STILL SERVING HOT SOUP? REVIEW OF EMERGENCY FOOD PROVISION IN AUSTRALIA

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Intro
• PhD

Study
• Design

Results
• History
• Scope and nature of not for profit food sector
• Implications
PHD

How can food rescue organisations best utilise their resources to tackle food insecurity?

Three part case-study:

Supported by Deakin Research Scholarship and SecondBite Research Scholarship 2012 - 2015

LITERATURE REVIEW DESIGN

- A review, using systematic methods, of relevant peer-reviewed and grey literature
  
  Guidelines: Systematic reviews of health promotion and public health interventions from The Cochrane Collaborations’ PHG 2007

- Narrative synthesis
  
  What is the prevalence, causes and consequences of food insecurity and the associated responses?
  
  What is the nature and scale of the not-for-profit food network?
STUDY DESIGN

An initial scoping review on this topic revealed key terms, sources and helped to develop the review protocol. Dates 2002-2012

Sources:

- Informit, EbscoHost, Scopus
- Deakin University library catalogue
- Australia Policy Online
- Forty-four community websites

Relevance criteria used for inclusions/exclusions
RESULTS...

- History of food relief – public policy context and key actors/events
- Current scale of food relief and community food programs
- Current nature of activities – strengths/weaknesses
- Implications

“Still serving hot soup? Two hundred years of a charitable food sector in Australia: A narrative review” ANZJPH Early view Feb 2015

HISTORICAL CONTEXT

1780s+ Aboriginal Australians dispossessed from land. Devastating social, health and cultural dislocation
1813 The NSW Benevolent Society Australia’s first charity established
1930s The Great Depression and the start of food bank type programs
1958 Wrongs Act in Victorian legislation, enabling donation of food
1970s Commonwealth funds Emergency Relief > States/Territory deliver these services
1974-96 The school meals program through the Disadvantaged School Programs policy
1990s Foodbanks are formalised, for example, Foodbank WA 1994, Foodbank Tas. 2010
1995 National Nutrition Survey – 5.2% Australians ‘food insecure’
2000-10 Australia’s drought impacts food production, cost of living and cost of food
HISTORICAL CONTEXT

2001 Good Samaritan Legislation enables first food rescue, Fare Share. Triggers OzHarvest ‘04, SecondBite ‘05, Food Rescue ‘11
2007 Global Financial Crisis (GFC) occurs
2008 Social Inclusion Board starts
2009 The National Strategy for Food Security in Remote Indigenous Communities launched
2009-2011 Australian Government made GFC $80.4 million
2011 National Food Plan Discussion Paper, Green Paper ‘12, the National Plan in ‘13
2012 FoodBank supports 2,500 agencies and 640 schools
2012 The Red Cross Breakfast program supports 200 schools
2012 three of the largest Australian charities speak out on food insecurity: Anglicare, the Salvation Army’s and FoodBank Australia
2012 ACOSS and others call for reforms to Newstart Allowance and Parenting Payments because of cost of living (including food)

CONTEMPORARY: POLICY ENVIRONMENT

DOWNSTREAM
- State and Federal: Shrinking in welfare space
- Local government and philanthropy
- Individualised responsibility for food insecurity (1)

UPSTREAM
- Nutrition and dietary guidelines
- Food safety
- Monitoring health / FI
- Social security and welfare delivery
- Social/Health/Food public policy
CONTEMPORARY: CHARITABLE FOOD SECTOR

- Not-for-profit food sector includes large food banks, food rescue organisations, over 3,000 charitable agencies and 800 school breakfast programs

- 900,000 – 2,000,000 people with food each year (2,3)
**STRENGTHS**

**Food service provision...**

- Alleviate/mitigates hunger and provides emergency relief to very marginalised community.
- Programs operate through volunteer labour and donated surplus food - **practical and low in cost**.
- **Gateway** to additional services or provide a buffer to protect from further crisis.
- Job loss, natural disasters and poor health can affect any Australian in their lifetime and over **3,000 programs** exist to help alleviate these occurrences.
- This sector offers a **realistic and localised** immediate service for some people, until poverty and food security can be improved.

**STRENGTHS**

**Beyond food...**

- Agencies do **more than food**: they also deliver case management, housing services, job skills, crisis support and other welfare, or they have the capacity to refer people onto services.
  
  For example: The Asylum Seeker Resource Centre (4)

- **Advocacy** for fair social policy and increasing awareness about inequality is also a part of the work that occurs in this sector.

  For example: Anglicare conducts research and activism (5)

  Most agencies in the welfare sector support the peak advocacy group, the Australian Council of Social Services (6)

  SecondBite and others have advocated for a more equitable and healthy food system (7)
WEAKNESSES

Food service provision…

➢ Food provided to Australia’s most vulnerable people is of poor nutritional quality (safety issues, non-nutritious food, ‘left over/surplus’ food)

➢ Food provided is inappropriate (cultural/dietary requirements, availability, volume)

*Dignity and social acceptability

Other services…

➢ The limited resources available to this sector: currently, it likely means that agencies have to compromise on skilled staff, food quality and quantity and delivery of services

Furthermore…in light of a growing demand on the sector and research that highlights threats to the food system, growing diet related disease and a poor track record on poverty reduction in Australia — even more resources may needed in future

WEAKNESSES

➢ Diversity and breadth - reform to just one part may be unlikely to sufficiently affect the whole space. There may be strength in the inter-relationships in this sector between schools, primary care providers, hospitals, social services, food industry, welfare, business and all levels of government. Is it actually a sector????

➢ The complex social and health needs of clients mean specialist services and long-term support required.

For example, a cross-sectional study of soup kitchen clients (n=100) revealed one in three had difficulty in following prescribed medication treatments and a Salvation Army report (n=1,731 clients) identified 78% could not afford to get to a doctor and 71% felt stressed for their future. (8,9)

➢ The sector in the downstream may have a limited capacity to influence upstream systems that determine health and wellbeing in their client group.
IMPLICATIONS

- Nutritious and dignified programs – scaled out to areas of need.
- $$$ needed for wrap around services, improved referral pathways and infrastructure to tackle underlying causes.
- Integration into community food security mandate and cross-fertilisation of programs, clients and resources.
- Transparent systems that outline the roles/responsibilities/capacities of various actors and interventions will help to clarify the strengths and weaknesses of this sector, so that it does not grow unchecked or at the cost of more upstream preventative measures.
- Advocacy could be based on the human right to food and to health, the social inclusion agenda or sustainable/equitable food system movement.

IMPLICATIONS

- Supporting the charitable sector with monitoring frameworks, best-practice food programs and effective services to help reduce poor health in low-income populations.
- Action-research agenda could be championed to provide increased community driven responses and/or client input into CFS.
- Research into evidenced-informed advocacy platforms to address the major policy failures that precipitate this issue.
- Research could identify integrated prevention activities for not-for-profits and food security stakeholders.
REFERENCES


