

The Hygiene Bank: Hygiene Poverty in 2024

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Executive summary

Prevalence of hygiene poverty

Hygiene poverty was found to affect an estimated 4.2 million adults¹ in the UK (8% of the population), which is an increase of approximately 1 million adults compared with findings in 2022 (increase from 6%).

Consistent with 2022's findings, those with a limiting disability or long-term health condition, those on lower household incomes, younger people, those from ethnic minority backgrounds, those not in work, or those living with children were all more likely to have experienced hygiene poverty in the last 12 months.

Key findings include:

- hygiene poverty affects **8% of adults** in the UK
- hygiene poverty affects **23% of those who are on universal credit**
- hygiene poverty affects **21% of people with a limiting disability or long-term health condition²**
- hygiene poverty affects **18% of those from lower-income households**
- hygiene poverty affects **17% of those who are unemployed or not working³**, compared with **13% of those working part-time⁴**, and 7% of those working full-time⁵
- hygiene poverty affects **15% of younger people** (18-24 year olds)
- hygiene poverty affects **12% of those from ethnic minority** backgrounds
- hygiene poverty affects **11% of adults who have children** living with them

Impacts of hygiene poverty

The survey demonstrates how the impacts of hygiene poverty on people's livelihoods, and those of their children, are widespread. Indeed, the vast majority (88%) of those affected by hygiene poverty reported that hygiene poverty has had a negative impact on their life.

With the rising cost of products, 69% of those experiencing hygiene poverty reported having to choose between paying for food or bills and buying toiletries and cleaning products. Additionally, almost two thirds (65%) of parents experiencing hygiene poverty said they have had to choose between buying toiletries for themselves or their child(ren).

¹ Calculated using 2021 ONS population estimates for adults 18+ living in the UK (8% of 53,188,204)

² Respondents are asked whether day-to-day activities are limited a lot or a little as a result of a health problem or disability. Those who self-assess their activities as being limited a lot are considered to have a limiting condition, with those limited a little considered to have a less limiting condition.

³ Excludes those who are retired or in full time education

⁴ Working part time defined as working less than 30 hours per week

⁵ Working full time defined as working 30 hours or more per week

Considering the impact of the cost of living, four in five (80%) of those experiencing hygiene poverty said that it has had a negative impact on their ability to afford basic toiletries.

Hygiene poverty has most negatively impacted people's mental health, and the proportion it has affected increased by 7 percentage points when compared with 2022 (68% vs. 61%). Indeed, a majority (56%) reported that going without basic toiletries has left them feeling anxious or depressed, and the same proportion also said they have felt ashamed or embarrassed.

The survey findings also reveal how the impact of hygiene poverty can be physical. Just under a quarter (23%) reported experiencing trouble sleeping, followed by 20% having experienced skin irritations, and 18% poor oral health. Furthermore, over half (54%) of those living in hygiene poverty have not visited a dentist in the last 12 months.

Hygiene poverty was also identified as a barrier to work and education, as 13% of those experiencing hygiene poverty reported that they have avoided work, and 9% have avoided a job interview. Furthermore, just over a fifth of parents (22%) said that hygiene poverty has had a negative impact on their child(ren)'s performance at school, with 19% of parents also having reported that their child(ren) missed school in the past 12 months due to dental hygiene issues.

Turning to look at accessing support, a third (34%) received support from their family. Just under half (48%) admitted to being too embarrassed to ask for support and help when they felt they needed it.

Introduction

This report presents the findings of a research study conducted firstly in 2021-2022, and then again in 2024, exploring perceptions and experiences of hygiene poverty among those experiencing it. The research was conducted by YouGov on behalf of The Hygiene Bank.

The Hygiene Bank is a grassroots charity and social movement providing hygiene essentials to those in need and advocating for meaningful change to end hygiene poverty in the UK.

'Hygiene Poverty 2022' was the first national study into hygiene poverty in the UK. Its primary purpose was to benchmark the 'hidden crisis' of hygiene poverty and empower The Hygiene Bank to campaign for informed, meaningful change. 'Hygiene Poverty in 2024' looks to build upon this research and uncover how the landscape of hygiene poverty in the UK has changed, if at all, over time.

Method

The 2024 research consisted of the following key phases:

1. Phase 1: A nationally representative sample of 2,141 adults (18+) living in the UK to establish the incidence and demographic profile of those experiencing hygiene poverty.
2. Phase 2: An online survey of 1,517 adults experiencing hygiene poverty in order to better understand their experiences, weighted to the demographic profile of this group determined in Phase 1 of the 2024 research to be representative of age, gender, region, and social grade⁶.
3. Phase 3: Analysis of open-end responses within the quantitative survey. The survey included two open-ended questions⁷ and 1,960 text responses were uploaded to YouGov's AI analysis tool in order to understand key themes in the data and gather quotations from those experiencing hygiene poverty.

Interpretation of the findings

Analysis has been conducted at a total level, with comparisons made to the previous study of research, and by key demographics noted throughout the report. Differences between years and these demographic groups are only reported if they are significant at a 95%

⁶ Social grade is defined by the occupation of a household's Chief Income Earner (CIE). It factors in the CIE's job as well as details such as their qualifications and the number of people they are responsible for. More information can be found [here](#)

⁷ 'How did you feel when you had to go without basic toiletries or hygiene items because you couldn't afford them?' and 'How has going without basic toiletries or hygiene item impacted your day to day life, including physical and mental health, family and social life, and working life?'

confidence level, and analysis has not been conducted on demographic groups with fewer than 50 respondents. Statistically significant differences are indicated in tables and charts with an asterisk (*).

The unweighted base sizes for key demographics are as follows:

- Age: 18-34: n=443, 35-54: n=780, 55+: n=294,
- Gender: male: n=657, female: n=860,
- Region: North East: n=57, North West: n=160, Yorkshire and the Humber: n=123, East Midlands: n=128, West Midlands: n=151, East: n=97, London: n=216, South East: n=192, South West: n=148, Wales: n=80, Scotland: n=110, Northern Ireland: n=55,
- Social grade: ABC1: n=754, C2DE: n=763.

The incidence of hygiene poverty in the UK

The research found that 8% of adults living in the UK had experienced hygiene poverty in the past 12 months. This was defined as the individual or their household having gone without basic toiletries or hygiene items because they could not afford to buy them.

Within the context of the rising cost of living, it was estimated that 600,000 more people in the UK fell into absolute poverty in the year between 2022-23⁸. Within this period, inflation peaked at 10% leaving many struggling to afford basic items. Notably, the incidence of adults experiencing hygiene poverty in the UK has increased by 2% since 2022. This indicates that approximately 1.1 million *more* adults in the UK have been impacted over the past two years, taking the estimated figure to 4.2 million⁹ affected adults. Furthermore, the demographic composition of adults experiencing hygiene poverty has also changed somewhat.

Turning first to look at gender, men are now more likely to have experienced hygiene poverty than women (9% vs. 7%), when in 2022 the research indicated that there was no difference between genders.

Whilst those from lower social grades¹⁰ (C2DE) are still more likely to have experienced hygiene poverty than those from higher grades (ABC1) (10% vs. 6%), there has also been a notable increase in the proportion of people from higher social grades who reported experiencing hygiene poverty in the last 12 months (from 4% in 2022). This demonstrates how hygiene poverty is becoming a more widespread issue across the UK.

Furthermore, compared with 2022, those who work part time (less than 30 hours per week) are now more likely to have experienced hygiene poverty (7% vs. 13%). Further analysis by work status shows that there has been no change over time in the likelihood of those working full time or who are unemployed/ not working to have experienced hygiene poverty. Indeed, 17% of those out of work¹¹ reported experiencing hygiene poverty in the last 12 months, making them one of the most affected groups.

Consistent with 2022, those on lower household incomes, younger people, those from ethnic minority backgrounds, those who are unemployed or not in work, and those living

⁸ [The Guardian](#), 21st March 2024

⁹ Calculated using 2021 ONS population estimates for adults 18+ living in the UK (8% of 53,188,204). In 2022, the number of affected adults was estimated at 3.1 million.

¹⁰ Social grade is defined by the occupation of a household's Chief Income Earner (CIE). It factors in the CIE's job as well as details such as their qualifications and the number of people they are responsible for. More information can be found [here](#)

¹¹ Excludes those who are retired or in full time education.

with children were all more likely to have experienced hygiene poverty in the last 12 months than their counterparts.

One of the strongest patterns evident remains to be by disability status, as a fifth (21%) of those with a more limiting disability¹² or long-term health conditions reported experiencing hygiene poverty, consistent with 2022. This is compared with 8% of adults with a less limiting condition/disability, and 6% of adults without. Whilst this pattern has remained consistent with 2022, it is worth noting that twice as many people without a disability or health condition reported experiencing hygiene poverty when compared with 2022 (6% vs. 3%).

Table 1. Proportion experiencing hygiene poverty in the last 12 months by income, age, children in household, ethnicity, disability, gender, social grade, and work status

		2024	2022
Household income (annual)	Less than £20K	18%	13%
	£20-39K	8%	6%
	£40-59K	4%	3%
	£60K or more	6%	3%
Age	18-24	15%	11%
	25-34	11%	10%
	35-44	11%	8%
	45-54	8%	6%
	55+	3%	2%
Children in household	No children	7%	5%
	1+ child(ren)	11%	8%
	2+ child(ren)	13%	9%
Ethnicity	White	7%	6%
	Ethnic minority	12%	11%
Disability/Health condition	Limited a lot	21%	21%
	Limited a little	8%	8%
	No disability/condition	6%*	3%
Gender	Male	9%*	6%
	Female	7%	6%
Social Grade	ABC1	6%*	4%
	C2DE	10%	9%
Work Status	Working full time	7%	5%
	Working part time	13%*	7%
	Unemployed/ Not working	17%	15%

Base: All (n=2,193 in 2024 & n=2,141 in 2022)

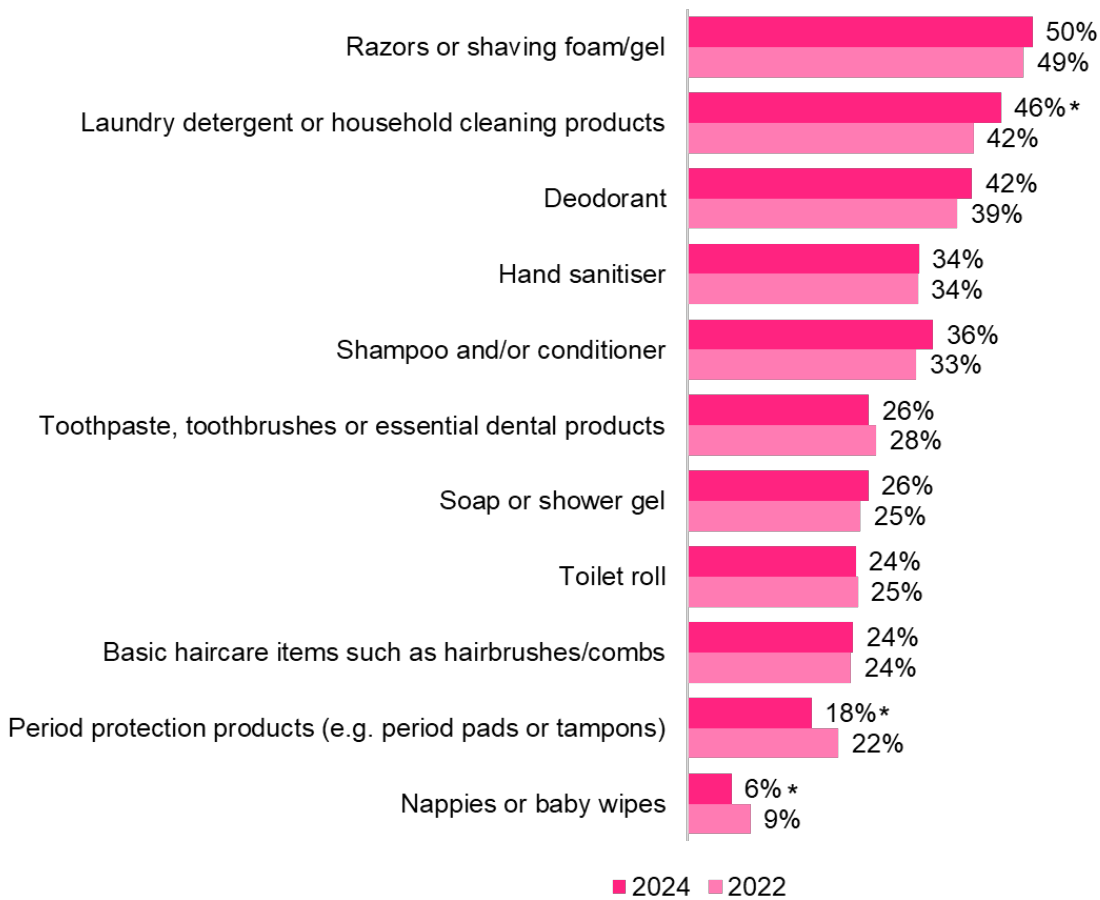
¹² Respondents were asked whether day-to-day activities are limited a lot or a little as a result of a health problem or disability. Those who self-assess their activities as being limited a lot are considered to have a limiting condition, with those limited a little considered to have a less limiting condition.

Experiences of hygiene poverty

Which basic toiletries have people gone without?

Consistent with 2022, those experiencing hygiene poverty in the last 12 months were most likely to have gone without razors or shaving foam/gel (50%), laundry detergent or household cleaning products (46%), and deodorant (42%) because they couldn't afford to buy them. There has been a slight decrease in those who have gone without period protection products (from 22% to 18%) or nappies or baby wipes (from 9% to 6%) compared with 2022, and a slight increase in those who have gone without laundry detergent or household cleaning products (from 42% to 46%).

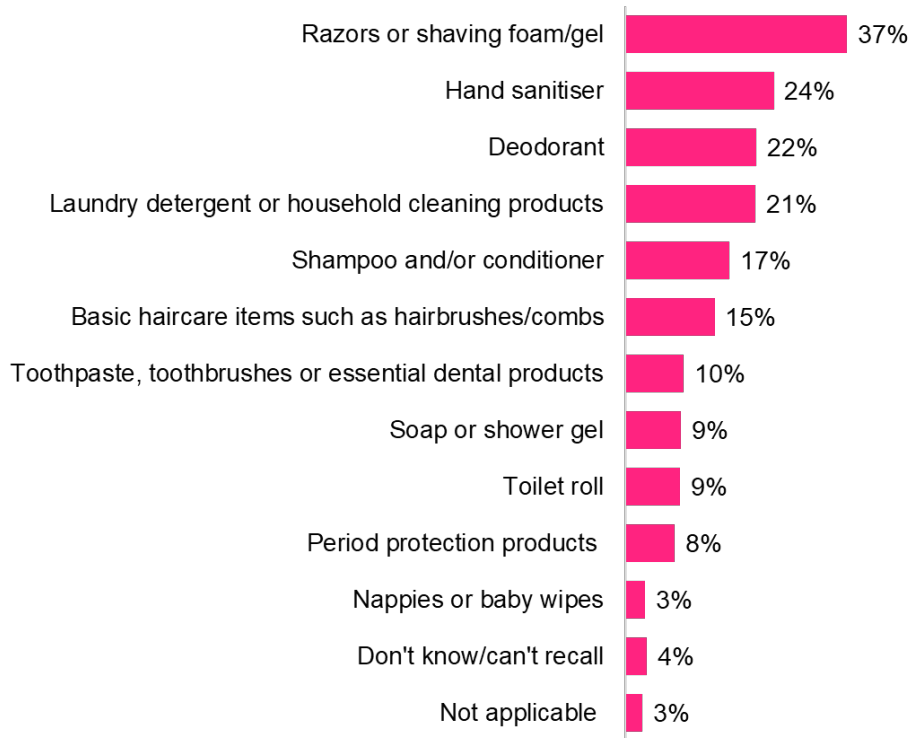
Figure 1. Toiletries and hygiene items households have gone without due to being unable to afford them



Base: All experiencing hygiene poverty (n=1,517 in 2024 & n=2,006 in 2022)

Consistent with the toiletries or hygiene products those experiencing hygiene poverty were most likely to go without, people were most likely to stop buying razors or shaving foam/gel (37%), hand sanitiser (24%), deodorant (22%), and laundry detergent (21%) first, and less likely to stop buying period products (8%), toilet roll (9%), soap or shower gel (9%), and toothpaste/dental products (10%).

Figure 2. Toiletries and hygiene items households first stopped purchasing due to being unable to purchase them

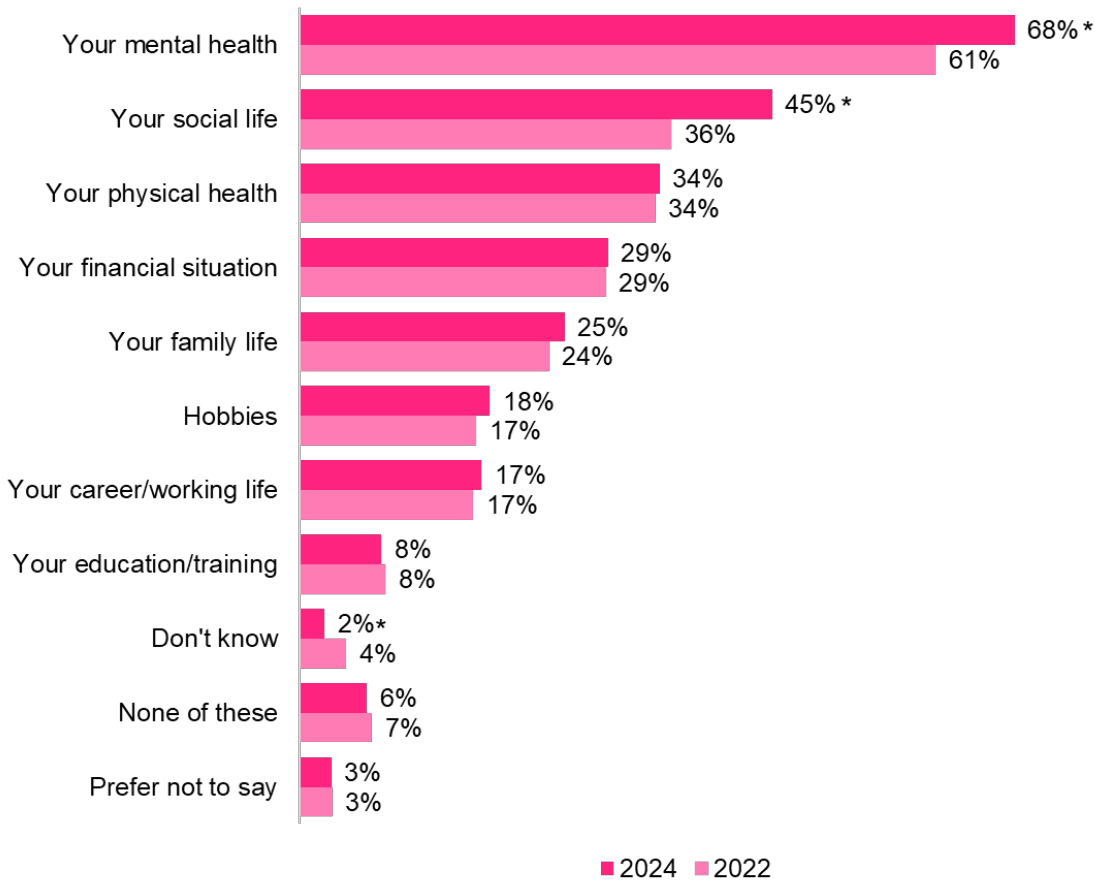


Base: All (n=1,517) in 2024

The impacts of hygiene poverty

The survey explored what negative impacts, if any, those living in hygiene poverty felt that it had on various aspects of their lives.

Figure 3. Impact of hygiene poverty on various aspects of livelihood



Base: All (n=1,517 in 2024 & n=2,006 in 2022)

Impact on mental health

The most commonly reported negative impact was on people’s mental health, with 68% of those experiencing hygiene poverty stating this, which is an increase from 61% in 2022. Notably, those limited a lot by their disability or health condition were more likely to say that their mental health had been impacted (80%), as were those who claim Universal Credit (76%).

Turning to look at differences by region, those experiencing hygiene poverty who live in the South East were more likely to report it having an impact on their mental health (76%). By comparison, those living in London were less likely to have reported this (57%).

The open-ended responses indicated that experiencing hygiene poverty has a significant impact on mental health. Individuals who cannot afford basic toiletries often experience feelings of shame and embarrassment, which can lead to increased stress, anxiety, and depression.

“The mental anguish is relentless, as the shame and anxiety of my appearance and hygiene eat away at my self-worth.”

“I feel ashamed, deprived and a failure. These feelings impacted on my physical health negatively, I felt weak and tired.”

Indeed, a majority (56%) of those living in hygiene poverty reported that it has made them feel anxious or depressed, and the same proportion also said they have felt ashamed or embarrassed. Just under a third (32%) reported feeling lonely or isolated due to going without basic toiletries.

Impact on social interactions

Turning to look at the negative impact of hygiene poverty on social interactions, 45% said it had negatively impacted their social life, an increase from 36% who said this in 2022.

The open-end analysis revealed more about how hygiene poverty can significantly affect relationships and socialising. As previously discussed, individuals who cannot afford basic toiletries or hygiene items often feel embarrassed and self-conscious, which can lead to a decrease in social interactions and a sense of isolation. Indeed, 30% of those living in hygiene poverty reported socialising less as a direct result of going without basic toiletries.

“I didn't socialise much anyway but being without basic needs has made me not want to socialise at all. I have a skin condition that I need costly treatment for. As I am now unable to afford these treatments, I am too ashamed to be seen in public much.”

“When I can't afford washing powders or deodorant, I make sure all is clean for work but don't socialise or see family and friends.”

Furthermore, 45% of people living in hygiene poverty said they have avoided seeing a friend because of it, which has increased from 39% who said this in 2022. Similarly, 44% said they have avoided attending a social event, which has also seen an increase from 36% in 2022.

“I do not go out as much as I used to, which then wasn't often. I feel like people are looking at me, especially knowing I smell.”

Impact on working life

Approximately one in six (17%) of those living in hygiene poverty reported that it has had a negative impact on their working life and career. Indeed, 13% said that they have avoided going to work and 9% avoided going to a job interview (although this has decreased from 13% who said this in 2022). Those most at risk of homelessness¹³ were more likely to have avoided going to work (33% vs. 10% not at risk) and a job interview (26% vs. 7% not at risk).

Analysis of the open-end responses revealed how embarrassment can impact someone's confidence and professionalism in the workplace. Furthermore, the stigma associated with poor hygiene can result in discrimination from coworkers, further impacting someone's working life and confidence levels.

¹³ Those who have slept rough, stayed in a night shelter, squatted, stayed at a refuge or slept in a tent in the past 3 months.

“At work, it’s a constant battle to maintain professionalism and productivity while grappling with the discrimination and ridicule that comes with poor hygiene.”

“There have been days when I cleaned my teeth without toothpaste and I’ve had to leave my hair unwashed. Makes me reluctant to mix with my colleagues as I’m concerned I smell.”

Impact on physical health

Approximately a third (34%) said that living in hygiene poverty has negatively impacted their physical health, more commonly experienced by those most at risk of homelessness (51%), those with a limiting disability or health condition (49%), men (39%), and those living in Yorkshire and the Humber (44%).

Just under a quarter (23%) of all living in hygiene poverty reported experiencing trouble sleeping due to going without basic toiletries, followed by 20% who reported skin irritations, and 18% poor oral health.

Analysis of the open-end responses portrays how hygiene poverty can lead to health issues such as skin infections and irritation (including sores, scarring rashes and fungal infections) and dental problems. These problems cause discomfort and potential infection.

“Living without basic toiletries or hygiene items has been an excruciating struggle in my day-to-day life. The physical toll is unbearable! I endure constant discomfort and health risks like skin infections and dental problems because I can’t afford essentials like soap and toothpaste.”

“Lack of hand sanitizer and sanitizers in general has caused anxiety over developing infections (viral and bacterial) and affected my skin condition due to use of cheaper products.”

Impact on dental hygiene

More than half (54%) of those affected by hygiene poverty reported not having been to the dentist in the past 12 months. Looking at at-home oral hygiene, 38% of those living in hygiene poverty reported brushing their teeth less than twice a day. Men (46%) and those from ethnic minority backgrounds (47%) were more likely to say they brush their teeth less than twice a day.

More than half (55%) of those experiencing hygiene poverty reported a change or reduction in the type or quality of dental care products they use at home due to financial constraints. This was more commonly reported by older people (65% of 55+) and those with a limiting disability or health condition (68%). It is worth noting that those with a limiting disability or health condition tend to be older, so these two findings could be linked.

The survey also asked about children’s dental hygiene, as ongoing research from the Oral Health Foundation suggests a decline in children’s oral health¹⁴. Three in ten (29%)

¹⁴ Oral Health Foundation, [NHS data](#), published 8th February 2024, accessed 16th March 2024

parents experiencing hygiene poverty reported changes or a reduction in the type or quality of dental care products used by their child(ren) due to financial constraints. This was more likely among those from ethnic minority backgrounds (40% vs. 26% of white people) and those at risk of homelessness (44%). Overall, nearly a quarter (23%) reported their child(ren)'s dental hygiene has worsened in the past 12 months, with 54% who reported it has stayed the same and one in five (20%) who said it has improved.

“The cost of dental products is sky high so being able to look after my teeth very well without regular dental check ups has had a big impact!”

“My teeth began falling out. I can't afford a dentist.”

The impact of hygiene poverty on children

Two in three (65%) of those experiencing hygiene poverty who have children have had to choose between buying hygiene products for themselves or their child(ren) in the past 12 months, consistent with 2022 (62%). Responses from parents in the open-end analysis indicate that a lack of hygiene products significantly impacts family life. Parents often prioritise their children's needs over their own, which can lead to feelings of guilt and shame, affecting their mental well-being and straining family relationships.

“My children come first and at times I have to go without so they don't.”

“[I felt] sad, low and guilty because I couldn't meet my children's needs.”

Looking at specific areas where children's lives have been impacted, one in five (19%) parents experiencing hygiene poverty said their child(ren) have missed school in the past 12 months due to dental hygiene issues with 4% reporting that it has happened three times or more and 15% reporting it happening once or twice. Men are more likely to have said that their child(ren) have missed school because of dental hygiene issues (29% vs. 13%). This is also more likely among parents experiencing hygiene poverty who are 18-34 (34% vs. 12% of 35-54), from ethnic minority backgrounds (39% vs. 13%) and at risk of homelessness¹⁵ (52% vs. 10%).

Following this, three in ten (28%) living in hygiene poverty who have children reported their child(ren)'s oral health being negatively impacted a great deal or a fair amount by going without basic toiletries or hygiene items in the last 12 months. Other areas affected included children's confidence (33%), mental health (30%), friendships (28%), and hobbies (28%). Compared with 2022 there has been a decrease in those who reported their child(ren)'s lives being negatively impacted a great deal or a fair amount across all areas.

Children experiencing hygiene poverty face social challenges, including bullying and social isolation at school. Additionally, the financial strain of not being able to afford hygiene

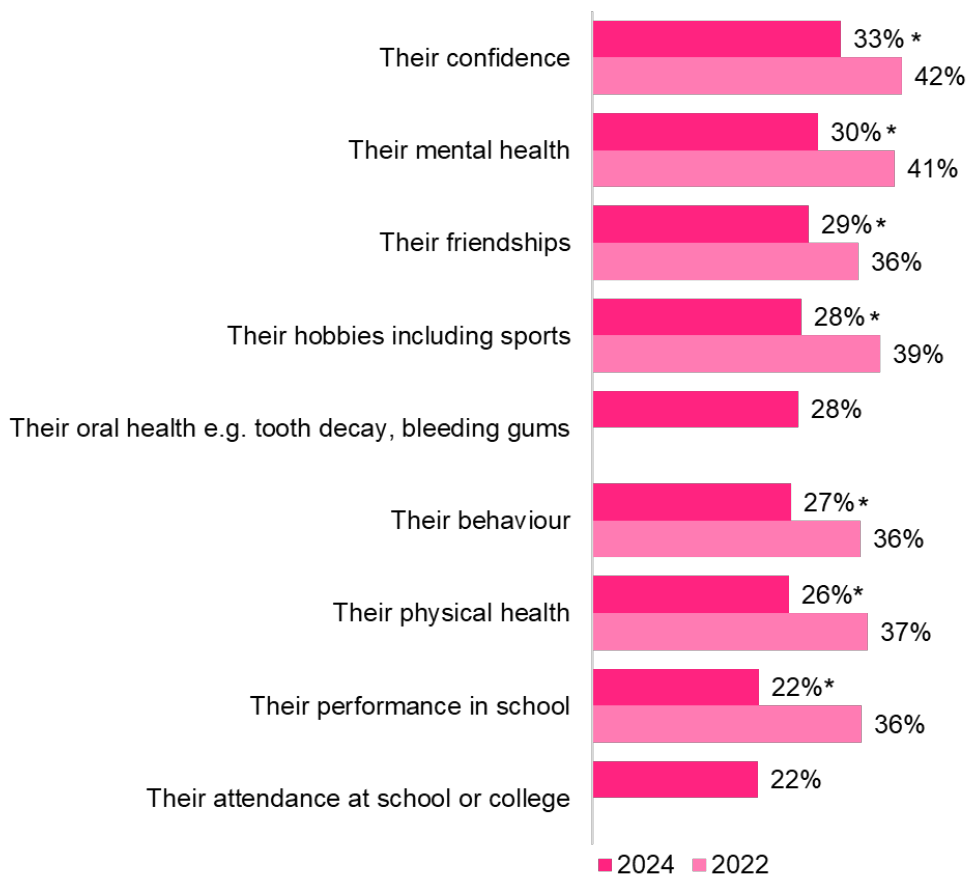
¹⁵ Those who have had to do stay or sleep somewhere other than a home in the past 3 months because they have not had somewhere safe to call home.

products can create additional stress within the family, leading to difficult choices between purchasing hygiene products and other essential items.

“Feel like a bad parent as I can’t provide for my children. So I stop buying things for myself in order for me to buy the things they need.”

“[I felt] horrible and disgusting and felt like a terrible mum that I was unable to provide the basics for my children.”

Figure 4. Areas of child(ren)’s life impacted a great deal/ fair amount by going without basic toiletries or hygiene items in the last 12 months



Base: Those with children (n=445 in 2024 & n=664 in 2022),

Answer options oral health and attendance at school were added in 2024

The impact of the cost of living crisis

With the rising cost of products, 69% of those experiencing hygiene poverty reported having to choose between paying for food or bills and buying toiletries and cleaning products. Additionally, almost two thirds (65%) of parents experiencing hygiene poverty said they have had to choose between buying toiletries for themselves or their child(ren).

The vast majority (80%) of those experiencing hygiene poverty said that the cost of living has had a negative impact on their ability to afford basic hygiene items, whilst 7% said it has had no difference and one in ten (10%) reported a positive impact. Women (84% vs. 74% men), those aged 35-54 (88% vs. 71% 18-34), those from a white background (84% vs. 66% ethnic minority backgrounds) and those not at risk of homelessness (84% vs. 61% at risk) are more likely to say it has had a negative impact.

"I find it confusing and difficult, because basic hygiene items are essential for everyday life. Frustrating that having a university degree and working full time, I have to go without certain items because of the cost of living."

"I felt embarrassed and also ashamed, because I work full-time, yet still struggle to support myself and my son."

The main reasons cited among those who reported the cost of living having a positive impact included receiving support from friends/ family (27%), people being more considerate (21%) and less of a need for toiletries due to going out less (21%). Around one in seven also reported receiving support from food banks (15%), charities (15%) and their local council (14%). This increased support from friends/family and organisations may explain the increased likelihood of the cost of living having a positive impact on the ability to afford toiletries or hygiene items among those most at risk of homelessness (34% vs. 7% not at risk).

The increased cost of basic toiletries or hygiene items was most commonly cited (71%) as the main reason for the cost of living having a negative impact on the ability to afford these items, closely followed by less disposable income (70%), and having to choose between paying for food or bills and toiletries/cleaning products (62%).

"When you can't afford the basics it really is soul destroying, I had to resort to using family and public venues for basics."

"It's embarrassing in this day and age to have to choose between heating your home, feeding your kids and keeping yourself clean and hygienically healthy."

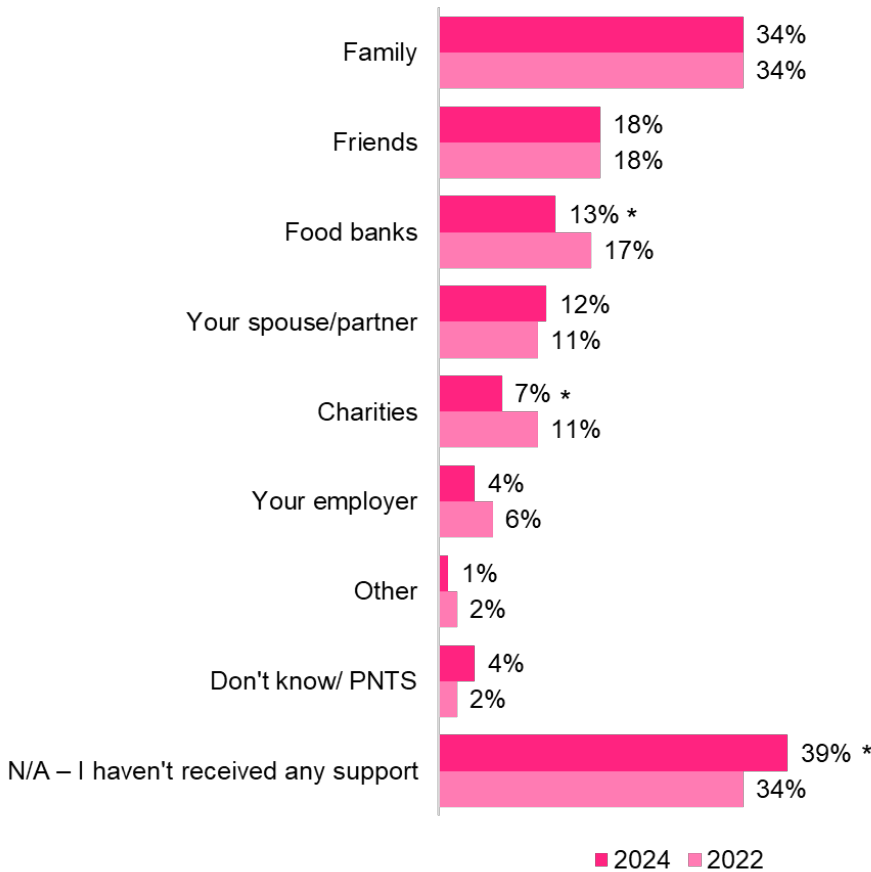
Accessing support

Just 8% of those living in hygiene poverty reported receiving help from a hygiene bank in the past 12 months, however it is worth noting that 13% also reported receiving help from a food bank to get basic toiletries and hygiene products (although this is down from 17% in 2022). Accessing help from a hygiene bank was most common amongst younger people, as 15% of 18-24 year olds reported receiving help from a hygiene bank compared with just 1% of those aged 55+.

Comparatively, a third (34%) received support from their family to help them get basic toiletries or hygiene items, which made it the most common of the support avenues asked about. Following this, consistent with 2022 findings, 18% said they received support from their friends, and 12% from their spouse or partner. Those experiencing hygiene poverty

who live in London were more likely to have received help from friends (23%). They were also more likely to have received support from charities (10%) and their employer (8%).

Figure 5. Support sources in the past 12 months to help get basic toiletries and hygiene products



Base: All experiencing hygiene poverty (n=1,517 in 2024 and n=2,006 in 2022)

Compared with 2022, a higher proportion of those living in hygiene poverty reported not receiving any support to help them get basic toiletries (39% vs. 34%). This increase could, at least in part, be a direct result of fewer who reported receiving help from food banks (13% vs. 17% in 2022) and charities (7% vs. 11% in 2022).

Older people experiencing hygiene poverty were more likely than their younger counterparts to have not received any support (51% of 55+ vs. 19% 18-24 year olds).

Barriers to accessing support

Just under half (48%) of those experiencing hygiene poverty said that they have felt too embarrassed to ask for help to access hygiene products, a finding which is consistent with 2022. One in ten (10%) said that they have asked for products on behalf of a friend or family member who themselves have felt too embarrassed to ask.

Figure 6. Types of support received



Base: All experiencing hygiene poverty (n=1,517 in 2024)

Feelings of embarrassment were more commonly held by those who are older (53% of those aged 55+ vs. 34% 18-24), which in part could explain why they were also less likely to report receiving support to access hygiene items. Men were also more likely to report being too embarrassed to ask for help (51% vs. 46% women), as were those from a white background (50% vs. 40% ethnic minority backgrounds), those who live in the South East (58%) or Yorkshire and the Humber (60%), and those who have a limiting disability or long-term health condition (57% vs. 45% without). Those most at risk of homelessness were most likely to feel comfortable asking for help (35% vs. 12% not at risk), as were those living in London (21%). Notably, those living in London who have experienced hygiene poverty were also more likely to say that they have had to ask for hygiene products on behalf of friends/family because they have been too embarrassed to themselves (15%).

Furthermore, 45% of people living in hygiene poverty reported feeling judged for going without basic toiletries or hygiene items, and just over three quarters (77%) of those who felt judged said it prevented them from accessing support (consistent with 2022). Those who are aged 55+ were again more likely to report that feeling judged prevented them from accessing support (88% vs. 63% 18-24 year olds). Those who have a limiting

disability or long-term health condition were also more likely to report not accessing support due to feeling judged (88%) than those without (71%).

“I have no support from family and friends and would not ask them for help in this matter anyway.”

“I feel that I'm letting everyone down and I'm reluctant to ask for help, so I find a way to manage.”

The tables containing all the data can be found [here](#).