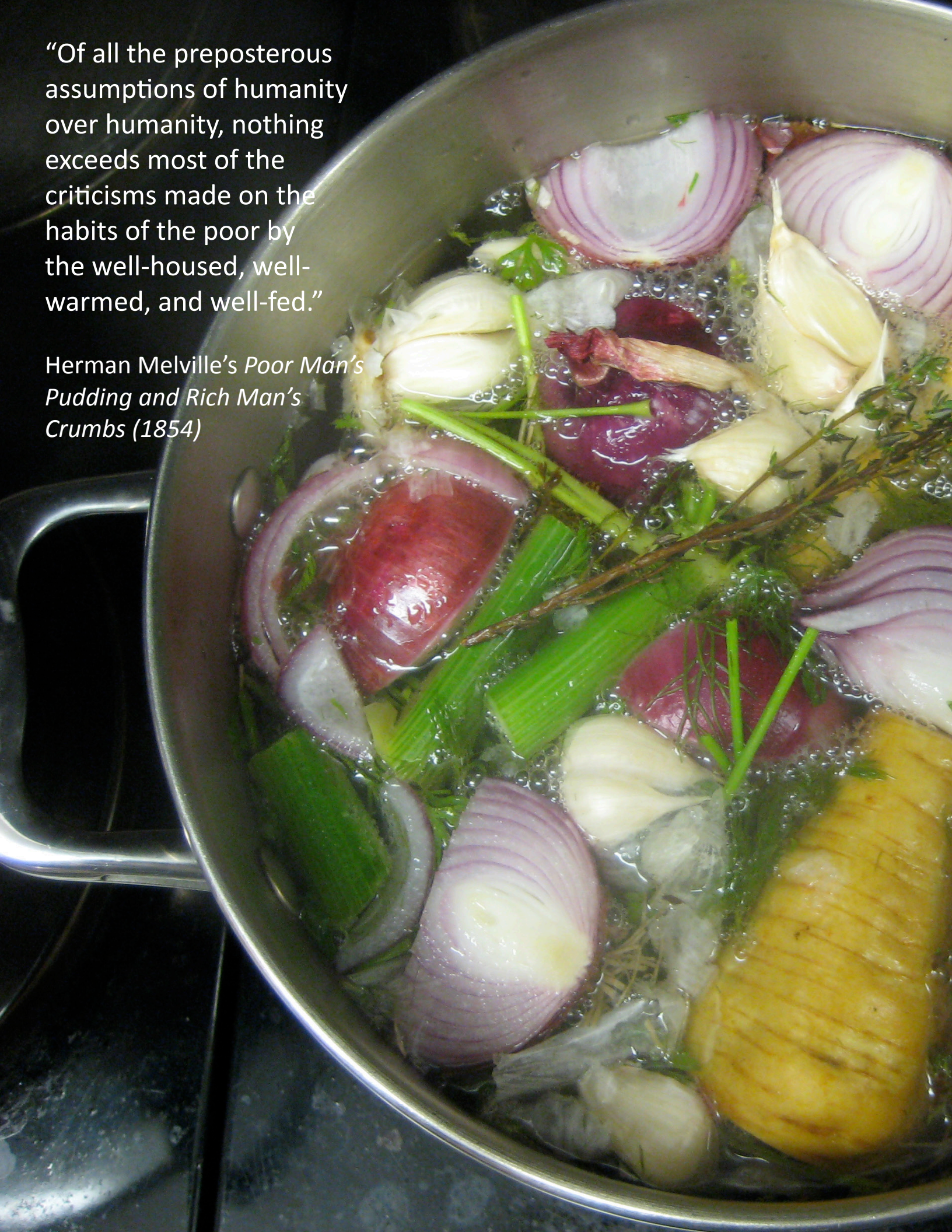# Who gets sustenance?

Community Voices Speak about Access to Local, Healthy Food

"Of all the preposterous assumptions of humanity over humanity, nothing exceeds most of the criticisms made on the habits of the poor by the well-housed, well-warmed, and well-fed."

Herman Melville's *Poor Man's Pudding and Rich Man's Crumbs (1854)*

Acknowledgements

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Contents

1. Executive Summary

Community-based initiatives relating to food security have swept across British Columbia communities in the last decade, but certain groups, which we call underserved populations, continue to face systemic barriers to accessing local healthy food. With funding from the Vancouver Foundation, SPARC BC, Grandview Woodland Food Connection and the Bella Coola Valley Sustainable Agricultural Society worked together to address this issue by asking the following question: How can the positive advances by BC's food security movement better support increased access to local healthy food for underserved populations?

One of the most important directives for the research was gaps in our knowledge about what underserved people have to say about their relationships with food and food programs. Consequently, underserved people were central actors in the research in two communities, Bella Coola (a rural community located on BC's Central Coast) and Grandview Woodland (a neighbourhood located in the City of Vancouver). The research included a literature review, five focus groups, a survey of 169 individuals, as well as nine key stakeholder interviews.

For the purpose of this research, we have understood the term "food programs" to include the full spectrum of formal food initiatives, including emergency food provision, food banks, community kitchens and gardens, coupon programs, gleaning projects and food skills programs. In addition, our definition of underserved people not experiencing dignified access to local healthy food, includes individuals living on a low income and identifying with any one or combination of the following characteristics: Aboriginal, immigrant, lone parent, disability, under or unemployed, chronic illness, etc.

Findings and opportunities for action

1. Lack of income is the main barrier to accessing healthy food.

Having enough money to afford good food was not a reality for the majority of participants. While lack of money is a constant theme among the underserved, additional barriers that prevent access to healthy food include: time, mobility, lack of good food locally, lack of knowledge of where to buy local, healthy food or of food programs. While we advocate for governments to ensure underserved people have an adequate level of income, there are other ways to support dignified access to good food.

Opportunities for Action

a. Increase income assistance rates so recipients are not forced into forfeiting their right to food.

b. Provide better time options especially for single parents and caregivers with children to participate in community food programs.

c. Address disability and mobility challenges by creating programs that either get food to where people are or help people get to food stores and programs.

d. Develop innovative programming specifically targeting individuals with severe and chronic health issues.

e. Ensure that provincial funding programs that address food security issues incorporate the unique needs and circumstances of rural communities.

2. There is less reliance on food programs in Bella Coola in part because of issues that are unique to rural communities.

Some clear differences emerged from our two study sites. There was less reliance on food programming in Bella Coola. Underserved people were more reliant on local wild food sources and the community sources (feasts, luncheons, family sharing) to provide food. This may be a feature of service delivery constraints in a small community, the distances people have to travel, and the limited number of people available to volunteer in food programs, rather than a lack of need. Because of their greater concentration of population, urban centers tend to have more services. In addition, resources to address food security issues are often not available to rural and/or remote communities.

Opportunities for Action

   a. Ensure that funding programs focused on food security adequately address issues unique to rural communities.

   b. Recognize that many funding sources and much of the community capacity available in urban centres is not existent in smaller communities. Invest in resourced leadership for food security programs and community development initiatives as a whole for rural and remote communities.

   c. Support the development of strategies to encourage the dissemination of traditional Indigenous knowledge and practices around food.

3. Underserved people do not want handouts. They want to co-create ways to support themselves individually and in the communities in which they live.

Our research results suggest that the emphasis should be on individual and community development, rather than exclusively on the provision of emergency handouts. Development of a food culture based on networking, mutual support, information sharing and ongoing education about food can help food programmers to move from being providers of food to facilitators of people working together to gain dignified access to good food themselves. This approach may ultimately increase dignity by improving the choices underserved people have and by supporting the development of social networks.

Opportunities for Action

   a. Improve networking and connecting events for underserved peoples so they can support each other in accessing good quality local food.

   b. Focus less on food as a product and more on food culture, the ways in which people build community through food with programs like community kitchens or potlucks.

   c. Support cultural competency and cultural food literacy training that builds service agency understanding of culturally appropriate food programming.

4. We do not know enough about underserved people who are not accessing food programs and why they are not accessing these programs. Further research is needed.

Our study mainly engaged people who already, to some degree, access food programs. Questions still remain for those who do not access food programs. Additional, research is required to strengthen the discourse about what works best for unengaged population groups.

Opportunities for Action

   a. Develop ongoing and regular ways to gather feedback, including listening and learning from people who could benefit from food programs but do not.

   b. Develop participatory strategies to evaluate and strengthen alternative models that support dignified access to food, with a view to improving access for those who face barriers to existing services and programs.

5. While food banks are important sources of food, underserved people utilize a variety of strategies to access healthy food using community and traditional sources.

Currently about 1.7 million Canadians access food banks (Food Bank Canada, 2013). While most discussion about food security focuses on food banks, a number of alternative programs and models have developed over the years. The Vancouver Food Bank is currently in the process of piloting a new approach to food security which may offer a future model for emergency food service providers. It is also noted that the concept of a "food bank" may need to be very different in rural locations than in urban centres.

Opportunities for Action

a. Inform underserved people about where good food is available through better advertising of food programs and sharing of affordable food locations.

b. Improve networking and information sharing amongst service providers and food security agencies.

c. Create accessible knowledge on how to prepare food in ways that can make the most of available healthy food.

d. Support programs that make the most of wholesale or discounted fresh produce and proteins.

e. Advocate for a wider range of food retail providing affordable foods for individuals on low income (i.e. pocket markets, mobile and community food markets).

f. Improve access to food growing space including backyards and community gardens for low-income residents along with supports in how to grow food.

2. Introduction

When it comes to dignified access to local and healthy food for underserved people, there are some things we know quite a lot about and others where there are gaps in our knowledge. The biggest gap is what underserved people themselves think about food insecurity and how to overcome it, and how this knowledge can be used to support development of good food policy and programs. A second gap is a lack of knowledge about which underserved people are not accessing services like food banks or community kitchens, and why.

2.1 Research questions and objectives

Community-based food security initiatives have swept across BC in the last decade, leading to greater understanding of our food system, including a focus on sustainable agriculture, farmers' markets, urban farming, community gardens and food recovery programs. These programs have evolved in a climate of service cuts, migration of rural populations to urban centres, food safety scares, the decline in traditional food resources and an increased understanding of the tenuousness of a food system that relies on global trade. Growing up from communities, food programs are mostly the product of community members with the capacity and privilege to advise, plan and deliver them. But not everyone has access to local, healthy food despite the positive grass roots work that is underway. Certain groups, which we call in this report underserved populations – defined in Section 2.2 – face systemic barriers to accessing healthy food.

Within this context, the research team led several data collection activities that addressed the following question:

- How can the positive advances by BC's food security movement better support increased access to local, healthy food by underserved people?

In addressing this research question, the research team sought to fulfill four objectives:

- To develop a better understanding of the structural barriers to dignified access to healthy food by underserved populations.

- To determine the means by which some of these barriers and contextual challenges can be handled.

- To understand and build on coping and livelihood strategies related to food security currently employed by underserved populations.

- To identify the means by which underserved populations can more fully participate in community-based food security programming.

This report is organized as follows: Section 2 provides the overall context, drawing on the literature review completed to guide the research. Section 3 sets out the research methodology. Sections 4 and 5 highlight findings from the community survey. Section 6 sets out findings from the focus groups. Section 7 brings together the research data and draws conclusions. Appendix 1 is the full literature review and the remaining appendices include the research tools used in this project.
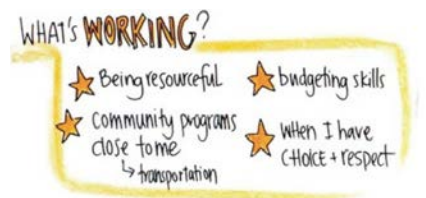
2.2 Definitions and context

What is dignified access to food?

There does not appear to be an agreed definition of dignified access to food. However, the UN Special Rapporteur defines the right to food as the right "to have regular, permanent and unrestricted access, either directly or by means of financial purchases, to quantitatively and qualitatively adequate and sufficient food corresponding to the cultural traditions of the people to which the consumer belongs, and which ensure a physical and mental, individual and collective, fulfilling and dignified life free of fear."

http://www.ohchr.org/EN/issues/food/Pages/FoodIndex.aspx

There is general agreement about which Canadian people are not experiencing dignified access to local healthy food, including individuals living on a low income and identifying with any one or combination of the following characteristics: Aboriginal, immigrant, lone parent, disability, under or unemployed, chronic illness, etc.

A gap in the literature on access to food by underserved populations is what underserved people themselves think about food security. The Food Security in Social Housing Policy Framework report (2013, p. 9) found that "[a]lthough there have been many accounts from the frontlines of food security issues among social housing tenants, there has been very little research done in this realm in BC. The few studies that have been done have been small and most have focused on SROs [single room occupancy] in Vancouver's Downtown East Side." A recent study on food security in the Canadian north found (Expert Panel 2014, p. xiii): "the direct experience and knowledge of northern peoples are exceedingly important sources of evidence ….. Therefore, the lack of a comprehensive review of northern food security derived from the first-hand experience and knowledge of northern peoples is a major knowledge gap identified by the Panel."

What is the "charity" approach to addressing food insecurity?

Over the years there have been many criticisms of what is called the "charity" approach to end food insecurity for underserved populations, following from Poppendieck's 1998 book *Sweet Charity*. Poppendieck (1998) sums up a central critique of the emergency food system that became prevalent in North America beginning in the 1980s:

> Most significantly, and more controversially, the proliferation of charity contributes to our society's failure to grapple in meaningful ways with poverty ... this massive charitable endeavor serves to relieve pressure for more fundamental solutions ... making it easier for government to shed its responsibility for the poor, reassuring policymakers and voters alike that no one will starve …. And because food programs are logistically demanding, their maintenance absorbs the attention and energy of many of the people most concerned about the poor, distracting them from the larger issues of distributional politics. It is not an accident that poverty grows deeper as our charitable responses to it multiply (p. 5-6).

In other words, the right to food which should be the responsibility of government has been replaced by charitable gifts provided by the community and delivered by volunteers and underpaid staff. The argument made by Poppendieck (1998) and others has been that the solution to food insecurity lies not in emergency food but in advocacy work to ensure that governments meet their responsibility to provide food security for the whole population, including employment and an adequate income. Organizations working on emergency food however are too busy trying to meet immediate needs to focus on the structural causes of hunger and food insecurity.

A second set of arguments against emergency food, again following Poppendieck (1998), focus on its inadequacy and inappropriateness for recipients. Most authors make similar criticisms:

- The programs are limited and fall short of meeting the nutritional needs of users (BC Ministry of Health, 2012; Ostry, 2010; Kirkpatrick & Tarasuk, 2009; Poppendieck, 1998).

- The programs are demeaning (BC Ministry of Health, 2012; Wakefield et al, 2012; Fodor, 2010; Poppendieck, 1998).

- The quantity of food provided is limited (BC Ministry of Health, 2012; Ostry, 2010; Poppendieck, 1998).

Partly in response to criticisms of food banks, a wide range of what can be called alternative food security programming has been developed over the last 30 years, much of it community-based and attempting to ensure dignified access to food for the underserved. Examples include good food boxes, community gardens and kitchens, mobile food vending, networking and advocacy work. While reviews of these alternative programs tend to be positive, their longer-term impacts are not known. General programs such as community gardens and farmers' markets may be largely middle-income preserves. Others such as community kitchens and farmers market coupon programs are more likely to meet the needs of the underserved. Who is included and excluded in these alternative programs is not always clear. The BC Ministry of Health (2012, p. 20) review summarizes recent findings on alternative food initiatives:

> Research-validated and evaluation-based evidence show that many community food actions directed to individuals and groups increase access to and consumption of healthy and culturally acceptable food…. It is less clear from the evidence, if, or how well these initiatives reach vulnerable groups and particularly those who are experiencing household food insecurity, or address issues of food affordability.

Vancouver Food Bank pilots a new model to support the underserved

The Greater Vancouver Food Bank Society have recently completed a strategic planning exercise – the first such exercise in the organization's history – which has charted a new direction for the next five years. While the Food Bank will continue to provide assistance to help address the immediate needs of the community, it also recognizes that emergency food as a stand-alone is not a long-term solution. As a result, it is evolving beyond the traditional emergency food hand out towards an approach that also helps foster a path back to self-sufficiency, a model rooted in education, empowerment and sustainability.

To that end, the Food Bank has adopted a new vision to provide accessible, healthy and sustainable food for all and a new mission to empower people to nourish themselves by providing access to healthy food, education and training.

The Food Bank has dramatically increased its linkages with local farmers to support their communities while maximizing the level of nutrition it is able to provide. A pilot food hub program has taken place in North Vancouver, where opening times for the Food Bank are set for different groups—alleviating the need to line up in an undignified fashion—and selling subsidized locally grown fresh food. In this pilot social services are also provided or on offer through Food Bank partner service providers.

https://www.foodbank.bc.ca/blog/a-new-day-for-the-greater-vancouver-food-bank-society

3. Methodology

In our research, underserved people were central actors in the project. We thought this both an ethical imperative and an effective way of finding workable solutions to the challenges underserved people face in gaining dignified access to healthy food.

A remote rural area, Bella Coola, and a low-income urban neighbourhood, Grandview Woodland, were selected as the research sites to allow comparison of resilience strategies of underserved people in two contrasting locations. These sites were selected in part because both share a larger than average population of Aboriginal peoples and both sites had the capacity and community links to carry out this challenging research work. The research methodology was subject to ethical review and received an ethics certificate from the Community Research Ethics Board.[1]

The research method consisted of four parts, which are described below.

3.1. Literature review

Academic journals and websites were searched for relevant literature. A review carried out by the BC Ministry of Health (2012) usefully summarized some of the relevant literature related to food security programming. The PROOF website[2] includes useful summaries of debates and extensive references. The literature reviewed was not comprehensive but was considered adequate for understanding current thinking about underserved populations and food security, including how to develop an appropriate research methodology.

3.2. Focus groups

Three focus groups were held in Bella Coola with a total of 18 people, 16 of whom identified as Aboriginal and 14 of whom were female. Two focus groups were held in Grandview Woodland with a total of 23 people, 21 of whom were female and eight of whom identified as Aboriginal. Focus group participants were selected through networks and by sending out requests to local service providers. The questionnaire used in these focus groups is provided as Appendix 2. The focus groups concentrated on three questions:

- What is happening now in your community with regards to accessing healthy food?

- How could things be different?

- How do we get there?

After initial research results were analyzed, follow-up community meetings were held in both communities to gather feedback and review results of the research to date. This was an attempt to ensure that the research was participatory rather than extractive, and to ensure that participants both received details of research findings and provided input into these findings.

A graphic artist captured the findings of focus groups in visual form and these graphics have been used throughout the report to illustrate its main findings.

3.3. Community-based survey

In Bella Coola, questionnaires were administered in the community coffee shop, Nuxalk Nation Band Administration Office, Nuxalk Development Corporation office, Wuikinuxv-Kitasoo-Nuxalk Tribal Council office, Nuxalk Nation Transition House - Women's Craft Night and were distributed to the local high school and service providers.

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1 http://www.communityresearchethics.com/
2 http://nutritionalsciences.lamp.utoronto.ca/

In Grandview Woodland, questionnaires were administered door-to-door in social housing units and through service providers. In order to increase the number of respondents, community researchers went outside of the Grandview Woodland area to administer questionnaires in contiguous areas, to the Greater Vancouver Food Bank in Burnaby, and parts of East Vancouver such as Collingwood, Downtown Eastside, Hastings/Sunrise, and Strathcona. These are noted as "other communities" in the tables below, and made up 44% of the sample, as opposed to 25% for Grandview Woodland and 31% for Bella Coola. Half of questionnaire respondents were in the 35 to 54 age group, and 65% were female. Fifty-two per cent of respondents identified themselves as being part of a visible, cultural, or linguistic minority group, with 72% of these respondents self-identifying as having Aboriginal ancestry. Eighty-six per cent of respondents in Bella Coola self-identified as Aboriginal, with corresponding figures of 69% in Grandview Woodland and 16% in other communities. Thirty-six per cent of respondents reported having a disability and 91% of respondents reported living on a low income.

The questionnaires did not list all of the food programs available in Bella Coola and included many types of food programs that were not available in Bella Coola. This resulted in an under-reporting of available food programs in Bella Coola. The questionnaire can be found in Appendix 3.

3.4. Key stakeholder interviews

Nine key stakeholder interviews were conducted with programmers and specialists in food security to learn about the context in BC and successes and constraints in their work. The list of key stakeholders can be found in Appendix 4.

4. Community-based survey results

4.1 Food insecurity and food budgets

This section covers responses by the 169 people who answered the questionnaire in Appendix 3, triangulated with the findings from the focus groups where appropriate. Respondents were asked about their food security situation, as noted in Table 1.

Table 1: Access to healthy food by number and percentage of respondent*

Community	Enough to eat, but not right kinds of food	Sometimes not enough to eat	Often not enough to eat
Bella Coola	33 (67%)	10 (20%)	6 (12%)
Grandview Woodland	19 (46%)	18 (44%)	4 (10%)
Other Communities	25 (34%)	36 (49%)	14 (19%)
Total	**77 (47%)**	**64 (39%)**	**24 (15%)**

**Figures in table may not add to 100% due to rounding.*

Table 1 illustrates that nearly half of respondents could access enough to eat but the majority of respondents were either hungry for part of the time and/or unable to access the kinds of food they wanted. The focus of service providers could therefore be as much on quality and type of food as on quantity, dependent on community. Findings from the focus groups were that underserved people are very unhappy with the kinds of food they are being offered by service providers, particularly food banks. There was also considerable variation between urban and rural communities with a higher degree of hunger for the latter.

Respondents were asked about the budget they spent on food, with 130 people noting an average food budget of $123 per month per person, or about $4 a day. While underserved people have little room to maneuver on such a limited budget and are constantly faced with hard decisions about how to use that budget, they have shown an ability to develop livelihood coping strategies. Monthly food budgets per person are set out in Figure 1 indicating substantial variations among the underserved, with budgets ranging from less than $50 to over $250 per month. Data from Figure 1 and Table 1 support the typologies discussed by Tarasuck et al (2013):

- **Marginal food insecurity:** Worry about running out of food and/or limit food selection because of lack of money for food.

- **Moderate food insecurity:** Compromise in quality and/or quantity of food due to a lack of money for food.

- **Severe food insecurity:** Miss meals, reduce food intake and at the most extreme go day(s) without food.

Figure 1: Monthly food budgets per person for survey respondents
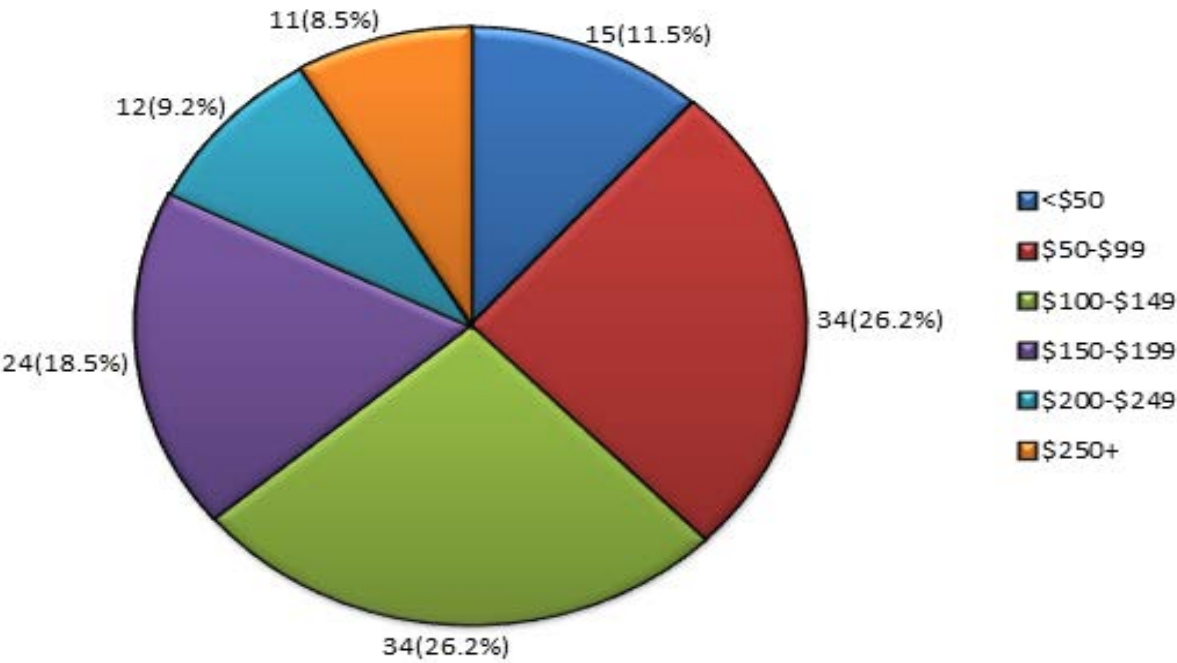
Most survey respondents had used community services or programs to access food, ranging from 62% in Bella Coola to 66% in Grandview Woodland. Services mentioned by multiple survey respondents in Bella Coola included the Community Harvest Program, the food bank, Good Food Box and Healthy Beginnings. Services mentioned by multiple respondents in Grandview Woodland included Britannia Bulk Buy, food banks, school lunch programs, Quest and the Union Gospel Mission.

4.2 Barriers to accessing healthy food

This section covers the food sources that research participants access now, including through their own strategies, and from food programs in their area as well as barriers to accessing local healthy food. Table 2 provides details of the top ten sources respondents noted. Participants were able to select more than one food source.

Table 2: Regular food sources for respondents

Food Source	Percentage of Respondents
Supermarket	64%
Food banks	54%
Friends or family	33%
Fishing	28%
Other food sources	24%
Preserves	24%
Big box	23%
Community food	22%
Your garden	17%
Hunting	16%

While food banks were an important source for about half of the respondents, most accessed food through other sources particularly supermarkets. Friends, family, community support and food programs are clearly key, as is gathering, fishing and hunting in Bella Coola.

Respondents were also asked about barriers to eating well. Table 3 presents the most common barriers to accessing healthy food faced by participants.

Table 3: Barriers to accessing healthy food

Barrier	Percentage of Respondents
Lack of money to purchase food	79%
Availability of affordable food	44%
Transportation problems, or difficulty getting to a good source of food	36%
Lack of time to get and prepare food	25%
Availability of good quality food	23%
Availability of traditional/cultural food	22%

Lack of money is a constant theme among the underserved and was the first selected choice for both rural and urban communities. This has rightly led many researchers to recommend higher levels of financial support (see the literature review in Appendix 1). However, the lack of income tells only part of the story. The survey results show there may not be affordable, good quality or culturally appropriate food in the areas where underserved people live and they may not have the time or means to access food. Mobility, lack of transportation and cultural barriers were also recurrent themes in the focus group interviews (see Section 5).

Respondents were asked how they make sure there is enough to eat for themselves and their families. Some respondents described some of the 'low cost food' items they consumed, with soups, stews, spaghetti/pasta and rice being among the most common. Some respondents provided more detailed descriptions of the ways that they made sure themselves and their families had enough to eat, including only buying food that is in season, only buying food that is on sale or those food items for which coupons can be used and feeding kids and other community members before feeding oneself. Table 4 presents participant responses. Participants were able to choose more than one strategy.

Table 4: How survey respondents make sure that there is enough to eat

Ways participants make sure they and their family have enough to eat	Number of Respondents	Percentage of Respondents
Get food from the food bank	95	56.2%
Save money for food by cutting back on other items	84	49.7%
Buy low cost food	77	45.6%
Accept food from people who care about you	73	43.2%
Borrow/accept money from people who care about you to buy food	62	36.7%
Cut size of meals or skip meals as a strategy to make food last	60	35.5%
Eat less or not at all because there is not enough food	51	30.2%
Eat what food is available, including fast food	48	28.4%
Join a food program in your community	44	26.0%
Hunt or fish	43	25.4%
Share food	43	25.4%
Gather wild food (e.g., berries, roots)	38	22.5%
Trade or barter for food	36	21.3%
Get food from a soup kitchen	25	14.8%
Grow food in a garden or on a farm	25	14.8%
Other ways	17	10.1%

Table 5 sets out the three most common ways that survey respondents made sure they have enough to eat, by community.

Table 5: Three most common ways that survey respondents make sure that they have enough to eat, by community

Community	Most Common Choice	2nd Most Common Choice	3rd Most Common Choice
Bella Coola	Hunt or fish	Gather wild food	Accept food from people who care about you
Grandview Woodland	Save money for food by cutting back on other items	Buy low cost food	Get food from the food bank
Other communities	Get food from the food bank	Save money for food by cutting back on other items	Buy low cost food

What is noteworthy is that the food bank does not feature in Bella Coola[3] and is the third most common choice in Grandview Woodland. As mentioned, respondents had other strategies for attempting to be food secure but these strategies are likely to have negative consequences, particularly in urban areas. Buying low-cost food would likely mean buying poor-quality food and might mean cutting back on necessities like heating. It was only in Bella Coola that all of the top three choices were positive.

When asked about access to food programs, respondents provided the following answers (Table 6).

Table 6: Use of food-related services by survey respondents (number of respondents (%))

Food-Related Service	Use this regularly	Use this occasionally	Heard of it, but do not use it	Never heard of it
Food bank	64 (37.9%)	32 (18.9%)	32 (18.9%)	11 (6.5%)
Bulk-buy food programs	22 (13.0%)	18 (10.7%)	29 (17.2%)	44 (26.0%)
Community kitchen	16 (9.5%)	25 (14.8%)	36 (21.3%)	37 (21.9%)
Free cooking classes	11 (6.5%)	8 (4.7%)	29 (17.2%)	51 (30.2%)
Community food gardens	6 (3.6%)	17 (10.1%)	49 (29.0%)	30 (17.8%)

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3 The Bella Coola Food Bank operates only once per month and can be easy to miss for those who have other commitments. In Grandview Woodland, food programs are available on a daily basis through a variety of service providers.

The average amount of food accessed by participants that came from food programs was 30%. The average percentage was highest for other communities (39%), followed by Grandview Woodland (31%) and Bella Coola (13%). This speaks to the differences between urban and rural settings and highlights the greater availability of food related programming in Vancouver.

When asked why they were not accessing particular services and programs, 70 (41%) survey respondents noted the following main themes:

- Not enough time.

- No transportation.

- No knowledge of where services are.

- Concerns about product quality.

4.3 Socio-demographic analysis

This section presents the survey data in terms of the diverse identity markers of respondents, including income levels, disability status and gender.

In regards to Aboriginal respondents from Bella Coola and Grandview Woodland, questionnaire responses display a pattern which reiterates differences between urban and rural food strategies The main demographic difference between the respondents from the two communities was that Aboriginal respondents from Grandview Woodland were more likely to have a disability (33%) compared to Aboriginal respondents from Bella Coola (19%). Bella Coola Aboriginal respondents were also more likely (19%) to live in households with 6 or more people compared to Grandview Woodlands Aboriginal respondents (4%), suggesting that the levels of family support or need may be greater in Bella Coola.

Bella Coola Aboriginal respondents were more likely to use the local natural resource base for obtaining food compared to Grandview Woodland respondents, such as hunting (44% to 11%), fishing (71% to 37%) and foraging (34% to 15%). Conversely, Grandview Woodlands Aboriginal respondents were more likely to regularly use different food security programs such as Bulk Buy (33%) compared to Bella Coola Aboriginal respondents (7%). Grandview Woodland Aboriginal respondents (18%) regularly use free cooking classes while no Bella Coola Aboriginal respondent used such as food security program, as both Bulk Buy and free cooking programs do not exist in Bella Coola. Another 25% of Grandview Woodland respondents regularly use pocket markets while no Bella Coola Aboriginal respondent selected this option.

In terms of gender difference, higher percentage of women often did not have enough food (17%) compared to men (11%); women used supermarkets to obtain food (70%) more often than men (55%); women accepted food from caring people (47%) more often than men (36%); and more women listed a lack of money as a food security barrier (84%) compared to men (68%).

Demographically, respondents with a disability (95%) were more likely than respondents without a disability (75%) to be low-income while those with a disability were nearly three times more likely to live in a one-person household (30% of those with a disability compared to 11% among people without disabilities).

With regards to food security issues, respondents with a disability were often more likely to not have enough food (27%) compared to people without a disability (8%); respondents with a disability were more likely to skip meals (45%) compared to respondents without a disability (30%); respondents with a disability were more likely to eat less to cope with food security challenges (38%) compared to respondents without a disability (26%); respondents with a disability were more likely to borrow money from caring people (48% disabled, 28% non-disabled respondents) and accept food from caring people to cope with food security challenges (54%) compared to respondents without a disability (36%); and respondents with a disability were more likely to use food banks regularly (50%) compared to respondents without a disability (30%).

4.4. Survey respondents not accessing food programs

Of the almost 4 million Canadians who are regularly food insecure, Tarasuk and Kirkpatrick (2009, p. 138) note about 20-35% reported receiving food charity over the previous year. There appears to be limited information on the remaining people who are food insecure, as most research on food insecurity has focused on food banks and alternative food programming.

Although our survey generated some new data on this topic, the results of our research beg more questions than provide answers. We were constrained by being unable to contact many individuals which are not accessing food services within the time frame and budget of the research. Language may be a barrier here as we hypothesize, based on key stakeholder interviews, that many of those not accessing services are new immigrants who do not have English as their first language. Nevertheless, we present below the indicative data about people who are food insecure and not accessing food programs.

To determine which survey respondents were not accessing services, we extracted those responses where respondents answered that they did not use food banks or community kitchens, and who noted that they did not occasionally or regularly use food programs. In total, 18 survey respondents (10.7% of 169 survey respondents) fell into the category of not accessing services. We realize this is a small sample, which is why we note this data is indicative only.

Of those not accessing services, 65% were in Bella Coola, 23% in Grandview Woodland, and 12% in other communities. Two thirds were women and one-third men. Seventy-seven per cent were Aboriginal. Twelve per cent had a disability, much smaller than the overall figure of 36% in the questionnaire survey.

The reasons respondents gave for not accessing food programs are as follows:

- "Babysitting grandchildren."

- "Didn't want to hitchhike."

- "Wasn't feeling well."

- "Because they do not exist in Bella Coola."

- "Food bank food is mostly out dated."

- "Never hear of when and where until after."

- "No time or availability to travel to destinations."

- "Single parent working full time."

- "There are many Nuxalk in greater need. We are both working, low income but can survive."

- "Too many non-food items/ We don't have all these services/ Food bank has too much outdated products and lots of sugary foods that are unhealthy. I don't want to feed my kids with junk foods."

- "Transportation."

- "Illness."

We cannot read too much into these preliminary findings, but there may be additional barriers which underserved people not accessing services face.

This is an area which requires additional research to establish which underserved groups are not accessing food programs and why.
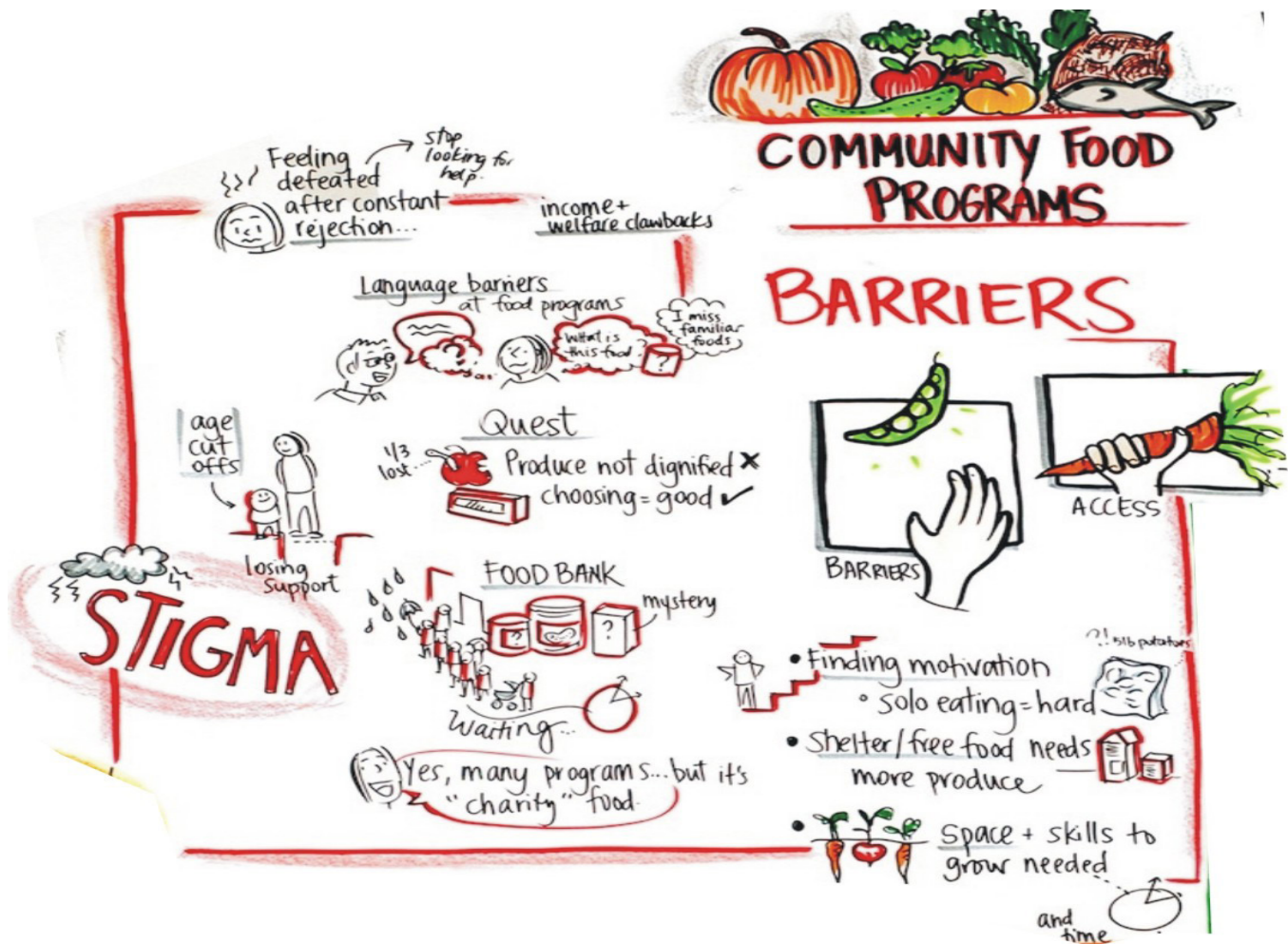
5. Focus group and key stakeholder interview results

The focus groups were intended to complement the community-based survey by providing more in-depth information on lived experiences with food insecurity from the perspective of underserved people. This section highlights these experiences and examines ways in which food programming can be strengthened.

5.1 Where and how is healthy food accessed, and what are the barriers to access?

The focus groups revealed the multiple sources that underserved people used for accessing healthy food, and how they perceived barriers. They reflected on the mental strains of undignified access and the ways in which food insecurity makes people internalize social norms about poverty. They also reflected on the ways in which poverty and food security are relative concepts, and how in an unequal society there is little choice but to compare oneself to others. Here are two quotes from participants in the Grandview Woodlands focus groups:

It is the opposite of what they say is dignified food. You see all these other people going into Whole Foods. My friends call it "Whole Cheque" because you spend all your money. They can do whatever they want and your minds gets like I can only buy that. You lose perspective. Your frame of mind ends up changing, the way you think and the way you live when you are on that lower income ...

I just used to have that mindset that poor people don't get to eat like that. That was my sick thinking, but that is so not true. I don't know if it is society that says that, but where did that thought come from. That is just what you get to eat if you are poor. I go to the Food Bank and here is a box of Kraft Dinner and well thanks it is great.

There were many complaints about food banks as often repeated in research, and on which we don't need to dwell here for too long: long line-ups, stigmatization, and poor quality food. As one participant put it: "It has a lot of processed food and too much household cleaning stuff. I stopped going because of all the out of date food." Another participant said: "You should be able to stand in a food bank line without feeling like a piece of garbage." In a similar vein, one participant had the following to say about food bank line-ups: "Dignity is being ripped away from you."

Mobility and constraints to being able to get to where there is good food was repeatedly mentioned. Here is a participant's comments from Grandview Woodlands:

I feel like I am constantly shopping. Like my life is like constantly shopping for bargains. It is such a waste of energy. Like bus fare is a thing. I tend to walk downtown, I walk down Union Street, so I get a workout as well but then how are you going to carry stuff back so you take your knapsack or your two wheeler....Oh there is a special on over at such and such a place and coffee is somewhere else and on and on.

One key stakeholder in Bella Coola put it like this:

Right now I can go in the mountains and pick blueberries, but in order to get there it's an hour and a half drive. Those without vehicles can't get there. If they want halibut or clams or crabs or anything like that they are limited in getting access to boats.

A focus group participant in Bella Coola said:

I tried going to go to the food bank but it's hard for me to get a ride, because it's just me and my daughter, it's hard to find someone to watch her and get a ride at the same time. I can't carry the stuff from the food bank and hitch hike with her at the same time either.

Finding the money for bus fares, waiting for buses, long walks, and not being able to carry large amounts of food were constant themes. One participant with a disability from Grandview Woodlands said:

Because I'm in a wheelchair, there are not many wheelchair accessible places where I can go. I cannot carry a basket. I need to carry items on my lap and hope they don't fall.

We should note again the high levels of disability among questionnaire survey respondents – over one third – and that survey respondents on average had about $4 a day for food, which means that getting a bus for $2.75 or even $1.75 for a concession fare would take up most of that budget. Lack of time was also an issue. Rather than having lots of time on their hands, focus group participants talked about the time it took to go from place to place looking for bargains or waiting in line for hand-outs, and prepare and cook food by themselves, often while looking after older relatives or kids. Ill health was another major issue raised, as has been extensively described in the literature on food insecurity. Participants described a downward spiral where they or a family member got sick and could not work, and their illness was made worse by no longer being able to afford good quality food.

Mothers in the focus groups also described going hungry so their kids could eat. There is some indication from the academic literature that food insecurity is worse for women than men, and the primary role that women have as caregivers in many households may contribute to their own hunger. This in turn has implications for service providers concerning the kinds of support they offer to mothers with children in the home.

Food culture was on a lot of focus group participants' minds. Culture and language were a barrier to some groups, including new immigrants and people with an Aboriginal background in Grandview Woodland, in the sense that new immigrants and Aboriginal people new to the city were unfamiliar with some local foods. In Bella Coola, access to "traditional" sources of food through hunting, gathering and fishing was seen to be disappearing, and not being passed on from the elder to the younger generation. Along with this slow disappearance of knowledge was a fading of a culture of sharing which participants looked back to. Here are three participants' views on this:

> An elder once told me that one of the worst things created that our people took up was the deep freeze, because now nobody shares.

> We ate lots of potatoes when I was growing up. We had that potato garden and my Dad stored some for the winter, and now we buy our potatoes. Look at all the food we put on our tables most or all of it is bought. I think that a lot of the reason that people buy food is that there's no hunters or they are single. I know there are a lot of single mothers and then that becomes single grandmothers. Then there are these single people that live in their big houses all by themselves. It's a different society now. I know that a long time ago a normal Nuxalk village didn't have a lot but everyone helped one another.

> I make jam and I have a big family so I share … You're supposed to share. I give them out left and right it's a part of our culture even though some of our people have forgot.

A participant in Grandview Woodlands agreed:

> It is kinda interesting in some way, if we had more help with the housing issue I think the other issues would open up. Rent is just crazy. Not even just the rent but it seems that in society people are just more separated. It seemed in the old days people shared a lot more, had dinners a lot more. More communal, generally. Seems that we need more social occasions.

Aboriginal participants in the Grandview Woodland focus groups who had arrived in Vancouver from northern BC, in several cases because they or family members needed medical attention, made the point that they had been used to wild game and now had to adjust to buying food in the city. There were also strong views on exclusion in Bella Coola:

> That's what frustrates me is that we don't have the "right" to hunt on our own land and all we're trying to do is feed our families. When we get a deer or a moose we use all of it, the antlers get turned in to buttons or knife handles, the hoofs for my apron. I try to use every part of it including the heart and the liver.

Knowledge of local programs, sources of good and/or cheap food and of traditional means of accessing food were also common themes in the focus groups. Participants wanted more and better information that they could use themselves, and they also wanted more sharing around food. A Grandview Woodland participant said:

> Income assistance offices need to be more aware of what we need to live. I have seen that piece of paper too that says go down to the Union Gospel or go down to this or that. Why are there not food co-ops? That is something that people in East Vancouver would love to participate in.

Another put it like this:

Most of the information and resources that I have found have been because I have stumbled upon them. They weren't given to me, but I heard about them in a conversation like… You hear about going to the Food Bank or to the Salvation Army, but you know you really have to be in a pretty desperate sad place to go because it totally strips you of your pride. It is not a fun experience. One of the things is the Survival Guide put out by Watari [Counselling and Support Services Society]. Why isn't a book like that given out when we apply for income assistance that tell us how to get like dental stuff and how to get free produce or if you want to sign up for a co-op, this is how you do it? I think it is more about informing people on any level, like having a sheet of resources, whether you are at Income Assistance or you are at the Native Health or at the Reach Clinic or at BC Housing and they go … hey do you know about this website where you can access all this information.

6. Summary discussion

In the literature review for this community-based research, we describe the criticisms of food banks as temporary charitable solutions which have become permanent substitutes for effective government policies and programs to end food insecurity. The response from critics has been that food security programmers should spend more time and effort on advocacy and changing structural causes of food insecurity. But the capacity of food-related organizations to change the way government is working may be limited, especially in the current neo-liberal era of attacks on the public sector, continuous budget cuts and increasing reliance on a discriminatory private sector. What do underserved people do in the meantime?

An alternative to this divisive debate, and an interim measure to improve food related programming, may be to incorporate the wider issue of food culture into program development. Our research points towards the need to support networking among underserved people so they can build the social and economic benefits of working together. It also points to building on their existing capacity by providing more information about where good food is available, how to use the food they get more effectively, and removing barriers by cutting down the time to get food, and increasing availability of good food. For example, a website highlighting community food events and programs could help with advertising, with the understanding that not everyone has access to the internet. A minivan shopping trip for those who have difficulty with mobility could be a community activity that food programs could provide. Programmers would become less food providers, and more facilitators of people working together to gain dignified access to good food themselves. In other words, a balanced focus on people and food.

This approach may appear to romanticize the capacities of the underserved, but many studies show that, within limits, the less people have, the more sharing is important to them. And a major part of food culture is sharing food with friends, neighbors and family. This approach may increase the choices underserved people have, empower them in social networks and ultimately results in dignified access to healthy food.

Here are further comments from focus group participants, first from Bella Coola:

> What's one of those incentive programs where a bunch of people would get together and do fish like cut, smoke and jar or package it. Our poverty level is so high that I believe that people need to be supported in a good way, like covering the expenses so they can learn how to do fish or other things like that and so they can be proud of themselves for learning. But they can't learn now because they don't have a boat to go fishing in, don't have a smoke house to smoke it in, don't have jars to put it in or a deep freeze to put it in. That support is needed here.

And from Grandview Woodland:

> I think when you said programs, my first thought was, no not programs, but rather all of us knowing that you can get a group of people together and you can do this with a few things, one person has a car and one person is dedicated to ordering food. You can have a neighbourhood group that gets bulk food that cooks together. You can initiate those things maybe with some very basic guidelines and supports in different communities.

> For me it is always about moving forward. After having said all this, we found out that if someone has a car on Sunday we can get a ton of groceries. There is a bread store we know of that we can get tons of day olds and it is just like, what would it look like if we took all the resources that we shared here and did something about it ourselves. What would that kind of program look like? Is that possible?

There is a need to listen and learn from underserved people as to what works for them. This is not a one-time thing; there needs to be mechanisms in place where there can be regular feedback – focus groups, individual interviews, ideas boxes and questionnaires. This in turn will lead to greater accountability of service providers to their clients, and change the power dynamics that are sometimes behind a lack of dignity in food programming. As one of the key stakeholders put it: "A program really needs to go into a community and find out how the community is, who the community is. What can tap into their culture?" This needs to be institutionalized as part of everyday programming, so that the voices of underserved people are central actors in the design and delivery of the food programs they access.

7. Key findings and opportunities for action

The following section highlights key findings of our community-based research and details opportunities for action to better support dignified access to local healthy food for underserved populations.

Findings and opportunities for action

1. Lack of income is the main barrier to accessing healthy food.

Having enough money to afford good food was not a reality for the majority of participants. While lack of money is a constant theme among the underserved, additional barriers that prevent access to healthy food include: time, mobility, lack of good food locally, lack of knowledge of where to buy local, healthy food or of food programs. While we advocate for governments to ensure underserved people have an adequate level of income, there are other ways to support dignified access to good food.

Opportunities for Action

a. Increase income assistance rates so recipients are not forced into forfeiting their right to food.

b. Provide better time options especially for single parents and caregivers with children to participate in community food programs.

c. Address disability and mobility challenges by creating programs that either get food to where people are or help people get to food stores and programs.

d. Develop innovative programming specifically targeting individuals with severe and chronic health issues.

e. Ensure that provincial funding programs that address food security issues incorporate the unique needs and circumstances of rural communities.

2. There is less reliance on food programs in Bella Coola in part because of issues that are unique to rural communities.

Some clear differences emerged from our two study sites. There was less reliance on food programming in Bella Coola. Underserved people were more reliant on local wild food sources and the community sources (feasts, luncheons, family sharing) to provide food. This may be a feature of service delivery constraints in a small community, the distances people have to travel, and the limited number of people available to volunteer in food programs, rather than a lack of need. Because of their greater concentration of population, urban centers tend to have more services. In addition, resources to address food security issues are often not available to rural and/or remote communities.

Opportunities for Action

a. Ensure that funding programs focused on food security adequately address issues unique to rural communities.

b. Recognize that many funding sources and much of the community capacity available in urban centres is not existent in smaller communities. Invest in resourced leadership for food security programs and community development initiatives as a whole for rural and remote communities.

c. Support the development of strategies to encourage the dissemination of traditional Indigenous knowledge and practices around food.

3. Underserved people do not want handouts. They want to co-create ways to support themselves individually and in the communities in which they live.

Our research results suggest that the emphasis should be on individual and community development, rather than exclusively on the provision of emergency handouts. Development of a food culture based on networking, mutual support, information sharing and ongoing education about food can help food programmers to move from being providers of food to facilitators of people working together to gain dignified access to good food themselves. This approach may ultimately increase dignity by improving the choices underserved people have and by supporting the development of social networks.

Opportunities for Action

a. Improve networking and connecting events for underserved peoples so they can support each other in accessing good quality local food.

b. Focus less on food as a product and more on food culture, the ways in which people build community through food with programs like community kitchens or potlucks.

c. Support cultural competency and cultural food literacy training that builds service agency understanding of culturally appropriate food programming.

4. We do not know enough about underserved people who are not accessing food programs and why they are not accessing these programs. Further research is needed.

Our study mainly engaged people who already, to some degree, access food programs. Questions still remain for those who do not access food programs. Additional, research is required to strengthen the discourse about what works best for unengaged population groups.

Opportunities for Action

a. Develop ongoing and regular ways to gather feedback, including listening and learning from people who could benefit from food programs but do not.

b. Develop participatory strategies to evaluate and strengthen alternative models that support dignified access to food, with a view to improving access for those who face barriers to existing services and programs.

5. While food banks are important sources of food, underserved people utilize a variety of strategies to access healthy food using community and traditional sources.

Currently about 1.7 million Canadians access food banks (Food Bank Canada, 2013). While most discussion about food security focuses on food banks, a number of alternative programs and models have developed over the years. The Vancouver Food Bank is currently in the process of piloting a new approach to food security which may offer a future model for emergency food service providers. It is also noted that the concept of a "food bank" may need to be very different in rural locations than in urban centres.

Opportunities for Action

a. Inform underserved people about where good food is available through better advertising of food programs and sharing of affordable food locations.

b. Improve networking and information sharing amongst service providers and food security agencies.

c. Create accessible knowledge on how to prepare food in ways that can make the most of available healthy food.

d. Support programs that make the most of wholesale or discounted fresh produce and proteins.

e. Advocate for a wider range of food retail providing affordable foods for individuals on low income (i.e. pocket markets, mobile and community food markets).

f. Improve access to food growing space including backyards and community gardens for low-income residents along with supports in how to grow food.

8. Appendices

Appendix 1: Literature review

1. Introduction

As a starting point, the following environmental scan of underserved populations and food security was carried out to direct the community-based research conceptually, and to support development of the research methodology. The research project is using the following definition of food security:

> Community food security is a condition in which all community residents obtain a safe, culturally appropriate, nutritionally sound diet through an economically and environmentally sustainable food system that maximizes community self-reliance, social justice, and democratic decision-making (Bellows & Hamm, 2003 as quoted in BC Ministry of Health, 2012).

Websites and academic journals were searched for relevant literature, and the research team also drew on their own knowledge of both published and grey literature. A review carried out by the BC Ministry of Health (2012) usefully summarized some of the relevant literature related to food security programming. The PROOF website[4] includes useful summaries of debates and extensive references. The literature reviewed in this environmental scan (see bibliography) is not comprehensive, but is considered adequate for understanding current thinking on underserved populations and food security, including how to develop an appropriate research methodology.

In the following section of the review, we set out what is known about the demographics and socio-economic status of underserved populations. Section 3 reviews the literature on the "charity" and "structural" models for supporting the underserved, a literature that is central to current attempts to end food insecurity. Section 4 assesses outcomes of "alternative", mainly community-based, food programs. Section 5 reviews studies of underserved people's own views of food insecurity, and Section 6 considers the implications of this literature review for the design of our community-based research project.

2. Who are the underserved?

There is general agreement that many economically insecure and low-income Canadians are underserved when it comes to accessing local healthy food, including the following people experiencing homelessness, people living with HIV/AIDS, long-term and, in some cases, short-term unemployed, Aboriginal households, immigrants, single parents, people with disabilities and seniors. There is also some evidence that women in these categories are likely to be more food insecure than men, although a gendered analysis is sometimes missing in the literature.

3. What do we know about food bank use and food insecurity in Canada?

Along with its network of food-related organizations, Food Bank Canada (2013) assists approximately 800,000 Canadians a month. In March of last year:

- 36.4% were children.
- 11.5% reported employment income.
- 4.6% received EI.
- 50% received social assistance.
- 16.4% received disability-related income supports.
- 42.6% came from single person households .

4 http://nutritionalsciences.lamp.utoronto.ca/

These trends are consistent over time. Surprisingly, Food Bank Canada does not disaggregate data by sex.

Food Bank Canada (2010, p. 11) provides a breakdown of three types of need related to food insecurity which will be useful for determining appropriate forms of revised response to these needs:

> Many of those needing help don't need it for long – they will come for assistance for three or six months, often after losing a job, and will not be seen again at the Food Bank after they re-enter the workforce. Others need help for longer, perhaps a year or two, because of a long-term illness and resulting job loss, because they are working less in order to care for a sick family member, or because they have gone back to school and have few sources of income besides a student loan or social assistance. Some individuals and families need help for even longer. They might face long-term mental or physical health issues that make it impossible to hold down a full-time job, or live in regions where opportunities for employment are scarce, and therefore are forced to rely on income support programs that do not provide enough money to meet basic needs.

Tarasuk and colleagues (2013) use a similar typology:

- **Marginal food insecurity:** Worry about running out of food and/or limit food selection because of lack of money for food.
- **Moderate food insecurity:** Compromise in quality and/or quantity of food due to a lack of money for food.
- **Severe food insecurity:** Miss meals, reduce food intake and at the most extreme go day(s) without food.

On gender-related issues, Matheson and McIntyre (2013, p. 1; see also Tarasuk et al, 2013 and Section 6) comment that higher rates of food insecurity in non-married households in Canada are largely attributable to women's socio-economic disadvantage. In married households, women appear to report higher levels of food insecurity than men. Their findings suggest a possible bias in the measurement of population-level household food insecurity in surveys in cohabiting households, and that surveys of food insecurity need to be gender-sensitive wherever possible.

4. The debate on emergency food and the need for change to the structural causes of hunger

In her 1998 book *Sweet Charity*, Poppendieck sums up a central critique of the emergency food system that became prevalent in North America since the 1980s (primarily food banks and kitchens) (p. 5-6):

> Most significantly, and more controversially, the proliferation of charity contributes to our society's failure to grapple in meaningful ways with poverty ... this massive charitable endeavor serves to relieve pressure for more fundamental solutions ... making it easier for government to shed its responsibility for the poor, reassuring policymakers and voters alike that no one will starve….And because food programs are logistically demanding, their maintenance absorbs the attention and energy of many of the people most concerned about the poor, distracting them from the larger issues of distributional politics. It is not an accident that poverty grows deeper as our charitable responses to it multiply (p. 5-6).

In other words, the governments responsibility of right to food has been replaced by charitable gifts provided by the community and delivered by volunteer and underpaid staff.

Poppendieck (1998, p. 86-87) explains why there was so much focus on hunger as opposed to structural causes in response to rising poverty in the US in the 1980s:

If the problem is homelessness, why not offer some form of shelter?.... many groups and organizations that wanted to 'do something to help the homeless' were not prepared to provide shelter – too costly, too intrusive, too risky…. or could offer shelter for only a tiny fraction of the people seeking help. A hot meal, however, was a chance to come in from the cold….were within their means….by defining the problem as "hunger," these organizations brought it within the range of their resources."

Poppendieck is opposed to anything other than the right to food, even the improvement of current services (p. 296, 307): "The availability of kinder, gentler help at the soup kitchen or food pantry may deter people from exercising their rights to entitlements, and, as a result, they may end up worse off, materially at least…. Why have we become so attached to the language of hunger and homelessness instead of poverty and inequality?"

Poppendieck's arguments have been influential, are repeated in similar fashion by a number of writers on food insecurity. For examples, see Box 1.

Box 1: Perspectives on the causes of household food insecurity

BC Ministry of Health (2012, p. ii): "While strategies such as addressing barriers to access and supporting a better flow of healthy donations to programs may help to improve their accessibility and programs capacity to provide healthy foods to service-user respectively, since the charitable food model is not able to address the root causes of food insecurity at the household level, the role of the health sector and communities with this system is unclear."

Food Security Forum (2009, p. 5): "Dr. Graham Riches spoke of food security in the context of the right to food. He spoke of how the current system is ad hoc and does not meet the needs of everyone because it is not set up to do so. In fact, the strength of the charitable system may prevent any policy level action from occurring. He described the charitable system as a very large and helpful band-aid, but a band-aid nonetheless."

These authors move the focus away from food insecurity to wider issues such as employment and entitlements, which is the focus for example of all the recommendations of Food Bank Canada (2010) and several other publications, including the Canadian People's Food Policy (2011). The conclusion is that more time needs to be spent by food activists on advocacy addressing the root causes of food insecurity. The feasibility of doing this is not usually discussed, nor what will happen to the food insecure in the meantime. The relations between advocacy work related to policy development and food security for the underserved does not seem to be well understood. The PROOF research program has identified a number of gaps at the policy level which make it challenging to examine the impact of social policy on household food insecurity, including data availability – household food insecurity is generally measured by health surveys (e.g. the Canadian Community Health Survey) that contain limited questions of relevance to social policy. However, research has examined the relationship of household food insecurity to policies related to energy cost subsidies, housing subsidies, and agricultural subsidies related to milk.

The PROOF research program concluded that many provinces have developed poverty reduction strategies, but with no explicit attention to food insecurity, and no evaluation of their impact on food insecurity. Little has been written on these policies from a food security perspective, although research suggests that current strategies are insufficient to address food insecurity of the underserved.[5]

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5 http://nutritionalsciences.lamp.utoronto.ca/resources/research-publications/public-policy-and-public-programs-to-address-food-insecurity/

A recent research project has updated Poppendieck's (1998) work with a focus on emergency food provided by 31 municipal agencies and local organizations in Toronto and Hamilton (Wakefield et al, 2012). This study shows that food bank staff are aware of criticisms of services they provide, and: "have been among the staunchest advocates for programs that address the root causes of hunger in Canada, such as increases to the minimum wage, increased social assistance, and affordable housing …. Unfortunately, these efforts have been mostly unsuccessful, and food programs delivered by these organizations have become the de facto support for people experiencing food insecurity." (p. 4-5) Some service providers also expressed skepticism concerning the emphasis on community food security, which from their perspective focused on food supply and distribution, to the exclusion of poverty and lack of income.

Wakefield and colleagues (2012) identify several constraints to increased advocacy: uncertainty concerning funding and the time taken to write funding proposals; short-term contracts; limited funding for advocacy work; the government as a major source of funding (40% in their sample), making it difficult to bite the hand that feeds; responding to immediate needs; and lack of skills. So even where organizations attempt to follow the food security continuum combining a number of different approaches (SPARC BC & Beck, 2011), work on policy and/or transforming the system may be the least feasible.

A second set of arguments against emergency food, again following Poppendieck (1998), focus on its inadequacy and inappropriateness for recipients. Most authors make similar criticisms:

- The programs are limited and fall short of meeting the nutritional needs of users (BC Ministry of Health, 2012; Ostry, 2010; Kirkpatrick & Tarasuk, 2009; Poppendieck, 1998).

- The programs are demeaning (BC Ministry of Health, 2012; Wakefield et al, 2012; Fodor, 2010; Poppendieck. 1998).

- The quantity of food provided is limited (BC Ministry of Health, 2012; Ostry, 2010; Poppendieck, 1998).

Perhaps the most intensive studies of charitable meal programs have been carried out in Toronto. Tarasuk and Dachner (2010, p. 443, 6) conclude:

> Our inventory of food-provisioning efforts in Toronto revealed 490 different charitable meal and snack programes serving homeless and impoverished-but-housed households. The food assistance provided through these programs was fragmented and haphazard, reflecting the ad hoc origins of many initiatives and the absence of any shared vision or resources. Community agencies and organizations have independently mobilized resources to provide food to the individuals with whom they have contact. Their efforts have generally not been structured to achieve a specific standard of food assistance or nutrition support, or to reach any defined target group. Yet, the potpourri of meal and snack programs now in operation represents *de facto* policy on the management of homeless and impoverished individuals' food needs….A vast body of research in the United States highlights the difficulties in effectively addressing domestic problems of food insecurity through food-based programs.

Clearly this is a central area for any community-based research on food security to investigate. Studies such as Tarasuk and Dachner (2010) beg several questions for the future of the food security research agenda:

- Given the constraints to advocacy related programming and the focus on the charitable model, what is the scope for effecting needed large-scale changes in policy through food security programming?

- How feasible will it be for the institutions providing food to 80% plus of the food insecure to move away from the charitable model?

- Is the best we can hope for with these institutions an improved supply of more appropriate food, or can they change radically to become more participatory organizations?

- If there is a greater focus on advocacy which should lead to longer term change, what are the food insecure to do in the meantime?

5. Other programming in response to food insecurity

Partly in response to criticisms of food banks, a wide range of what can be called alternative food security programming has been developed over the last 30 years, much of it community-based. This alternative programming as of yet covers a relatively small proportion of the food insecure, but has received a disproportionate amount of attention in the academic literature. Key questions for these programs include: who accesses these community based programs?; who is excluded?; and how far can they be scaled up?

There have been few evaluations or systematic reviews of these alternative food initiatives. Perspectives on their success differs. An evaluation of the provincially funded Community Food Action Initiative in BC found considerable success in this program run in nine communities, with high levels of participant satisfaction, but challenges in including underserved populations (SPARC BC & Beck, 2011). On the other hand, the PROOF research project found that:

> "In addition to charitable food assistance, there are a variety of community level food-based and nutrition programs that have broad social goals related to the environment and community-building. However, many also strive to increase access to nutritious foods and local foods among low income groups and are sometimes seen as food security initiatives. These programs include community kitchens, community gardens, food buying clubs, farmers' markets and food boxes. The limited research on these programs suggests very low participation rates, with little potential to impact food insecure households."[6]

The BC Ministry of Health (2012) review summarizes recent findings on alternative food initiatives:

- Community gardens have the potential to increase access to fruits and vegetables, especially in low-income areas that have poor access to affordable, healthy foods (see also BCNPHA, 2012; Fodor, 2010).

- Barriers to accessing farmers' markets have been identified particularly by those on low income. These include cost, transportation, lack of time and resources.

- Good Food Box programs operate in every province across Canada. A formal evaluation of their impact on food security has not been done. Individual program evaluations have reported improvements in vegetables and fruit intakes amongst participants (see also Jacobson, 2010).

- The use of tax incentive and other financing mechanisms will attract food businesses to low-income neighbourhoods and enhance the number of vendors that supply healthy foods in public areas. Mobile food vending improved healthy food accessibility in low-income neighbourhoods in the US where healthy food is often limited and vulnerable populations reside. A study of mobile food programs in 12 cities across the US identified several regulatory components that helped the programs meet the goals of increasing healthy food access for vulnerable populations. The components included: health and nutrition regulations on the types of food that can be sold from the carts, subsidies on permits and fees for vendors offering healthy food; and location regulation to promote operation in underserved neighbourhoods and vending in city parks.

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6   http://nutritionalsciences.lamp.utoronto.ca/resources/research-publications/community-food-programs/

- Social housing providers are offering community-based food programs such as community gardens and community kitchens to improve food access and utilize communal spaces for social benefit. It is unclear whether these programs have a positive effect on food security and associated health indicators (see also Food Security Report, 2009, which notes limited research on the links between social housing and food insecurity).

- Nutrition knowledge and food skills are a main focus of community-based food initiatives such as collective or community kitchens and cooking classes. One study found that those with poorer self-rated cooking skills had eight times the odds of food insecurity compared to households with higher levels of cooking skills.

- BC's Food Skills for Families (FSF) has been profiled as a promising practice. FSF is a hands-on, six-session weekly cooking program that teaches healthy eating, shopping and cooking skills to at risk populations including Aboriginal, South Asian, new immigrant and low-income families. FSF has delivered over 140 session series around the province since September 2008. An evaluation found that the program improved participants' skills and confidence to cook and prepare nutritious and appetizing meals, keep food safe, plan meals, shop and modify recipes to make healthier choices.

The BC Ministry of Health study (2012) concludes that: "Research-validated and evaluation-based evidence show that many community food actions directed to individuals and groups increase access to and consumption of healthy and culturally acceptable food…. It is less clear from the evidence, if, or how well these initiatives reach vulnerable groups and particularly those who are experiencing household food insecurity, or address issues of food affordability" (p. 20).

In the research already quoted in Hamilton and Toronto, agencies delivering social services with a food program as one component were most prevalent, with most services provided exclusively to low-income clients. Wakefield and colleagues (2012, p. 17) comment: "A diverse range of actors is converging around food. Even among 'traditional' emergency food service providers diversity in underlying values and organizational histories was evident…. Despite this diversity in organizational values and approaches, a clear trend emerged towards inclusion of 'alternative food initiatives' (such as gardens, gleaning, cooking programs, good food boxes, and farmers' markets) in the activities of the organizations studied, regardless of each organization's background." The Vancouver Food Strategy also documents the extensive work on 'alternative food initiatives' going on in Vancouver, and suggests their continued and increased promotion (City of Vancouver, 2013).

Scharf et al (2010, p. 18; see also Allen, 2012) found that: "Although the community food security approach has caught on widely, it has been criticized for not adequately helping low-income residents or addressing the structural issues of poverty and institutionalized racism …Some critics have suggested that the community food security approach effectively helps create a two-tiered food system, in which economic development initiatives that create expensive food alternatives benefit the producers and sellers, but are not available to all."

One initiative that has garnered much interest is the Stop in Toronto. Scharf et al (2010; see also Levkoe & Wakefield, 2010) note that the Stop's Community Food Centre model is a hybrid in that it promotes the development of grassroots alternatives to the mainstream food system, while pursuing state-level policy change and building food citizenship. Going beyond the focus on the need for increased incomes, the Stop's philosophy includes the need to fix a broken food system (Scharf et al, 2010, p. 28):

If farmers cannot grow food profitably, if the quality of our food is declining within an industrialized food system, if farming practices are degrading the soil or food is unsafe, if the food industry inundates us with advertising promoting unhealthy food, then we do not have an equitable food system. These issues affect everyone, but often affect low-income people disproportionately. Low-income consumers cannot afford to protect themselves from these impacts by buying expensive "clean" food. They, more than anyone else, need policy to ensure that farmers can grow good food locally, that the environment is protected, and that good healthy food is accessible to all.

While the Stop and other similar programs such as Sole Food[7] in Vancouver are noted as successes, they are to a certain extent dependent on dynamic individuals who are also skilled at fundraising, suggesting replicability may be challenging.

We can conclude from this review that on the one hand there are larger scale programs taking a charitable model which may find it challenging to become more participatory and appropriate; on the other hand, there is a proliferation of alternative small scale programming covering a small minority of the food insecure population which evidence some successes but the effectiveness of which is yet to be proven.

6. Underserved people's views of food insecurity

What are underserved people's views of food security? Food Security in Social Housing Policy Framework (2013, p. 9) found that: "Although there have been many accounts from the frontlines of food security issues among social housing tenants, there has been very little research done in this realm in BC. The few studies that have been done have been small and most have focused on SROs in Vancouver's Downtown East Side." This Section provides a selective summary of such anthropological studies in order to direct our community-based research. Further details on methodology are provided in Table 1 in Section 7.

PROOF has summarized research as follows:

> In addition to the deleterious effects of consuming a suboptimal diet, feelings of anxiety, depression, and stress are well documented among those living with food insecurity. Research depicts the monotony of eating a constrained diet day after day and highlights experiences of social isolation and alienation that come with going without. Poverty constrains food selection, acquisition, and consumption. Those living in severely food-insecure households are most likely to make food purchasing decisions solely based on price, foregoing all other considerations. ....Individuals within households do not experience food insecurity in the same way. Quite a bit of research on the intra-household distribution of food has focused on the experiences of mothers, and this work suggests that mothers routinely compromise their food intakes to shield their children from the physical, psychological and social effects of hunger. [8]

A study in Quebec City of 55 food insecure households and 59 individual service providers found perceptual differences between these two groups, with the latter more focused on the quantity of food needed for food security, and the former the quality (Hamelin et al, 2008). There was also divergence in perceptions of the program interventions, with service providers rating these higher than food insecure households, and a number of service providers noting that they were poorly informed about recipients' views of programming. A study in Nunavut used PhotoVoice methodology (providing study participants with a camera and asking them to record and discuss images related to a research question) with eight regular users of food programs, to determine their perceptions on the question: "What aspects of your everyday life affect what you eat and how much you have to eat?" Factors improving food security were the customary systems for sharing 'country food', and the presence of social support networks in the community, such as the Food Bank. Factors identified as negatively affecting food security were the high cost of food in the Arctic, and substance abuse (Lardeau et al, 2011).

7 http://solefoodfarms.com/
8 For other recent publications see: http://nutritionalsciences.lamp.utoronto.ca/resources/research-publications/lived-experi-ence-of-food-insecurity/

Engler-Stringer and Berenbaum (2007) carried out anthropological research with 22 users of Collective Kitchens in Saskatoon, Montreal and Toronto, using a combination of participant observation and in-depth interviews. The authors concluded that participants in groups that cooked large quantities of food reported some increases in their food resources. Participants reported increased dignity associated with not having to access charitable resources to feed their families, and some reported decreased psychological distress associated with food insecurity. Overall, participants reported increases in food security, but the authors conclude that collective kitchens are not a long-term solution to income related food insecurity.

In BC, three studies focus on the experience of the underserved of food insecurity are summarized below. Elliott et al (2012, p. 1) found that: "Aboriginal peoples are among the most food insecure groups in Canada, yet their perspectives and knowledge are often sidelined in mainstream food security debates. In order to create food security for all, Aboriginal perspectives must be included in food security research and discourse."

Their own research in Vancouver found that (ibid): "To date, research on Aboriginal food security has focused on traditional foods within communities living on reserves …... However, with approximately 60% of the Aboriginal population in Canada now living off reserve ….. a better understanding of the importance of traditional foods in the urban context is crucial to ensuring Aboriginal food security." The methodology for this study, which has implications for the Vancouver Foundation research given our choice of research localities, can be found in Table 1.

Food Security Report (2009, p. 4) notes the experience of Judy Graves who:

> every year has tried to get a day's worth of meals (breakfast, lunch, dinner, and bedtime snack) for free from the non-profit food lines in Vancouver's Downtown Eastside. This experience has been very trying on each occasion and she has never been able to finish the day due to long waits, adverse weather, violence and sexual harassment and humiliation experienced in the food lines. While she has been able to access some meals that are nutritious, there are large line-ups starting very early in the morning, sometimes the providers run out of food, and often the quality is poor. She also spoke of the facilities that she has seen in social housing units; they are often inappropriate for the resources of the target population.

It also notes the experience of lone mothers on income assistance, many of whom did not have enough money to pay for food, for example:

> My kids got to have something first before I [eat]. I don't care if I don't eat. I always say that [to myself], I don't care about me but I care about you." Mothers in the report study described complex strategies they used to ensure that they and their children have a sufficient quantity and quality of food, and some of the women talked about being in the sex trade so that they can buy food. All the women but one could not have survived the month without accessing free food on a weekly, and sometimes daily basis, including food banks and hot meal programs.

In the same report 'Jeanie' describes the complexity of accessing food banks:

> … you're only allowed to go to one food bank a week. You can't go anywhere else…Well, there's actually the Salvation Army, but that, you can go there every 3 months, and I've done that a few times. I've had to. And same with (the) Church downtown, I think it's 3 times a year you can go there. I'll tell you I appreciate the Food Bank and stuff, but there's been weeks where I've gotten a can of beans, a can of soup, garbage bags…. stuff that you can't really use, you know? People need the fruit and stuff, but some weeks, you get maybe, pork and beans, a can of soup. One time it was all junk food that came in… the lineup is so long you have to get there like 7 o'clock in the morning and start lining up. Otherwise, there's nothing left because there's so many people going there.

Miewald et al (2010, p. 511) carried out a participatory anthropological study with people living with HIV/AIDS and concluded that methods that engage marginalized populations in the research process can enhance our understanding of how food insecurity intersects with other aspects of people's lives.

Despite these studies, largely missing from the debates about food security in BC have been the views and voices of the underserved themselves. The experience of hunger is largely mediated through academics and researchers whose audience is either other academics and at the policy level.

7. Methodological implications for our community-based research project

Table 1 outlines methodologies used by studies that are relevant to our research. The studies use standard methodologies, including:

- Participatory research techniques which focus on the experience of the underserved and ensure that they are research partners (Elliott et al, 2012; Lardeau et al, 2012; Engler-Stringer & Berenbaum, 2007).

- Surveys of organizations (Ostry, 2010).

- Focus groups with organization staff (Brownlee & Cammer, 2004).

- Quantitative surveys of the underserved (Food Bank Canada 2010; Tarasuk and Kirkpatrick, 2009).

- A mix of the above (BCNPHA, 2012; Wakefield et al, 2012; Chan et al, 2011).

There was greater focus on quantitative approaches and interviews with service provider staff than on qualitative research with the underserved as research partners.

In addition Schnarch (2004) has identified the principles of ownership, control, access and possession for research with aboriginal people which our action research should follow – particularly given the Elliott et al (2012) comments noted above: "Aboriginal peoples are among the most food insecure groups in Canada, yet their perspectives and knowledge are often sidelined in mainstream food security debates." These principles and methods have informed the sedigne of our study of the views of the underserved in Vancouver and Bella Coola.

Table 1: Methodologies used in research with the underserved

Study	Method
Elliott et al (2012)	A participatory research study drawing on narrative inquiry approaches was designed, and received ethics approval from the University of Toronto. Narrative inquiry is a qualitative research approach that incorporates participants' lived experiences through stories. The Story/Dialogue Method documents experiential knowledge through sharing of stories in a structured format. In small "Story Groups," participants are asked to share a story from their personal experience. The group then move through a series of questions, progressively reaching deeper levels of analysis of the story. Four categories of questions are discussed: (1) *"What?"* questions clarify the details of the story; (2) *"Why?"* questions seek an explanation for the events of the story; (3) *"So What?"* questions synthesize what was learned from the story; and (4) *"Now What?"* questions cause participants to consider future actions to improve the outcome of similar stories. After participants move through all four levels of questions, they collectively create "Insight Cards" to capture the key discussion points for each set of questions. Each insight is written on a separate card, and participants work together to arrange the cards into categories or themes. The Story Groups then create a summary statement for each grouping, followed by a comprehensive summary statement linking all the themes together.
Ostry (2010)	The directors and managers of 36 agencies in Victoria responded to a survey designed to capture general information on the type and volume of food inputs and outputs at each agency. Interviewees were asked to estimate the value of food purchased and donated, by major category, during an "average" week.
BCNPHA (2012)	Three research objectives examining food security in non-profit housing were realized through a mixed-methods approach: • Determine the impact of food programs on tenants' lives, including food security, health and wellbeing; • Identify barriers to food program use; and • Identify ways of improving food programs and policy directions based on the research findings. Quantitative results were supplemented with nine key informant interviews. The intent of the interviews was to provide additional details about food security and to further explore the impact of food programs on tenant food security and health and well-being. Key informants were self-selected for interviews by indicating a willingness to be interviewed in the survey. They were provided honoraria for their time and knowledge.
Food Bank Canada (2010)	In total, 588 program stakeholders provided information about Missoula Food Bank by completing four surveys (466 clients, 64 volunteers, 26 donors, and 13 community stakeholders) and two facilitated discussions (9 staff and 10 board of directors). Client and volunteer surveys were administered by staff and through facilitated discussions. A data entry and analysis system was created to build organizational capacity to continue evaluation activities in the future. A small group of staff and volunteers assisted with the data analyses.
Wakefield et al (2012)	Findings on food security in Hamilton and Toronto are based on two data sources: organizational documents and in-depth key informant interviews. The sample of participants was developed purposively: existing lists of food programs and providers were used to identify key actors in each city for inclusion in the research, and also to identify smaller organizations that might otherwise be missed. The sample was selected to include a wide range of actors in food security work. Documents were collected from thirty-one local organizations and municipal agencies in Hamilton (n = 17) and Toronto (n = 14). Document collection focused on mission statements and annual reports, as well as documents specifically related to food security and social policy issues (e.g., position papers). These data were used to assess the extent to which local organizations have integrated policy concerns about food access into their published records. Twenty-six key informant interviews were conducted in Hamilton (n = 14) and Toronto (n = 12) with individuals who have experience with anti-hunger/food security programs and/or food policy. Interviewees were purposefully chosen in order to capture perspectives that would best represent the organizations' positions.
Brownlee and Cammer (2004)	This project examined the impact of the Good Food Box program based on two of its stated goals: increasing access to affordable, healthy food and promoting healthy eating. Forty-five households from Quint Development Corporation's co-operative housing program in the city core and key informants from the Good Food Box program, including volunteers, neighbourhood co-ordinators, and workers, participated in the project. Three interview sessions and two focus groups were conducted to gather data during the research project.

Table 1: Methodologies used in research with the underserved (continued)

Kirkpatrick and Tarasuk (2009)	Data collection was completed between November 2005 and January 2007 in 12 census tracts randomly chosen from 23 high-poverty tracts in Toronto. Families with children and who were tenants were studied because of the association between their household characteristics and food insecurity. Potential respondents residing in rental units in each census tract were approached at the door and screened for inclusion by trained interviewers with personal experience of low income. Participation was voluntary and confidential, and the study protocol was approved by the Human Subjects Research Ethics Board at the University of Toronto. Respondents from 501 families were surveyed, reflecting a participation rate of 62%. Questions were posed on the use of food banks and community kitchens and gardens over the previous 12 months and on children's participation in meal or snack programs at schools or community agencies over the previous 30 days. Resource augmentation strategies employed in the previous 12 months in response to threats of food shortages were captured through questions on delaying the payment of rent or bills, terminating services, pawning or selling possessions, and sending children to a friend's or relative's home for a meal. Data on the location of community food programs were obtained from program providers and mapped using Geographic Information Systems software. Variables were then derived to indicate the distance from the dwelling of each family surveyed to the nearest food bank, community kitchen, and community garden.
Chan et al (2011)	The FNFNES includes five study components: 1) household interviews for collecting information on dietary patterns, lifestyle and general health status, environmental concerns and food security; 2) traditional food sampling for a suite of contaminants; 3) drinking water sampling for trace metals; 4) hair sampling for exposure to mercury; and, 5) surface water sampling for pharmaceuticals. In BC, after introducing the study to the BC First Nations Health Summit and Health Council, randomly selected communities were invited to participate at a methodology workshop to discuss and provide input into the design of study and research protocols. This was followed with a visit to each of the participating communities to discuss project activities. Project work did not start until after signing community research agreements, which outlined the nature of the work and the partnership arrangements. Communities participated in all phases of the project. Locally recruited community research assistants were trained to collect all the data and samples. Written informed consent of each participant was obtained before any data were collected. Upon completion of data collection and analyses, community specific reports were developed, and returned to the communities where the findings were explained and discussed by the project's supervisory staff. Communities were given an opportunity to provide input into the format and contextual information provided in these reports. In BC, individuals aged 19 years and over, living on-reserve and self-identified as First Nations were invited to participate in the study. Data were collected from 1,103 participants; one participant per household (398 men and 705 women); from 21 randomly selected communities.
Lardeau et al (2011)	Eight regular users of food programs were recruited and engaged in a Photovoice research project to document factors determining their daily food consumption. The research method was introduced in workshops and discussion included the ethical concerns related to photography and how to take pictures. Participants were supplied with digital cameras, and asked to answer the following question using photography: 'What aspects of your everyday life affect what you eat and how much you have to eat?' In the final workshop, photographs were discussed among the group and participants identified key themes in the photographs, offering an understanding of food insecurity from their perspectives. The group then discussed what should be done with the knowledge gained. The participants decided by consensus whether and how the knowledge from this project would be disseminated. The use of participatory research approaches such as Photovoice offers promise for exploring food security issues among similarly disadvantaged and vulnerable populations elsewhere in the Arctic. This approach was found to be a useful method for gathering and sharing research data because the data was generated and analyzed by the participants. The clear and concise messages developed by the participants can be used to inform policy. This research method can assist in making a valuable contribution to health research, both in the Arctic and worldwide, because it promotes an understanding of the experiences of individuals from their own perspective.

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Appendix 2: Questionnaire survey for focus groups

Participant information letter for focus group participants

What is this study about?

We want to learn how to help make healthy food more accessible to everyone.

The purpose of this project is to produce new knowledge about the ways in which people who struggle to eat well can be supported to gain access to healthy food. Residents of Bella Coola and Vancouver's Grandview Woodland neighbourhood are being asked to share their ideas and experiences so we can better understand the barriers to dignified access to healthy food by underserved groups. We also want to learn how to overcome those barriers, what underserved people are doing now to eat better and how people want to participate in improving access to good food in their communities.

Who we are?

We are a team of community advocates and researchers made up of:

- Local community-based researchers who have experienced food insecurity

- Community-based coordinators from the Grandview Woodland Food Connection and the Bella Coola Valley Sustainable Agriculture Society

- Researchers from the Social Planning and Research Council of BC

- An independent researcher

How does this relate to me?

You are being asked to participate because we need the perspectives of all people who want to improve access to healthy food for themselves, their families and their communities: people of different genders, ages, cultures, sexual orientation, abilities, etc. If you have ever struggled to eat well, please share your ideas**.** The focus group will take up to 2 hours.

How do I participate?

Your participation in this research project is entirely voluntary and, as such, you may choose not to participate. If you participate, you have the right to end participation at any time. Also, please feel free not to answer some questions. You can withdraw from the project at any time and have any information you shared withdrawn. You must be 16 or older to participate.

Anonymity and Confidentiality

Because of the nature of a kitchen table discussion, we cannot guarantee confidentiality, though we will ask participants in the focus group to keep what they hear confidential. All information you share will be held in confidence by the researchers. All records will be kept in a locked filing cabinet at SPARC BC. Only the research team will have access to the data. Approximately 40 people will participate in a kitchen table discussion. Neither the names of participants nor any information that may identify individuals will be used in any reporting. Information will be kept until the project's final report is complete. After this time, all information with identifiable personal information will be destroyed.

Potential Risks and Benefits

We believe that the project presents no risk to you. We hope that by participating you will have a chance to provide input into how access to healthy food can be improved in your community.

Audio Recording and Transcription

We will be audio recording the discussion. The audio recording will be transcribed by a member of the research team and erased once the project is complete. Direct quotations from the conversation may be used in the final report, but they will remain anonymous.

Honorarium

In thanks for your participation, you will receive a **$30 gift card** which will be delivered to you in person at the kitchen table discussion.

Feedback and Follow-Up

Results of the project will be shared with participants at a community forum and dialogue which will be held at the end of the project. You will be invited to participate in the forum via email. In addition, a final research report and resource guide will be made publically available to participants through the community agencies that supported the project.

What do I do if I have questions?

In case of any questions that may arise, please feel free to any member of the research team. Our contact information is below.

The Community Research Ethics Board has reviewed this project and determined that it is ethically sound based on the guidelines of the Tri-Council Policy Statement Ethical Conduct for Research Involving Humans. If you feel you have not been treated according to the descriptions in this consent form/ information letter, or your rights as a participant in research have been violated during the course of this project, you may contact the Coordinator or Chair, Community Research Ethics Board, Community Research Ethics Office, 519-741-1318, x245.

We are grateful for your time and consideration, and thank you in advance for your participation in this important project.

Sincerely,

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Participant consent form for focus groups

Ensuring Dignified Access to Healthy Food for Underserved Populations

Protection of your privacy

All the information you provide will be strictly confidential and will be reported in a way that protects your identity and privacy. Your participation is entirely voluntary and you may end your participation at any time. This also means that if there are specific questions that you don't wish to answer, you can skip these questions.

If you agree to participate, please check the YES box and initial to show your agreement

☐ YES _____

Participant Initials

☐ NO

One of the researchers has also signed their name to indicate that they will honour their commitment to your confidentiality. We are not going to use your real name so feel free to make up a name (pseudonym) to put on your consent form:

_____   _____

Participant Initials   Date

_____   _____

Researcher's Initials   Date

Please initial here to indicate that you have received a gift card worth $25:

_____

Participant Initials (pseudonym acceptable)

Facilitator's Guide

A kitchen table discussion is a small group of people who get together to talk. The setting can be informal—a kitchen, living room, lunch room or coffee shop. You don't need to be an expert. What you do need is compassion and a willingness to share ideas aimed at developing solutions that work for everybody.

For this discussion, we will use an engagement process called *"Appreciative Inquiry"* as a method to gather insights, opinions, and thoughts from community members. Appreciative Inquiry (AI) is strategy for purposeful change that identifies the best of "what is" to pursue dreams and possibilities of "what could be." It is a co-operative search for the strengths and passions that are found within every system—those factors that hold the potential for inspired, positive change. It focuses on community's achievements and seeks to go beyond participation to foster inspiration. Three stages of an appreciative inquiry are: "What is happening?", "What would you like to see happen?" and, "What can we do to get there?".

Make sure everyone is comfortable and can see each other. Provide good food and make sure everyone has had a chance to help themselves. Start once people are comfortably seated.

A kitchen table discussion works best when people feel free to respectfully say what is on their minds without being judged. They need to know that there are no right or wrong things to say and that everyone's ideas are valuable. You can remind people that their own experiences are important and that their ideas do count.

As host, here is what you will need to do:

1. Participate in short training session with SPARC BC staff.

2. Arrange a space and time that works for the people you want to invite, also arrange for childcare and food if you think it is necessary – think of what else will be needed to make people feel comfortable and engaged.

3. Invite people who do not have an easy time accessing high quality food to participate. Use the participant information letter to support this process.

4. Send a reminder before the discussion date and time.

5. Procure 20 $30 gift cards for a local store, or visa cards. Keep the receipt so SPARC BC can compensate you. If you expect more people will attend discussions, get extra cards but make sure you can return them if you need to.

6. Review these notes, the consent process and the questions prior to the discussion.

7. On the day of a discussion, once the group has assembled, ask people to agree to the following (and write them down somewhere visible to all):

    *   **Listen to others.**

    *   **There are no right or wrong ideas.**

    *   **Everyone's contribution is valuable.**

    *   **Don't interrupt.**

- **Don't argue.** Instead of arguing, ask questions to clarify ideas and thoughts. Avoid defending your "position," but instead concentrate on clarifying your ideas and on understanding other people's ideas.

- **Be conscious of who is participating.** Use rounds, a speaker's list, or invite those who have not spoken to participate.

8. Review the information letter with everyone, and then review and collect consent forms by passing around an envelope. Once all of the forms are in, seal the envelope and set it aside.

9. Explain the compensation received by all participants.

10. Review and collect consent forms. Provide participants with the gift cards.

11. Do a round of introductions or a fun icebreaker.

12. Following the introductions, explain that you will now turn on the digital audio recorder. Ask participants to please keep what they share confidential.

13. Facilitate the discussion using the three big questions in whatever way works for the group. Use supporting questions to keep the discussions going and on target.

14. Take flip chart notes for each of the questions, keep the notes and type them up. Then identify key themes that came out of the discussion in response to each of the big three questions. Submit those notes to Ian or Dayna.

Facilitation Questions

(Subject to change based on Advisory Committee review)

Date:		Number of people in group:
Description of setting:		
Other notes:		

Today we are going to talk about eating, accessing healthy food and how to help make healthy food more accessible to everyone.

You are being asked to participate because we need the perspectives of all people who want to improve access to healthy food for themselves, their families and their communities: people of different genders, ages, cultures, sexual orientation, abilities, etc. If you have ever struggled to eat well, please share your ideas**.**

Three big questions will guide our conversation:

1. What is happening now in your community with regards to accessing healthy food?

2. How could things be different?

3. How do we get there?

First though, we are going for a few minutes about food and access to food. **What do you think of when they think of healthy desirable food and talk about "food security"?**

Facilitator Note: Write a list. Discuss how we are trying to understand how to make access to these foods better, and that this is part of community food security – access to safe, healthy, nutritious and affordable food for all – and that everyone is deserving of this. Once the group is on the same page, transition into the three big questions.

Question 1: What it is like to feed yourself (and your family) and try to access food in your community <u>right now</u>.

Supporting questions (to ask if needed):

- Where do you get your food from?

- How easy is it for you and your family to eat well and why?

- Do you access food programs or services? Which ones? If you don't use any, why not? How well do they work for you?

- Has access to good food changed over time? How is it different for different people?

Question 2: How could things be different?

Supporting questions (to ask if needed):

- Think about your community in the future. What does a community where you and your family have dignified access to good food look like?

- What would make it easier for you and your family to eat better?

Question 3: Now that we have a vision of how things could be improved, how do we get there?

Supporting questions (to ask if needed):

- What can we do as a community? What can you do yourself? What can others do? Who should be providing the help?

- Is there something that works now, that you would like more of?

- Are you interested in indigenous and cultural foods? What kinds of projects would help boost knowledge about and access to such foods?

Appendix 3 Questionnaire survey

Participant information letter for paper questionnaire respondents

What is this study about?

We want to learn how to help make healthy food more accessible to everyone, especially people who are more vulnerable to hunger. To do this, residents of Bella Coola and Vancouver's Grandview Woodland neighbourhood are being asked to share their ideas and experiences so we can better understand the barriers to getting healthy food. We also want to learn how to overcome those barriers, what underserved people are doing now to eat better and how people want to participate in improving access to good food in their communities.

Who we are?

We are a team of community advocates and researchers made up of:

- Local community-based researchers who have experienced food insecurity.
- Community-based coordinators from the Grandview Woodland Food Connection and the Bella Coola Valley Sustainable Agriculture Society.
- Researchers from the Social Planning and Research Council of BC.
- An independent researcher.

How does this relate to me?

You are being asked to participate because we need the perspectives of all people who want to improve access to healthy food for themselves, their families and their communities: people of different genders, ages, cultures, sexual orientation, abilities, etc. If you have ever struggled to eat well, please share your ideas. The questionnaire will take about 10-20 minutes of your time.

How do I participate?

Your participation in this research project is entirely voluntary and, as such, you may choose not to participate. If you participate, you have the right to end participation at any time. Also, please feel free not to answer some questions. You can withdraw from the project at any time and have any information you shared withdrawn. You <u>must be 16 or older</u> to participate.

Anonymity and confidentiality

All information you share will be held in confidence by the researchers. All records will be kept in a locked filing cabinet at SPARC BC. Only the research team will have access to the data. Approximately 200 people will complete this survey. Neither the names of participants nor any information that may identify individuals will be used in any reporting. Information will be kept until the project's final report is complete. After this time, all information with identifiable personal information will be destroyed.

Potential Risks and Benefits

We believe that the project presents no risk to you. We hope that by participating you will have a chance to provide input into how access to healthy food can be improved in your community.

Prize Draw

The questionnaire is accompanied by a prize entry form. Fill out and submit this form to be entered into a prize draw for one of **ten prizes valued at $100.00 each.** You are asked to provide your real name and contact information on this form. It will be separated from your questionnaire as soon as we receive your package, so your name and contact information will be confidential.

Feedback and Follow-Up

Results of the project will be shared with participants at a community forum and dialogue which will be held at the end of the project. You will be invited to participate in the forum via email. In addition, a final research report and resource guide will be made publically available to participants through the community agencies that supported the project.

What do I do if I have questions?

In case of any questions that may arise, please feel free to any member of the research team. Our contact information is below.

The Community Research Ethics Board has reviewed this project and determined that it is ethically sound based on the guidelines of the Tri-Council Policy Statement Ethical Conduct for Research Involving Humans. If you feel you have not been treated according to the descriptions in this consent form/ information letter, or your rights as a participant in research have been violated during the course of this project, you may contact the Coordinator or Chair, Community Research Ethics Board, Community Research Ethics Office, 519-741-1318, x245.

We are grateful for your time and consideration, and thank you in advance for your participation in this important project.

Sincerely,

Ian Marcuse
Grandview Woodland Food Connection
Phone: (604) 718-5895
Email: gwfcnetwork@gmail.com

Dayna Chapman
Bella Coola Sustainable Agriculture Society
Phone: (250) 799-5287
Email: daynabellacool@gmail.com

Scott Graham
SPARC BC
Phone: (604) 718-8501
Email: sgraham@sparc.bc.ca

Tony Beck
Researcher
Phone: (604) 980-3916
Email: tonybeck@shaw.ca

Katie McCallum
SPARC BC
Phone: (604)718-8502
Email: kmccallum@sparc.bc.ca

Participant consent form for questionnaire

Ensuring Dignified Access to Healthy Food for Underserved Populations

Protection of your privacy

All the information you provide will be strictly confidential and will be reported in a way that protects your identity and privacy. Your participation is entirely voluntary and you may end your participation at any time. This also means that if there are specific questions that you don't wish to answer, you can skip these questions.

If you agree to participate, please check the YES box and initial to show your agreement

☐ YES   _____

                         Participant Initials

☐ NO

One of the researchers has also signed their name to indicate that they will honour their commitment to your confidentiality. We are not going to use your real name so feel free to make up a name (pseudonym) to put on your consent form:

_____   _____

Participant Initials   Date

_____   _____

Researcher's Initials   Date

Prize Draw

A draw for ten prizes valued at $100.00 CDN will be awarded to people who submit the questionnaire and prize entry. If you would like to enter the draw YOU MUST FILL IN THE BLUE PRIZE ENTRY FORM included in this package. You are asked to provide your real name, address and contact information on this form. It will be separated from your questionnaire as soon as we receive your package, so your name and contact information will not be attached to your questionnaire.

Questionnaire For community members

Section 1: Preamble

Thanks for your interest in completing this questionnaire about access to food in your community. These questions should only take about 15 minutes to answer. Your responses will be used to learn more about barriers to dignified access to healthy food, how we can reduce barriers to accessing food, how people cope with limited access to food and what can help underserved people more fully participate in accessing better food.

These questions are for people who have ever struggled to eat well. If you do not have any experience with this, then you are <u>not eligible</u> and we thank you for your time.

Section 1: Demographic Questions about You

1. What community do you live in?
   - □ Bella Coola Area
   - □ Grandview Woodland Neighbourhood
   - □ Other: _____

2. How old are you?

□ 17 or under	□ 45 to 54
□ 18 to 24	□ 55 to 64
□ 25 to 34	□ 65 or older
□ 35 to 44	□ Prefer not to answer

3. What is your gender?
   - □ Female
   - □ Male
   - □ Transgendered
   - □ Prefer not to answer

4. Do you consider yourself a member of a visible, cultural or linguistic minority group?
   - □ Yes
   - □ No
   - □ Prefer not to answer

5. Do you identify as First Nations, Métis or Inuit?
   - □ Yes
   - □ No
   - □ Prefer not to answer

6. Do you have a disability?

   □ Yes

   □ No

   □ Prefer not to answer

7. Do you live on a low income?

   □ Yes

   □ No

   □ Prefer not to answer

8. How many people live in your household? ___

9. Do you have children in your care?

   □ Yes   If yes, how many children are you caring for? ____

   □ No

   □ Does not apply

Section 2: Questions about your current access to food

The next set of questions asks about access to food for you and your household.

1. Which of the following statements best describes the food eaten in your household in the past year?

   □ You and other household members always had enough of the kinds of foods you wanted to eat. → *If you selected this response, you are not eligible to complete the questionnaire. Thanks for your time.*

   □ You and other household members had enough to eat, but not always the kinds of food you wanted.

   □ Sometimes you and other household members did not have enough to eat. (or quality)

   □ Often you and other household members didn't have enough to eat.

   □ Don't know / prefer not to answer

2. What is your monthly budget for food and how many people does that feed?

   Monthly budget for food: $_____

   Number of people that feeds: _____

3. Where does the food come from that you eat on a regular basis (select all that apply)?

Hunting	Your garden / fruit trees	Green grocers
Fishing	Shared garden / fruit trees	Supermarkets
Foraging (plants, mushrooms, berries)	Farmers market	"Big box" stores (eg Walmart)
Friends or family	Preserves (e.g., canning)	Other:
Food banks	Community food program	Other:

4. What do you do to make sure that you and/or your family has enough to eat, or enough of the foods that you want to eat?

☐ Buy and prepare a few kinds of low-cost food (like what?)

☐ Eat what food is available or fast food, even if it is not a "balanced meal"

☐ Cut the size of your meals or skip meals as a strategy to make food last

☐ Eat less than you felt you should or not eat at all because there is not enough food

☐ Borrow/accept money from people who care about you to buy food

☐ Get food from the food bank

☐ Get food from a soup kitchen

☐ Grow food in a garden or on a farm

☐ Hunt and/or fish

☐ Gather wild food (like berries, roots, fruit, mushrooms, clams/mussels etc.)

☐ Accept food from people who care about you

☐ Save money for food by cutting back on other items

☐ Join a food program in your community

☐ Trade or barter for food

☐ Share food

Other: _____

Section 3: Questions about challenges and opportunities

The next set of questions are about challenges and opportunities to increase access to food where you live.

5. What makes it difficult for you and your family to eat better? (Select all that apply.)

   □   Lack of money to purchase food

   □   Lack of time to get and prepare food

   □   Lack of proper cooking space, equipment and tools (e.g., stove, oven, knives, pots, clean water)

   □   Availability of good quality food in your area

   □   Availability of traditional/cultural food in your area

   □   Availability of affordable food in your area

   □   Need more knowledge about how to prepare food

   □   Need more knowledge about where to go to get food

   □   Transportation problems, or difficulty getting to a good source of food

   □   Dietary/health concerns or restrictions

   □   Other:_____

6. Do you access or use any of the following food-related services in your community?

	Use this regularly	Used this occasionally	Heard of it, but do not use it	Never heard of it
Bulk-buy food program				
Community kitchen				
Free cooking classes				
Farmers Market coupon program				
Food bank				
Community food gardens				
Pocket markets				
Other				

If you have heard of these services and are not accessing them, why not?

7. a. Have any community services or food programs helped you access food?

   □   Yes

   □   No

b. If yes, what service or programs helped?

c. What per cent of all the food you eat is added by the programs? _____

8. a. Have any community services or food programs encouraged you/given you a reason to consider accessing different foods that you were eating?

   □   Yes

   □   No

   b. If yes, what service or programs changed how you eat?

   c. How? _____

9. What can be done to make it easier for you and your household to have enough good food to eat? (e.g., a specific program or service)

10. How could existing food-related programs be easier for you to get involved in?

Appendix 4: Organizations that participated in an interview

CEO of the Vancouver Food Bank
Community Nutritionist, Bella Coola
Director of Nuxalk Nation Health and Wellness Department, Bella Coola
Bella Coola Community Support Society
Fresh Choice Kitchens, Vancouver
Sanctuary Health, Vancouver
Simon Fraser University
South Vancouver Neighbourhood House
Vancouver Coastal Health Authority