

Response to Call for Evidence in regard to the APPG *Cash or food? Exploring effective responses to destitution*

Submitted by Samantha Watts, Chair

WinchesterFoodPartnership@gmail.com

The Winchester Food Partnership is a cross-sector partnership with a mission to create a healthy and sustainable food culture for people living and working in the Winchester District. Within the wider partnership we have an Access to Good Food (AtGF) Network, with members from 15 organisations who either directly support people facing food insecurity via community food projects or people who work with vulnerable families who need to access food projects including Local Children Partnerships and Local Authority officers.

In 2020 we conducted a study (led by an academic researcher) into community-led food projects, asking what people liked and disliked about existing projects in order to provide an evidence base for local future work; focusing on improving health and wellbeing, policy developments, prioritising resources and helping the AtGF network provide sustainable and adaptable solutions. The study had 70 participants, across 10 focus groups; covering the Winchester District with both city and rural locations, single sex groups and mixed groups, with an age range of 20-95, with people who were (or had) experienced a range of economic and social issues in accessing "good food". It is the feedback gained during this study, together with member's experiences of managing a food banks and community pantry; prior, during and after the pandemic which will inform the answers below.

We will happily provide additional evidence.

Effective Crisis Support

There is a huge difference in the needs of individuals who are in emergency, crisis need of assistance, and those facing longer term food insecurity issues. However, that said our study highlighted 4 key needs for both groups of people; **awareness** of the services available, understanding how, and who to **ask** for help, easy **access** and good **availability**.

Because there is a range of reasons why people find themselves needing crisis support (illness, domestic violence, house fire/flood etc) where people might have never needed assistance and are not in council or Housing association accommodation where there is a support system that can be accessed, our study identified that **awareness**, in terms of what support/projects were available, and who could use them and how to access them was key. People in crisis often didn't know who to ask for help, and were embarrassed of having to ask, feeling judged and were reluctant to use services available, or waited until complete crisis stage. Once people had identified a food project that could support them **access and availability** were issues; opening times, locations, personal barriers were all problems highlighted in people being able and the disparity of available support/projects across the District was problematic. For those living in more rural areas, often a mix of affluent and social housing, or those in private housing, there was a huge stigma about accessing services; people often travelling to another area to access the food bank, rather than the one nearest to them

People in general liked food projects that were in a familiar community setting, where they felt the people helping them (i.e the volunteers running the services) could empathise and understood their circumstances, and most importantly didn't judge. One issue is accessing services, linked to feeling comfortable, is who else is using the service – locally a food bank has ensured that during the summer holidays, families can collect the parcels in lieu of FSM at a time separate to when the standard opening hours, to ensure families are not intimidated by individually who are suffering with addiction issues who are using the food bank.

Community food projects such as Pantries and Larders, where there is a financial contribution were favoured by our study participants who weren't in immediate crisis.

All community food projects need to offer a choice of foods to cover differing dietary requirements, and taking into account the range of storage and cooking facilities of those in temporary or shared accommodation. Physical or practical barriers of accessing food projects need to be considered; opening hours, and delivery options for those with disabilities should be considered.

The role of food banks

Food Banks, or other non-contributory services, offer an immediate support for those without access to money e.g NRPF, those fleeing domestic violence, or leaving a coercive relationship.

Many traditional food bank parcels are based on tinned/dried items which whilst are easily stored and have a long shelf life, are often less valued than fresh, chilled or frozen foods, and require a "referral" to access the service. Food banks that offer pre-packaged parcels offer no choice for individuals, lessening their dignity and may not cater to dietary requirements. However, there is a network of food banks in Winchester that are offering people the options to self-select the food and offer a greater variety of choice including chilled, fresh food alongside the staples; and cleaning/toiletry products too, and offer a self-referral option to remove the stigma of having to ask someone for a referral.

Effective food projects that cater for those in emergency/crisis need, must be easily and quickly accessible, practical and independent of the "authorities", and if possible, offer some form of anonymity if supporting victims of domestic violence, refugees etc . They should also offer choice and be non-judgemental.

The effectiveness of alternatives to providing emergency food

Those not in emergency/crisis need of support, but whom are in need of assistance must be given alternatives to Food Banks in order to promote dignity and self-reliance, and signposting to support services. Food Banks are predominately run on donations, and therefore when seeking funding/donations it is clear who the target audience is trying to provide assistance for. Pantries/community larders can be more difficult to attract donations as the criteria for use is less rigid and is intended for longer term support. Experience in Winchester where the LA provided the funding for community pantries, shown that once running they were not financially viable from the membership fees alone, especially now with the increase of food costs and the unpredictability of the surplus and donated food.

The practical running costs of running community pantries, and the resources required to manage the collections and redistribution of surplus food is often underestimated by funders; and often the funding available for the co-ordination of the project is not available. Community food projects that are based on the redistribution of surplus food, rather than donations, face an equally wide range of issues; the standard, quantity and variety of the food on offer is unpredictable and can lead to food waste issues if enough storage is not available. Surplus food is also often highly processed, and is often not suitable for those with dietary requirements such as diabetes.

Location is the biggest issue for running community food projects – a space large enough to offer decent choice, without having to keep moving food from one room to another is expensive, especially in HCOL areas such as Winchester. The space needs to be suitable for the day-to-day operations, without risking the H&S of the staff and volunteers who have to move the food around, so single-level floor is vital . There is also the

issue of visibility of people using the service; whilst it needs to be easy to find and access, it needs to keep a certain level of anonymity and dignity.

Cash-based support during the pandemic, in whole was successful and preferred, however there were limitations and issues that were not easily overcome. Cash based support often require a bank account for the funds to be paid into, or shopping vouchers that are for specific stores. Cash based support that require a bank account assume easy access to a bank account; which can preclude migrant families, families fleeing domestic violence, those in a coercive relationship or those who's bank accounts have been frozen due to high debt. Also those who are unable to access their bank account, but do not use mobile/online banking, or those who are digitally excluded or with low literacy skills often struggle.

Likewise, many shopping vouchers sent to families during the pandemic were sent electronically, and either needed a home printer, or at least access to a digital device. If access to the digital voucher wasn't possible, eg forgotten email log-in/password, there was limited assistance. The shopping vouchers are also limited in terms of where they can be used; certain ethnic groups might prefer to use local shops, rather than the chain supermarkets, where the vouchers could not be used. Where shopping vouchers are suitable, the limitations of what they can be used on can be difficult; do you provide a standard shopping voucher that can be used to purchase anything, or do you try to limit it to only certain items that may identify to the shop that this is a family who is on low income – similar to the reluctance of some families to use Healthy Start Vouchers, if they live in a relatively affluent area. Improvements to the FSM and Healthy Start Vouchers; eligibility, access and awareness would be a quick-win to helping families on low income.

Social supermarkets were the most preferred type of community food project (above an increase in benefit funding), especially for those working, but low income families; where people could choose the food they wanted, only pay for what they needed, not be based on highly processed foods and have the chance to create a community feel but supporting local producers; families on low income are not immune to wanting to reduce their plastic and carbon footprint, and also wanted healthy foods. It was seen as an alternative to retail, and not charity. However, the issue of running costs is the biggest reason why they are difficult to set-up, and issues of access for housebound/disabled people, or those without transport would still require a consideration for a delivery service. A mobile van was suggested; to offer the services in a more rural area, where the demand could not justify a fixed project.

Learning from best practice and new ideas

Our study found there is no single answer; however for those not in emergency need, they wanted not to feel like they were accepting a hand-out from a charity; they wanted to contribute. For those in genuine crisis, easy access to a practical solution is imperative, with follow-up wrap around support.

Whilst projects that had community growing spaces, cooking classes etc would not solve food insecurity issues, they do generate a community spirit and greater dignity.

Our AtGF network is trying to combine the Pantry and Food Bank models; allowing those who can contribute to do so, and self-select the food they want at a discounted price, but those who are in emergency need a way to access the same service but for free. The "free" access would be limited in number, and/or require a referral from a support agency (akin to traditional Food Banks) but for everyone else it would be a pay-as-you-go membership, with a loose criterion for access.