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Working in Partnership with the Charitable Food Sector to Better Meet the Food Needs of People in Perth

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The Western Australian community faces increasing numbers of people vulnerable to food insecurity due to their economic or social circumstance. This is partly due to geographic isolation and the cost of food, as well as the demise of the mining boom and a stalled economy. For example, food costs more in remote areas, 26 per cent more for a healthy food basket than in the Perth metropolitan area. Welfare dependent families in WA would need to spend 44 per cent of their disposable income to purchase a healthy diet compared to only 14 per cent average income earners.¹ This simply does not happen, as food is the one area families can sacrifice to pay for other expenditures.

As a result of these factors and combined with cost of living pressures, many more West Australians are suffering food poverty and turning to charitable food relief to feed themselves and their families.

People at increased risk of food insecurity include those living alone, single parents, Aboriginal and/or Torres Strait Islander people, homeless people, migrants and refugees. Food insecurity is occurring in middle income Australia as the cost of living bites deeper.

The charitable food sector (CFS) is a key part of the emergency relief response comprising of direct service providers (who provide food directly to people), food banking stakeholders (including donor or food rescue operations who re-distribute food), and other agencies including advocacy groups. Food relief is offered by faith-based organisations, social service agencies, drop-in centres, community development programs, and health centres. In 2013, Foodbank Australia estimated that 60,000 people could not be assisted each month, and these findings rang true for Western Australia.²

The urgent need to understand current and future capacity and ensure appropriate services was expressed at meetings with emergency relief organisations in November 2014. Furthermore, CFS stakeholders raised questions about their capacity to meet the food and nutrition needs of their recipients. As well, the number of people who were homeless was increasing in inner-city Perth. The 2014 Vulnerability Index for homeless Perth people found 25 per cent had diabetes, 40 per cent asthma and 60 per cent had dental health problems with health care costs escalating.³

Follow up discussions with Food Bank, West Australian Council of Social Service, Anglicare, and the Salvation Army highlighted a range of issues in Perth. Specifically, the complexities and increasing demand for services in an environment of reducing resources; the potential for competitiveness among agencies;



changing government policies; and the lack of information regarding recipients' dietary needs. There is a lack of information about the relationship between and coordination of direct services, client awareness of services and the adequacy and appropriateness of the services offered.

Healthway funded Curtin University in collaboration with Flinders and Deakin Universities to define the scope and nature of CFS activities required to enable recipients to achieve adequate nutrition. Research comprised of inventory audits of the types and adequacy of food provided, assessing recipients' dietary intake and perceptions of the appropriateness of food provided, as well as assessing direct services from an organisational and provider assessment of effectiveness. The target groups are: inner city Perth CFS stakeholders; direct service providers; and recipients. To the author's knowledge this is the first time a systematic mapping and thorough investigation of the charitable food sector has been undertaken in an Australian capital city.

Research is to be conducted in three consecutive parts:

1. A comprehensive mapping exercise describing the players, relationships and key functions of the inner-city Perth CFS.
2. An assessment of direct services' perspectives on the appropriateness and effectiveness of their services.
3. An assessment of the direct service recipients' perspectives on the appropriateness and effectiveness of services and their dietary intake and food sources.

The research findings will be used to develop effective approaches to feeding those people who are going without food in Western Australia. The study results are expected to be released around December 2016.

Preliminary findings are consistent with the initial concerns that the CFS is operating in an environment that is not conducive to being able to adequately meet the current and future food and nutrition needs of



those needing food assistance. In inner-city Perth alone, almost 6,000 instances of food aid are provided each week, and this is likely to be an underestimate because it is difficult to capture providers not associated with the 17, largely faith based or philanthropic agencies. Increasing demand, reliance on volunteers, inconsistent donations, and unreliable or reducing funding are some of the ongoing challenges for services. Currently the data are being analysed, but already the work has yielded valuable insights for the design of a multi-pronged

intervention in the next stage. All involved are eagerly awaiting the findings and the opportunity to use them to look for ways to improve the situation.

Endnotes

1. Pollard CM, Savage, V, Landrigan T, Hanbury A, and Kerr D 2015, *Food Access and Cost Survey*, Department of Health, Perth, Western Australia.
2. Foodbank Australia 2013, *End Hunger in Australia, End Hunger Report 2013*. Foodbank New South Wales.
3. Lette H, Fernihough R, Mulley 2014, Perth Registry Week 2014 *Less Homeless, RUAH Research and Evaluation*.