Isabel: My other half is on the chocolate biscuits and crisps, and I am joining in . . . my way of eating is healthily is not to buy it, not to have it in the house

Naomi: we have come out of lockdown, need to get rid of this weight that I have piled on which nobody has seen apart from my work friends, so I spent quite a lot of money on meal replacement stuff . I simply refuse to go up another size so I was like, I will go on a diet

now . . . people on the school run who have always been bigger than me were suddenly losing weight and I was like OK, I had better get on this.

Carol discussed cutting down on food groups in an effort to stop snacking on crisps, instead of eating crisps on the weekend only:

Carol: I thought actually I could end up . I am not seeing anybody, you have got no sense of, you know, why bother. So it was for my own self-esteem I think. I am cutting down on carbs and eating less meat during the week and doing what I want at the weekend.

Abi mentions that her eating habits have changed over the lockdowns, especially the third lockdown, and food became something to look forward to and a way of maintaining emotional equilibrium.

Abi: I remember thinking lockdown 3 is horrible. It was just rubbish wasn't it? It was really, really depressing. . . crisps and hummus were big things throughout . . . it's just something to look forward to now

Respondents therefore discussed changes in weight from a position of control. Food became an opportunity to enjoy something and that this increased in importance particularly in the third lockdown where many were expected to maintain pre-pandemic productivity levels in employment, and resume with many usual daily tasks, although not socializing at all. Taken together, the process of gaining or losing weight, and the decision to reverse that process, were all spoken about as rational choices. For example, Sophie discusses weight gain connected to work stresses:

Sophie: I feel a bit like a weeble but we just like our food, it's portion size actually, and you know when life is quite boring, it's a bit of excitement isn't it? Make an occasion of eating something nice! it definitely wasn't a, you know, woe is me, life is terrible, you know, it was just, what can I do now? but I stopped cooking because the pressure [at work] was really on and all the snacking on stuff and all of that kind of thing . . . I definitely think that work and study have an impact on that as well, and when you that's all you seem to be doing because of the winter and things . . . but yeah there are lots of things I think, some of which would have influenced regardless of COVID.

Every participant that mentioned change in weight also explained why their weight changed and what could potentially reverse that change. Explanations for the stigma of weight gain were readily offered (Lebesco 2010), and the route to changing undesirable food habits was also readily discussed un-prompted in the interviews. This allowed participants to demonstrate their control and rational consideration in the context of bodily changes. If we put on weight, it must be accounted for because "one's body is taken as a sign of effort put into it" (Harjunen, 2017). Given the rapidly increasing cost of food, it is likely that this will create both more emotional discomfort and lower the nutritional profiles of many households, so weight fluctuations can be anticipated in the near future.

4. Discussion

These interviews provide another snapshot of the day-to-day changes that these same UK households have experienced since the beginning of 2020. The resilience strategies highlighted in the previous article have been revisited and changes within these have been mapped out (for a summary see [Table 2](#)). There has been a reduction in reliance on

many of these resilience strategies overall, which aligns broadly with the reduction in shortages and a lifting of restrictions on shopping hours. Resilience strategies such as preserving foods domestically and reliance on the formal economy were adopted very specifically to manage infrequent access, and as households have more reliable access, these strategies have been relaxed. One notable exception to this overall relaxation is extra procurement. Extra procurement is still practiced in almost half of the households interviewed, though this was in anticipation of shortages caused by Brexit rather than actual shortages seen due to COVID-19 in the previous interviews. This article demonstrates that there is some longevity to some of these new food habits, but it is unclear how long these practices will be continued for, or what will encourage households to begin using these strategies again.

This article, alongside the previous article, show that the COVID-19 shortages were one in a series of several challenges besetting the UK's food system. Therefore, it is likely that these strategies will be enlisted again in the event of future inaccessibility, and in the contemporary rise in the cost of living. These challenges are from many different sources, being both chronic and acute. Brexit has introduced further labor shortages and produce shortages (Milbourne and Coulson 2021); both of which are further complicated by the biological nature of fresh food and the short timeline that this imposes. Further, food poverty is at an all-time high, with 15.5% of all U.K. households experiencing irregular access to food (Food Foundation 2022). More people are reliant on food banks than at any other time than their introduction in 2012, with the Trussell Trust issuing 2.1 million emergency food parcels in the first quarter of 2022 – this is an 81% rise in demand since the first quarter of 2017 (Trussell Trust 2022). A further vulnerability is the current sharp rise in the cost of living (Rowntree Foundation 2022). This is already causing significant increases in levels of hunger in the U.K. (ibid.) and is therefore contributing to further food inaccessibility. More people within these hungry groups are also fully employed, demonstrating the profoundly structural and ongoing nature of these inequalities.

Although this has been discussed less through this article, there is also an increasing pressure placed on the U.K. food system by external and often global forces; the relationships between producer and supermarket and the impending climate changes. The dominance of the supermarkets, exacerbated during the pandemic, creates incredible financial hardship for U.K. food producers (Bowman 2018), which contributes to the steady decline in food production in the U.K. (FRC 2018). Second, the final challenge is the global climate crisis (Pierrehumbert 2019), in which more variable growing conditions globally are currently, and will continue to, routinely destroy crops globally and prevent the capacity for food imports to make up the U.K.'s domestic food production shortfall. Further disruption to UK food is very likely.

4.1. Strengths

This study is unique in its scope and timeliness. It is the only longitudinal study in the U.K. looking at food habits at two points during the COVID-19 lockdowns within the same households, and therefore has a unique vantage point to look at household changes in food procurement over the first year of the pandemic and the immediately preceding

months. Given the relatively low prices and consistent availability of food that the UK has experienced over the last two-three decades, there is little relatively research on how households manage a new lack of access to food. There has been remarkable flexibility and resilience demonstrated in food habits in these households, and the strategies discussed in this paper are likely to be utilized again when access to food is threatened, be this financially or otherwise. Overall, this paper gives a unique vantage point from which to understand the management strategies that households are likely to rely on in future instances of acute food inaccessibility.

4.3. Implications

Further food inaccessibility in the UK is very likely, either on financial grounds, through logistical difficulties or production difficulties due to the changing climate. Given the dynamics discussed in this section so far, poorer households will have less ability to rely on these resilience strategies where they exist; either because they do not have the storage to buy in bulk, or the money to keep a fridge or freezer on and/or the money to buy more expensive alternatives where these are available. A rising number of households are already experiencing hunger and are unable to access food on financial grounds alone due to the sharp rise in the cost of living, and the longer-term impacts of Brexit and climate change could exacerbate this further. Using the resilience strategies developed in the first interviews, this study provides an insight into immediate household responses (and how these change a year later) and contributes usefully to understandings around food habits in times of rapid and significant change.

Notes

1. It is worth noting that the influence introduced by climate change plays a peripheral role in this paper, though it is extremely likely to have great influence in the coming months and years.
2. COVID-19 vaccinations in the U.K were staggered by age and medical need from January 2021, 5–6 months before these interviews took place (UK Government 2022a) so a small number of participants had received a vaccination by the time of these interviews.

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Appendices

Appendix 1: First Phase Questionnaire Questions

Order	Question Text	Qualtrics Question Type	Answer Options
1	Where do you live? (Village/Town/City and Country)	Free Text	
2	How would you describe your gender?	Multiple Choice	Woman, Man, Non-binary, Other
3	Approximately, how old are you?	Multiple Choice	18–19, 20–29, 30–39, 40–49, 50–59, 60–69, 70–79, 80–89, 90–99, 100+
4	How would you describe your occupation?	Free Text	
5	What is your household's approximate income per year?	Multiple Choice	0–10,000, 11–20,000, 21–30,000, 31–40,000, 41–50,000, 51000+
6	Have you bought extra food in the last 6 months? (<i>If no, questionnaire moves to question 11</i>)	Multiple Choice	Yes/No
7	If yes, why?	Free Text	
8	If you have bought extra, how much do you think you have spent on extra food?	Free Text	
9	Of this extra food bought, is there either usual food items or brands that are in your regular shop?	Free Text	
10	Have you bought food that you would not usually buy? If yes, please say what they are and why you have bought them.	Free Text	
11	Has your experience of food shopping changed in the last two weeks particularly? If yes, how and why?	Free Text	
12	Have you had enough food consistently in the last month (even if it was not the food you preferred)?	Multiple Choice	Yes/No/Other
13	Do you think you will change the way you shop in the coming weeks? If so, why?	Free Text	
14	Out of 10, how much have the last three months changed how you think about the food system we have?	Multiple Choice	0- Not at all to 10 – A lot
15	If your previous answer is above 1, please give more details (What has changed? Is this positive or negative?)	Free Text	
16	If you are happy to be interviewed remotely, please include your e-mail address here:	Free Text	

Appendix 2: First Phase Interview Schedule (Semi-Structured)

1. Introductions, ethics, does participant have any questions, confirm start of recording.
2. Name/age/living situation/etc.
3. Usual food shopping habits (before two months ago)
 - Online/delivery/in-person procurement
 - Usual purchases
 - Frequency of procurement
 - Which shops/foods preferred?
4. Last two months
 - Experience of procurements
 - Usual purchases
 - Frequency of procurement
 - Thoughts?
5. Understandings of food chain/food procurement before COVID
6. Any new food habits?
7. Any positives?
8. Anything to add that came to mind during conversation?
9. Closing, discuss pseudonym, offer copy of findings for review, final check in case of questions, re-iterate ethics.

Appendix 3: Second Phase Interview Schedule (Semi-Structured)

10. Introductions/re-introductions, ethics, does participant have any questions, confirm start of recording.
11. Name/age/living situation/etc. Check any changes.
12. Usual food shopping habits (since the last interviews) – compare with last interview
 - Online/delivery/in-person procurement
 - Usual purchases
 - Frequency of procurement
 - Which shops/foods preferred?
 - Thoughts?
13. Understandings of food chain/food procurement before and during COVID – any changes with last interview? (Brexit impact, weight gain, is convenience still a priority, etc.)
14. Any new food habits/lasting changes?
15. Any positives?
16. Anything to add that came to mind during conversation?
17. Closing, discuss pseudonym, offer copy of findings for review, final check in case of questions, re-iterate ethics.