

30<sup>th</sup> June 2014

## **SUBMISSION TO THE ALL-PARTY PARLIAMENTARY INQUIRY INTO HUNGER AND FOOD POVERTY IN BRITAIN**

I am grateful to the All- Party Parliamentary Inquiry for the opportunity to contribute written evidence; this submission is in addition to information I have previously supplied directly to Andrew Forsey and contribution with the Cabot Institute in Bristol. It is written in a personal capacity.

My submission draws on two decades of work on food and poverty in the UK as both a registered nutritionist (public health) at LSHTM and now as Professor of Food and Social Policy at the University of Warwick. I am a trustee of the Food Ethics Council.

**In summary:** while hunger can be assuaged by emergency food provision, the underpinning and more serious issue of food poverty requires systematic and structural responses. Households and individuals need enough money to purchase appropriate and sufficient food for healthy living – which includes minimal social engagement – and to be able to reach decent shops selling food at affordable prices. Building people’s capacities for cooking and understanding healthy eating has only a minor place in addressing fundamental needs, however laudable and welcomed by those asking for help and charities providing support. All should be able to enjoy a healthy, pleasurable diet in a rich country such as the UK, and should be able to obtain it in socially acceptable ways. Existing state systems of support should be extended, for instance in universal free school meals (not just for infants) and in-kind support to parents and those caring for people in need.

The food industry has an important role in providing and promoting the elements of a healthy diet at affordable prices, and secondly, in more systematic engagement which enables food not/no longer destined for retail sale to be prioritised for human needs, through mechanisms which offer dignity and social wellbeing.

The state has responsibilities to protect, respect and fulfil the right to food.

### **In detail:**

#### **1) To understand the extent and geographical spread of hunger and food poverty;**

a) Unlike fuel poverty, ‘food poverty’ has not yet been systematically defined. Defining it in a similar way to fuel poverty as ‘households which spend above X % of income on food’ is not yet agreed and seems to me difficult to defend (*pace* recent work by the Centre for Economic and Business Research). This is for three main reasons. Firstly, food expenditure is more complicated than fuel expenditure: the latter usually relates to a dwelling – one place where a household lives, whereas food is eaten by individuals, who can both share common food purchases and equipment, cooking fuel etc, as well as buying their own food as appropriate. Secondly, people can satisfy energy and nutrient needs by consumption of different foods with different costs: taste, cultural demands, age etc, affect which foods they buy, and how they prepare and consume them. Food costs vary a little by geography but a lot by shop (major retailers are, by and large, much cheaper than small local

shops), so that food expenditure will depend not only on what commodities people choose to buy, but also where they are able to shop and sometimes at what cost, if they have to pay for transport. Thirdly, the reality is often that people cannot afford to buy the food they want and need, because other essential demands take precedence (fuel, rent, children's shoes, debts), so it is hard to interpret what people on low incomes actually do spend on food, in relation to other purchases.

b) UK and other governments have tried to estimate both the costs of a 'minimal healthy diet' and to see what proportion of expenditure enables people to meet health dietary guidelines. The results are seldom published because it is hard to interpret the findings, for all the reasons above and more.

c) Nevertheless, food poverty, while lacking precise definition, is usually taken to mean *the inability to consume an adequate quality or sufficient quantity of food in socially acceptable ways, or the uncertainty that one will be able to do so*. This definition is often seen as synonymous with food insecurity at the household level<sup>ii</sup>. The converse, 'food security', is broadly recognised as the situation where 'all people, at all times, have physical, economic and social access to sufficient, safe and nutritious food to meet their dietary needs and food preferences for an active and healthy life.' In a country such as the UK this implies people have sufficient money to purchase the food they want to eat, to meet social as well as health and nutritional norms; that this money is not absorbed in other expenditure demands (rent, fuel, debt repayment, etc.); that people can reach shops or markets which stock appropriate food at affordable prices or they can grow or otherwise obtain food in ways which are dignified and in keeping with social norms. Thus, food poverty can be said to occur where these conditions are not fulfilled.

d) One approach to constructing indicators of households likely to be experiencing food poverty is to employ consensual budget standards, such as the Minimum Income Standard produced by the Centre for Research in Social Policy (CRSP), Loughborough, work which is funded by the Joseph Rowntree Foundation. This provides budgetary estimates of weekly income needed to meet consensually defined essential expenditure for 11 different household types. The budget, updated annually, was recently re-examined to establish what people saw as 'essential' in recessionary times; each component budget list is checked by relevant experts so that it meets any statutory recommendations. (Note that the food costs applied are those of a typical major retailer, which not all households can access). The latest Findings ([www.jrf.org.uk/topic/mis](http://www.jrf.org.uk/topic/mis)) show that neither social security benefits nor the National Minimum Wage are sufficient to enable households of different sizes and compositions to meet the costs of a consensual minimum acceptable standard of living, except perhaps average pensioner households. While people might quibble with some of the components of 'acceptable' living standards, although they are fairly parsimonious, they cannot truly argue with the food budget, which matches consumption patterns of the lowest decile in the UK national annual Family Food Survey adjusted to meet nutrient requirements and healthy dietary guidelines (such as 5 daily portions of fruit and vegetables)<sup>iii</sup>. The implication is that people do not have enough money to buy the minimum diet required for health; people usually prioritise expenditure with significant consequences for default (such as rent, local taxes, fuel) over food, consequence for whose lack or inadequacy is borne in the body and personal condition.

e) There have been a number of small-scale surveys and anecdotal accounts from health, social care or education professionals which show that those on the lowest incomes or long term social security benefits, and/or living in areas of multiple deprivation (poverty is not only about income, as is widely acknowledged) are considerably less likely to meet health guidelines and consume appropriate levels of nutrients in their regular diets. Many people have had to take out loans at high rates of interest from loan firms so as to meet essential expenditure; marked indebtedness regularly features in contemporary accounts. They indicate the difficulties faced by those whose incomes are insufficient to obtain the food they need. The Defra Family Food Survey also shows poor dietary quality in those in the lowest income decile or quintile.

f) There have been a number of attempts to ask people who live on low incomes or in areas of multiple deprivation what they think 'food poverty' is<sup>iv</sup>. The Poverty and Social Exclusion survey, which draws on the *Breadline Britain* methodology, also conducts systematic consensual views on how the general public defines 'poverty' and at least 3 indicators on food practices are consistently included<sup>v</sup>.

f) Note that CRSP (above) recently worked with the Sustainable Living group at the University of Surrey to establish the principles and preliminary costings of a 'Sustainable' Minimum Income Standard. This is also a critical issue: how to ensure that demands for more sustainable living practices among the whole population do not further jeopardise the wellbeing of those on low incomes. The report is on the CRSP MIS website<sup>vi</sup>; it includes some discussion of the implications of meeting GHG standards on low incomes, particularly for food.

g) My own research in 1993-4 on diet in lone-parent households showed that those who had lived on Income Support for more than a year had worse nutrient intakes and dietary patterns than those who had not done so. At that time many fewer households were working on zero-hour contracts and none in our sample.

f) We know that the cost of key essential items of expenditure varies across the country (particularly housing).

**It would be reasonable to use numbers claiming social security benefits or working for the National Minimum Wage for, say, more than a year as indicators of those likely to be in food poverty. Such data could be presented by different household types, matching those used in the Minimum Income Standards work. These data are available geographically, and could be combined with regional or district level data on housing costs (and perhaps fuel) as well as numbers on zero hour or 6-monthly contracts, to indicate where essential expenditure would particularly squeeze household budgets for those on very and/or insecure low incomes.**

This would give a first set of estimates of the geographical variation in likelihood of food poverty. Data from the Family Food Survey could be used:

- to examine dietary quality and nutrient intake in the lowest income deciles;
- to examine the distribution of, e.g. four key nutritional and food indicators (saturated fat, refined sugar, vitamin C, iron, quantity of vegetables [excluding potatoes], fruit, fruit juices) by income, by household circumstance (e.g. job/job security, size, housing tenure)
- to establish which income level or socio-economic indicator corresponds to significantly worse diets.

## **2) To investigate the underlying causes of hunger and food poverty in this country;**

a) My own research and that of a number of others indicates the key causes of hunger and food poverty to be structural – how much money people can spend on food, what it costs them, and whether or not they have equipment and fuel to store and cook it – rather than individual characteristics, such as whether people know what to buy and eat, can budget and cook well. I summarise findings of national level and smaller scale surveys, which use both quantitative and qualitative methods.

b) The household food survey data from Defra consistently show that those in the lowest quintile or decile of household income have lower micronutrient intakes, and purchase many fewer fruits and

vegetables, than those in the top quintiles or deciles. The gap between dietary intakes has widened in recent years, under economic austerity. This is documented in reports by the Institute of Fiscal Studies and the Centre for Economic Business Research<sup>vii</sup>. Few other variables differentiate diets so sharply. Work by Hossein et al, Goode, and our work for Defra in 2010, all indicate people finding it more difficult to purchase the kind of diet they want to as food prices have risen and the effects of increasing measures of economic austerity have been felt, particularly on household income<sup>viii</sup>.

c) The survey of diets of lone parents mentioned above constituted a weighed-intake survey on lone parents and at least one dependent child in nearly 200 households in London<sup>1</sup> as well as a Food Frequency Questionnaire which enabled construction of dietary quality indicators. Parents were also interviewed in detail on healthy eating and on their cooking, shopping, budgeting practices and thinking. We examined dietary quality and nutritional quantities in terms of household management practices as well as income, distance to shops, socio-demographic data, housing, etc. About a quarter of the sample was in paid work. Those who had been in receipt of income support for more than a year and who were paying off fuel or housing arrears, managing their household expenditure very tightly, had micro-nutrient<sup>2</sup> intakes which were half the levels of those who were not on income support, or who did not use such management techniques. In some instances (e.g. iron), a very high proportion of lone parents in the former category had intakes below the Lower Reference Nutrient Intake, which indicates a very high probability of deficiency (in this instance, of iron-deficiency anaemia). **Poor material circumstances, particularly when combined with severe constraints on disposable income through repayment of debt arrears, were the main factors associated with poor nutrition and dietary quality in lone parents and sometimes in their children. Poor budgeting or shopping practices did not account for food or nutritional deprivation.**

d) The most financially stressed lone parents often adopted rigid budgeting strategies to try to manage limited resources, for example, buying stamps for future bills, spreading payments for consumer goods widely, using electronic key meters; however, the consequence was in poorer diets, particularly for the parent, as food expenditure was severely reduced to meet payments. If people used discount stores and bought only the cheapest food, their nutritional outcomes were worse than those who did not shop in such stores. This was not necessarily because of the quality of foods stocked; more, it was because people had very little money to spend and bought only the cheapest – and not necessarily healthiest – foods<sup>ix</sup>.

Note that **lone parents in 2013-14 who are not in well-paid work are likely to be relatively worse off financially than those we interviewed in 1993-4<sup>3x</sup>. Thus the consequences for their diets and health are also likely to be worse.**

e) Lone parents who aimed to shop for 'healthy', 'fresh' food achieved better diets for themselves and their children than those who did not; nevertheless - despite any more positive approaches - the diets of poorer families were still less healthy than those of better-off families. Parents who smoked had worse diets than those who didn't but any detrimental effect of smoking on diets was exacerbated in poorer families. The diets of smokers' children were hardly affected. Interestingly there were also small but consistent differences by ethnic group (self defined): those who shopped for and cooked food typical of black British, west African or Caribbean households did better nutritionally than those eating food typical of white households, irrespective of social class. When asked about experiences of hunger, the majority said they always had something in the house,

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<sup>1</sup> note that the only difference between our sample and a national sample of lone-parent households for the then DSS was in the higher proportion of minority ethnic headed households in London. Thus the data can reasonably be used to represent national circumstances in the early 1990s. For more details, see relevant academic references.

<sup>2</sup> micronutrients refers to vitamins and minerals. There were no differences in macro-nutrient intakes (protein, fat, energy) which mirrors all national survey findings.

<sup>3</sup> at the time of the survey, lone parents were not required to seek paid work as soon as their youngest child was 5 years old, and they could claim a supplement to child benefit.

however limited, to fall back on, but many of those who had claimed income support for some time had known periods when they had had very little indeed to eat. Parents always protected their children's eating; where there was insufficient food, it was the parent who had gone without; many parents skipped meals on a regular basis. These findings are echoed in others' more recent research.

**Material factors, particularly consistent low income which is inadequate to meet essential expenditure, and often subsequent indebtedness, are the main determinants of hunger and food poverty. Food expenditure is usually the flexible budget item; hunger can be more easily assuaged than food poverty. Personal skills and desires for healthy and 'fresh' food, as well as deep cultural characteristics, can play a part in shaping budgeting and cooking practice such that a better diet is obtained; however, these do not mitigate the effects of having insufficient money for food.**

**3) To identify the circumstances behind the rising number of people requiring emergency food assistance in this country;**

a) Recent work for Defra and the CCN+ network examined the drivers of rising demand for food assistance<sup>xi</sup>. In summary:

**The growing demand, both from first-time food aid users and from those who have previously been helped continuing to need food, is largely driven by 'crises' in household income, such as loss of a job or problems with social security benefits. These are often underpinned by on-going problems of low income, rising food and other costs and increasing indebtedness.** Further evidence on key current triggers to food aid usage, particularly in respect of problems over social security benefits, housing and low income, can be identified from voucher providers and systematic accounts from the larger systems of emergency providers (such as The Trussell Trust Foodbank Network, FareShare partner organisations, and the Church of England), as well as those working at grass roots (such as Church Action on Poverty, local food initiatives). More systematic and extensive research is required to elaborate more fully both the bigger picture of current food poverty/insecurity and of food aid usage and provision.

b) The growing demand may have contributed to more food aid being provided, through existing and new structures, but there is no systematic evidence that increased food aid provision is causing demand. All available evidence both in the UK and international points in the opposite direction, that there is more need and informal food aid providers have been trying to help.

c) Evidence from those providing vouchers (such as Citizens Advice Bureaux) and those running provision, as well as small-scale research by academics and ngos, points to many households than before facing severe constraints in managing food needs and adopting a range of tactics to avoid having to ask for help. Seeking food aid has usually been a strategy of last resort. Even so, many households do not use food aid, for a variety of reasons, including access, awareness and stigma. International research findings on household behaviour under financial pressure are a useful contribution to understanding this problem in the UK.

d) What is also widely recognised by providers in the UK, and established in the international literature and experience, is that where informal food aid provision is adequate, appropriate and tailored to the needs of users it may be able to relieve short-term symptoms of household food insecurity such as not having enough money that week for food. However, the evidence also suggests that informal food aid does not and cannot address the underlying causes of household food insecurity and food poverty, and may in fact contribute to masking its severity because society (and individuals involved in food assistance) can assume that problems are being addressed.

e) Because people's and local circumstances vary, and because there are now a number of different networks and systems in place as well as 'one-off' activities, it is difficult it is to interpret data on food aid usage (whether numbers of people, households or food parcels) reliably. There are considerable drawbacks to using such data as a proxy for the extent and depth of the numbers, background circumstances and experiences of food insecure/food poor people and households.

#### **4) To understand the extent, nature and organisation of emergency food assistance schemes in this country;**

a) There are two well known schemes supporting emergency food assistance in the UK: The Trussell Trust Foodbank Network and organisational partners to FareShare. Although the phenomenon of giving food to those in need is not new in the UK, the term 'food aid' has been adopted more recently. The practices encompass a range of different types of assistance beyond provision of emergency food parcels. Practice and vocabulary have been shaped by different approaches by different organisations, whether these are franchised networks or local initiatives. The term 'food bank' (which is relatively new in the UK) has come to mean initiatives which provide emergency parcels of food for people to take away, prepare and eat at home.

b) Food assistance or aid projects vary considerably, both in their activities and size, as well as their motivations. What they broadly have in common is seeking to help people with food in different ways and include: provision of food vouchers which give access to free food parcels; 'soup runs' (i.e. mobile food provision, often of soup or sandwiches); day centres and 'drop-in' centres (various forms of food provision are offered, free or subsidized, as part of wider support, which can be targeted at particular demographic or socio-economic groups); meal programmes; and community cafes (where food is often subsidized or provided at very low cost by use of volunteers as staff, often with minimal premise costs). With the exception of government-funded food vouchers such as through Health Start<sup>4</sup>, the majority of this provision is run by local groups and charities (who may/may not have public or local authority funding or in kind support).

c) The current high public profile of organisational models such as The Trussell Trust Foodbank network which began in 2000 can imply that such provision is a new phenomenon. However, food projects have long existed in the UK to help people access cheap or subsidized food; some have provided free food onsite or take-away; some have specifically aimed at improving food access, while others have been more concerned with capacity building<sup>xiii</sup>. Some target particular groups, including those in areas of relative physical inaccessibility of food (so-called 'food deserts'). A growing body of research has shown such initiatives, which usually work with small numbers of people, have some potential in supporting households by providing access to highly subsidized food (e.g. through buying co-operatives where prices are kept low through use of volunteer staff, wholesale bulk purchase and minimal cost premises) as well as in building confidence, skills and capacity in individuals who may be lacking some or all of these characteristics. They can add to financial, social, physical, natural and human capital for a local economy<sup>xiii</sup>. However, work for the Joseph Rowntree Foundation on local food projects showed that key to such initiatives' sustainability is local level/community 'ownership' and ongoing resources, particularly funding<sup>xiv</sup>. Many such initiatives would not until recently have seen themselves as providing emergency help; nonetheless, anecdotally a number of them have begun offering food parcels as demand has risen, or have found more clients/members/users facing more difficulties in managing food than in the past. The food initiative landscape has been shifting in recent years.

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<sup>4</sup> For more information see the Healthy Start website: <http://www.healthystart.nhs.uk/>.

- d) Among projects which do see themselves as emergency food providers there is variation by:
- how people obtain access to them (whether users can self-refer or have to come through ‘gate-keepers’, and if the latter, how these systems work and are managed);
  - how the project is managed (opening times, staffing, what else is on offer);
  - what the parcels actually contain, who decides and on what criteria (The Trussell Trust Foodbank Network parcels follow nutritional advice to meet needs of given household size);
  - how the food which is put into parcels is sourced (whether through individual donation, as The Trussell Trust Foodbank Network was set up to do, or from retail or manufacturer donations via an organisation such as FareShare, or whether local volunteers collect from local shops).
  - how clients/recipients/users/members (all these and other terminologies are used) are seen by providers, and vice versa.

Recent rapid increases in demand both for new food banks, and for more food from existing banks to more people, have led to projects evolving new ways of sourcing, handling and managing throughput, and opening more often or for longer hours. It would be difficult to keep any database of initiatives, were such to exist, up to date<sup>5</sup>.

**5) To discover the food choices and other forms of support available to clients when using emergency food assistance;**

- a) The research cited above for Defra showed that food aid providers offer different types of food with different sourcing; some (such as the Trussell Trust Foodbank Network) try to ensure a nutritionally balanced parcel, while others offer a parcel of basic key foodstuffs. Those who provide cooked food onsite or from mobile vans often say they try to offer a ‘balanced’ meal, while also offering what they know their usual client base will want to eat – food has an important social value as well as nutritional.
- b) Food aid providers clearly see other support they are able to offer in addition to food as an important aspect of what they do. This other support includes sustaining the ‘human face’ or personal contact, signposting to other sources of advice and support such as social security benefits and work, and providing other tangible aid such as clothes. Coordination with external support systems to address underlying causes of poverty and food insecurity is essential to the long-term success of food aid programmes.
- c) Further to comments above about types of food assistance projects other than those distributing parcels of food, it would be regrettable if those who are now establishing food projects did not build on the experiences of those who have been running community level initiatives for some time. As well as the projects evaluated with support from JRF, AWM mentioned above there has been considerable work done more recently with Big Lottery funding<sup>xv</sup>. Here too, demonstrable essentials for sustainability and success have been consistency of aims, sufficient time to develop and on-going funding. All local level initiatives suffer from having continually to reinvent/redirect initiatives to match new and different sources of financial and other support. Such effort is draining and distracting for often over-stretched staff and volunteers; while this is true of many community level initiatives, it is particularly true in food projects, where funding is precarious and often subject to changes in aim and applicability.

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<sup>5</sup> note that in the past, Sustain maintained a database of local food poverty projects, and Community Food and Health Scotland, and FSA Wales, continue to do so. It is hard to keep them comprehensive and fully searchable. Sustain’s database was discontinued partly because many of its members disliked being labelled ‘food poverty’ projects.

6) **To investigate the source of emergency food assistance providers' supplies – how much is supplied by consumers and institutions?**

no comment – FareShare and other sources are much better placed to respond.

7) **To consider the effectiveness of emergency food assistance in meeting immediate and long-term needs, and the possibility of these schemes becoming permanent features of the welfare state;**

a) This is a critically important question. There is no evidence from international experience or published academic literature that emergency food assistance schemes, particularly those initiated by and sustained through community and local levels, do more than provide for immediate short-term needs. In countries where the state provides emergency food assistance, there was evidence from our rapid evidence assessment for Defra that reductions in such governmental food aid led to increased uptake of non-governmental food aid (which in the countries concerned was organised on a much larger scale than is presently the case in the UK). Secondly, that systematic government provided food assistance delivered measurable positive effects on household food security, while non-governmental food assistance did not.

b) Current UK food aid provision, which is informal and non-governmental, is vulnerable to not being able to meet existing or rising demand. Its hitherto rather ad hoc nature and its dependence on donations (from individuals and from industry) and on volunteers makes it vulnerable to not being able to adjust easily to changes in need, and few systems currently in place can deal effectively with sudden shifts in demand (geographically or over time). The larger scale networks are changing their management and organisational systems quite rapidly to meet changing demands, and changing their character and structures in order to do so. Many working in more local level activities find themselves regularly overwhelmed; their responses are too small and too piecemeal to meet sustained systematic need – they can only manage stop-gap, emergency provision, and in places even that is struggling.

c) There is a literature elsewhere on the general benefits and costs of volunteering (not just in food aid provision) which I am not qualified to provide. What I can point to is evidence on food aid provision which suggests there is a risk that the work of collecting, sorting and distributing food for people's immediate needs occupies all available volunteer energy and resources. People are clearly very generous with time and other resources. There is no doubt that many involved in such initiatives, who may begin with a mixture of motives for participation, can experience considerable sense of personal involvement and reward from the engagement, and many commit years of time and skills in order to benefit their neighbourhood/ fellow citizens. For some, volunteering can lead to new roles and/or employment opportunities; for others, it is way to offer a tangible, local commitment.

d) Nevertheless, **there are critical issues of social justice to be considered. There is no historical precedent in recent periods for the inadequacies of waged work or social security being met through (largely unaccountable) citizen action in feeding those who are unable to afford to feed themselves and their dependents.** At the time of writing, there is growing if non-systematic evidence that one of the factors which triggers seeking food assistance is errors, delays or punitive sanction regimes in the administration of social security benefit practice. Such benefits are intended as social protection: that people who have contributed while in waged work should be entitled to sufficient financial (and other) assistance to survive. For those who, for various reasons, have not (yet) been able to contribute through waged work, there is protection against destitution. **It is not part of the social contract that this protection be replaced or supplemented by unaccountable, unsystematic volunteer help.**

e) Furthermore, many (both citizens and those working in charitable and advice systems) are increasingly uncomfortable, not to say quite angry, that those who are poor being offered, or required to consume that which is regarded as ‘waste’ in the food system (whatever the realities of food surplus/that destined for landfill or anaerobic digestion – and this is a complex issue – the terminology is negative).

f) Institutionalization of charitable responses contributes to fundamental issues being sidelined and depoliticized, with solutions located in ‘proper use of resources’ at local levels. This enables both the state to retreat from responsibilities and food businesses to gain from improving corporate social responsibility (CSR) and reduced landfill taxes. There is no real gain to those who are bearing the brunt of economic austerity in the UK today.

g) There are potentially serious issues regarding accountability, transparency and regulation. Registered charities have an element of accountability to the Charity Commission. Not all emergency food providers or those running local food initiatives are registered charities<sup>6</sup>, and issues of local and wider accountability are seldom mentioned in literature or websites on activities or for raising resources. Those who work as volunteers in franchised operations, for instance in The Trussell Trust Foodbank Network, or Citizens Advice Bureaux, undergo training and are accountable at local levels. Those who volunteer in food banks and other food initiatives may or may not be trained, may or may not have Child Protection cover, local level indemnity or other systems of monitoring and accountability. People who work in community cafes, soup runs and drop-in centres usually have elementary health and hygiene training and certification. Some faith groups have particular views on social practices (for instance, they may disapprove of particular forms of living arrangements, sexualities, personal characteristics or behaviours); it is not clear whether rules which reflect these views are applied – transparently or otherwise – in food provision initiatives. Any move to institutionalise such initiatives within the welfare state would require considerable attention to all these matters.

f) **An important part of social welfare in relation to food is the provision of goods in kind: school meals and means tested Healthy Start vouchers.** The latter, administered through the health sector, is a modest transfer of resources to low income household; recent evaluations have shown wide acceptance and small positive effects<sup>xvi</sup>. School meals, when prepared to appropriate nutritional standards, contribute to children’s intellectual and emotional capacities as well as their physical growth within healthy limits. Their impact is often marked on children from low income households, particularly when they are free. Indeed, many parents on low incomes find school holidays especially difficult, when they have not only to provide midday or early morning food which in term-time is provided at school, but also the fuel to cook it where necessary. There is considerable evidence that universal free school meals raise all children’s health and intellectual achievements, reduce stigma and bullying, improve attendance and are cost-effective<sup>xvii</sup>. Free school fruit to infants and juniors, while widely appreciated, has had less significant lasting effects<sup>xviii</sup>. Other school food provision (breakfast, after-hours) has also been widely appreciated and effective.

## 8) **To examine the effectiveness and sustainability of our food model in providing universal access to healthy, affordable food in this country;**

a) This is a critical and important topic which opens up both a large literature and complex issues. Many of these are well set out in reports and papers – one example is the 2<sup>nd</sup> Report of the Council of Food Policy Advisors to Defra<sup>xix</sup>. Another is the relatively recent report from the cross sectoral Inquiry into Food and Fairness by the Food Ethics Council<sup>xx</sup>.

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<sup>6</sup> I am not arguing that they should be, merely noting the fact.

b) In our report to Defra we note that the wider literature review and expert workshop questioned the role of ‘surplus food redistribution’ as a key source of food for food aid initiatives (as opposed to corporate or individual/community donations), particularly in intertwining corporate interests with help for those in need, where this contributed to entrenching charity based provision<sup>xxi</sup>.

c) Notwithstanding our contemporary food system being able to feed more people, better and more cheaply throughout the world than ever before, there are serious problems of economic, social and environmental sustainability which are widely documented<sup>xxii</sup> both for global response and for the UK. What is also increasingly challenged is the dominance of foods which do not contribute to a healthy diet within promotional offers (heavy advertising and discounting) and widespread availability. Space precludes much discussion here but there has been considerable work on the difficulties for those living in areas of multiple deprivation in accessing healthy food<sup>xxiii</sup>. One outcome of local planning and retail strategies over the last two decades has been that poorer households can increasingly only afford a diet which is nutritionally weak. One outcome of the food industries’ promotional activities has been to normalise deeply unhealthy dietary practices across society and particularly among lower social classes. That is not to say that all those who are poor choose to eat badly – not at all, as the lone-parent study above and many others have shown<sup>xxiv</sup>. Nevertheless, for those with little status in society and little money for food or time to shop and prepare, resisting such trends is very difficult.

## 9) To consider approaches to improving household food security in this country;

a) Defra has responsibility for UK food security, and household level problematics have to some extent been considered in their research and reporting, although much more could be done<sup>xxv</sup>. These issues were also addressed in our Report on usage of emergency food aid to Defra. The Food Standards Agency in Northern Ireland retains responsibility for food poverty, and recently commissioned a rapid review to consider definitions and responses<sup>7</sup>.

b) **Academics, policy activists and others consistently call for more ‘upstream’ focus in policy to support household level food security: the need to generate sustainable livelihoods, and for state recognition of the income required for meeting minimum needs and in monitoring how food costs can be met.** By contrast, focus on more ‘downstream’ issues should be reduced; while there is a place for reskilling households, and for promoting individual behavioural change and responsibility, these do not deal with the causes of food poverty or for demands for emergency help, and addressing them, while useful for some, will not solve the urgent food problems of our time.

c) Some of the key issues, such as levels and entitlement to social security protection; National Minimum Wage levels; standards for school meals, are currently matters of UK-wide policy and regulation, although consideration of, for instance, the principles under which a welfare system should operate in an independent Scotland have recently been published (the report is not concerned with ‘food aid’ but the principles discussed could inform the Inquiry’s thinking)<sup>xxvi</sup>. Similarly, the Children’s Food Trust has useful commentary on current exemptions from school meals standards. More important is the potential in provision of universal free school meals (which, as mentioned above, eliminate stigma, avoid targeting inefficiencies and benefit all children). Systematic resourcing of more ‘hybrid’ local food initiatives which draw on public sector & civil society partnerships, would in fact help the majority of households, many of whom are deeply under-capitalized to withstand economic shocks or continually squeezed budgets.

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<sup>7</sup> this work has had to be postponed until November 2014; it is unlikely to report in time to inform the Inquiry’s work.

- d) There is also potential for food poverty and household food insecurity to be investigated and understood in a more disaggregated form, which would lend itself to some devolved responses, both at national and regional/local authority levels. Several cities/local authorities are already beginning to pull together such data as they have on food poverty and are considering responses, not least through local level food partnership action groups/sustainable city networks<sup>xxvii</sup>.
- e) What is less sustainable perhaps is the current trend for local councils to have diverted the recently devolved emergency loan monies to local food banks. This may have temporarily helped local level emergency food provision, but it is also likely to have deprived some locally who were in desperate need of money to which they might previously have been entitled. While all need to eat daily, some also need urgently to pay demanding debtors or meet other expenditures; the general lack of sufficient money for household survival (in the social as well as physiological sense) is what has driven emergency provision demand, and the loss of emergency loans has exacerbated very difficult circumstances which some households face<sup>xxviii</sup>.
- f) If a national level in kind-support to low income households were to be considered, there is much to learn from the Special Supplemental Nutrition Program for Women Infants Children (WIC) in the US <sup>xxix</sup>, although it is not without its challenges<sup>xxx</sup>.
- g) Finally, the UK is a signatory to the UN Convention on Economic, Social and Cultural Rights, which includes the right to food; this places on the state the obligation to respect, protect and fulfil all people's access to sufficient appropriate food for a healthy life. Recent work exploring the implications of such a commitment for the UK include the recommendation that an institution (or individual) be charged with responsibility for overseeing and coordinating realising the right to food; the development of a national strategy to ensure food and nutrition security for all, with indicators and benchmarks to assess progress in realising it; and that a food poverty focus be built into national poverty reduction strategies<sup>xxxi</sup>

<sup>i</sup> CEBR (2013) *Hard to Swallow: the facts about food poverty*, London: Centre for Economics & Business Research for Kelloggs & Trussell Trust.

<sup>ii</sup> Dowler E., Turner S. with Dobson B. (2001) *Poverty bites: food, health and poor families*. London: CPAG.

<sup>iii</sup> [http://www.lboro.ac.uk/media/wwwlboroacuk/content/crsp/downloads/MIS\\_thefoodbudgetstandard\\_workingpaper.pdf](http://www.lboro.ac.uk/media/wwwlboroacuk/content/crsp/downloads/MIS_thefoodbudgetstandard_workingpaper.pdf)

<sup>iv</sup> e.g. work by Church Action on Poverty Cooper, N. and Dumpleton, S. (2013) *Walking the breadline: the scandal of food poverty in 21<sup>st</sup> century Britain* (Manchester: Church Action on Poverty/Oxford: Oxfam). <http://www.church-poverty.org.uk/foodfuelfinance/walkingthebreadline>

<sup>v</sup> <http://www.poverty.ac.uk/>

<sup>vi</sup> <http://www.lboro.ac.uk/research/crsp/mis/reports/>

<sup>vii</sup> Griffith, R., O'Connell, M. and Smith, K. (2013) *Food expenditure and nutritional quality over the Great Recession*. London: Institute of Fiscal Studies; CEBR (2013) *op cit*.

<sup>viii</sup> Hossain, N et al. (2011) The impact of the global economic downturn on communities and poverty in the UK, *Findings* (York: Joseph Rowntree Foundation). <http://www.jrf.org.uk/publications/impact-global-economic-downturn-communities-and-poverty-uk>; Goode, J. (2012) "Feeding the Family when the Wolf's at the Door: The Impact of Over-Indebtedness on Contemporary Foodways in Low-Income Families in the UK." *Food and Foodways: Explorations in the History and Culture of Human Nourishment*, 20, 1, 8-30; Dowler, E. et al. (2011) "Thinking about "food security": engaging with UK consumers' *Critical Public Health*, 21, 403-416; Kneafsey, M., et al. (2012) 'Consumers and food security: Uncertain or empowered?' *Journal of Rural Studies*, 28, 1-12.

<sup>ix</sup> Dowler, E. (1997) Budgeting for food on a low income: the case of lone parents. *Food Policy* 22, 5, 405-417.

<sup>x</sup> DWP Equality Impact Assessment, 2011; Hirsch, D. (2013) *A minimum income standard for the UK in 2013* (York: Joseph Rowntree Foundation). <http://www.jrf.org.uk/publications/MIS-2013>

<sup>xi</sup> Lambie-Mumford, H., Crossley, D. Jensen, E. Verbeke, M. Dowler, E. (2014) *Household food security: A review of Food Aid*. Report to Defra <https://www.gov.uk/government/publications/food-aid-research-report>; Dowler, E. & Lambie-Mumford, H. (2014) *Food Aid: Living with Food Insecurity*, Working Papers of the Communities & Culture Network+ Vol.3, ISSN: 2052-7268, <http://www.communitiesandculture.org/files/2013/01/Living-with-Food-Insecurity-CCN-Report.pdf>

<sup>xii</sup> McGlone, P., Dobson, B., Dowler, E. & Nelson, M. (1999) *Food projects and how they work*. York: York Publishing for the Joseph Rowntree Foundation; Dowler, E. and Evans, N. (1999) Food, health and eating among single homeless and marginalized people in London, *Journal of Human Nutrition and Dietetics*, 12, 3, 179-199;

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- <sup>xv</sup> <http://www.makinglocalfoodwork.co.uk/>; <http://www.localfoodgrants.org/>; <http://www.foodforlife.org.uk/>
- <sup>xvi</sup> PJ Lucas, et al. (2013) *Healthy Start Vouchers Study: The Views and Experiences of Parents, Professionals and Small Retailers in England*, Final Report: University of Bristol and Institute of Education, London; A McFadden et al. (2014) *Can food vouchers improve nutrition and reduce health inequalities in low-income mothers and young children: a multi-method evaluation of the experiences of beneficiaries and practitioners of the Healthy Start programme in England*, University of Dundee.
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- <sup>xix</sup> CFPA (2010) *Food: a recipe for a healthy, sustainable and successful future: Second Report from the Council of Food Policy Advisors*. London: Defra <http://archive.defra.gov.uk/foodfarm/food/policy/council/reports.htm>
- <sup>xx</sup> FEC (2010) *Food justice: the report of the Food and Fairness Inquiry* (Brighton: Food Ethics Council) <http://www.foodethicscouncil.org/node/465>
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