Going Without in a Time of Plenty
A Study of Food Insecurity in NSW & the ACT

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and Anglicare NSW South, NSW West & ACT | May 2013
This research formed part of wider national research into food insecurity undertaken by the Anglicare Australia network research in 2012. We extend our appreciation to Anglicare Australia for making this research possible and, in particular, to Anglicare researchers across the network who understood and worked so hard to implement the vision of a national food insecurity research project.

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Lived poverty is the embodiment of hard choices. Households living on the margins experience significant levels of deprivation as they choose between having sufficient food to feed their families, securing stable and affordable accommodation and paying utility and medical bills. The experience can be one of isolation and social disconnection from family and friends, and a significant struggle to protect their children from the worst effects of such poverty.

In 2012 the network of Anglicare agencies across Australia undertook a national study which examined the experiences of food insecure households. This current report describes the outcomes of this study for people living in NSW and the ACT and explores in some detail the nature of the choices confronted by such households. It is a study which highlights the resilience and creativity of those whose low income constrains choice, particularly in relation to food. It is also a study of the extreme lengths that some people are forced to go in order to survive on a daily basis.

Who are the people faced with these hard choices?

The study was carried out among people who access Anglicare’s Emergency Relief (ER) centres across Australia. In the NSW/ACT sample, a number of people groups were found to be at risk of facing hard choices around food, including:

- People who have a low income: More than 61% of respondents were endeavouring to survive on less than $1000 a fortnight
- People with a disability: 44% of households had someone present who was indigenous, compared with a national indigenous population of only 2.2%

How bad is food insecurity for low income households in NSW and the ACT?

Using scales developed from an adapted USDA Household Food Security Survey Module (HFSSM) survey tool, some 98.8% of the sample of 171 respondents was found to be food insecure and 82.2% of respondents were severely food insecure. These levels were somewhat higher than the rest of the sample in other parts of Australia. Households also reported worrying about running out of food (87%), actually running out of food (78%), cutting the size of meals (82%) or skipping meals entirely (68%) on a recurrent basis. In most cases adults were hungry but did not eat because there was not sufficient food (68%) and 40% regularly did not eat for a whole day. For children the findings were very concerning. Three out of four children in the sample lived in a food insecure household. In 14% of households children were forced to skip meals and in a quarter of cases children were forced to go hungry on a regular basis. In the worst case scenario, in 7% households, children did not eat for a whole day on a recurrent basis.

What limits the choices for food insecure households?

The biggest constraint on choice for food insecure households is the inadequacy of income. Often the only discretionary item in the budget is food. An unexpected event or expense can put a family into crisis. Some 95% of the NSW/ACT sample indicated that in the past three months they had run out of food because of events such as an unexpectedly large bill, medical bills, a family funeral, a vet bill, removalist costs, car repairs or car registration. One in four people ran out of food every week because they couldn’t afford to buy more.

Transport was also an issue with one fifth of respondents considering that public transport to get to the shops to buy food was inadequate and unreliable, and 41% said that transport was too expensive.

Others were limited in their choice of food because they did not have a fridge (9%), a working stove, oven or microwave (11%) or the power connected (7%). For almost one in four (23%) health and mobility reduced the capacity to cook for themselves.

What choices are being made about food?

With a limited household budget and competing demands being made on that budget respondents indicated a number of enforced choices:

1. Choosing poorer quality food and food of less variety: Respondents spoke of the difficulty in accessing fresh food, meat and vegetables (43%) because of the expense and of substituting cheap carbohydrates to bulk up meals. Others spoke of having the same meals three or four times a week – often using cereal, potatoes, bread and noodles.

2. Going hungry to protect children: The data clearly indicates strong protective mechanisms at work, with adults endeavouring to protect their children from the worst effects of food insecurity. In many cases this required them to go hungry themselves to ensure their children get fed.

3. Planning and budgeting: Many respondents indicated rational choices to their difficult situation including budgeting and careful menu and shopping planning. Several mentioned growing their own vegetables in order to be self sustaining. Some however were forced to buy cheaper food which was close to its expiry date and line up at supermarkets at closing time in order to get specials.

4. Seeking assistance: One of the most common choices (92%) was to seek assistance from an Emergency Relief (ER) centre or at places where food was given out free (29%).

5. Desperate choices: In the open ended questions in the survey, a number of respondents showed desperation in their choices including cutting their meal portions and the size of their meals, skipping meals altogether, raiding garbage bins, shoplifting or stealing.

6. Choosing between food and other essentials: Frequently cited as choices in the juggling or balancing act of a limited budget were actions such as extending the due date of a bill, putting off paying a bill, pawning or selling personal possessions (49%) and buying food on credit (7%).

What are the impacts of making hard choices?

Never being sure of where to source the next meal or not being sure if the family will be fed adequately for the rest of the week clearly generates stress, anger and anxiety, which is well documented in both the literature and the responses in the open ended section of the survey.
Respondents indicated a range of emotions including anger and frustration, depression and low self esteem and shame and embarrassment over their circumstances. There was clear evidence of compromised health, lethargy and a sense of hopelessness. The perceived impacts on children were concerning as they included reduced capacity to learn at school, going to school hungry, being embarrassed and angry in front of peers and being unwilling to invite friends home after school. For some, such factors led to a sense of disconnection from both family and friends with a sense of isolation and exclusion.

What can be done?

There are a number of possible responses which could be made by both the NSW and ACT Governments in relation to these issues:

1. **Food specific policies**: These include the development of state-wide nutrition strategies, support for local food initiatives and regular food basket monitoring. Consideration should also be given to monitoring the prevalence of food insecurity in the community.

2. **Emergency Relief**: ER is one of the most utilised crisis management responses by low income households. It requires more funding to meet the current levels of need and to widen the capacity of such services to include wrap-around support services, case management and capacity building.

3. **Newstart Allowance**: Both the NSW and ACT Governments need to lobby the Federal Government over the inadequacy of Newstart which is forcing low income and unemployed households well below the poverty line.

4. **Housing**: One of the key factors which mitigates food insecurity is stable, affordable and sustainable accommodation. The NSW Government needs to increase the supply of such housing in order to reduce the significant levels of housing insecurity and rental stress which are currently occurring.

**Conclusion**

Lived poverty for the most marginalised and socially excluded people in the community is a daily struggle, attempting to meet the most basic of needs of food, heating and housing on a limited budget. This report highlights the nature of the difficult choices faced by such households and how they attempt to balance competing needs. It is a struggle focused on daily survival and not on longer term sustainability or future well being.
Australia is one of the most prosperous countries in the world and is a more prosperous place than it was even 10 years ago. In its rankings of the progress of nations, the United Nations listed Australia second in the world behind Norway on its Human Development Index. According to the 2012 Legatum Prosperity Index, Australia was ranked as the fourth most prosperous nation in the world after Norway, Denmark and Sweden. Yet despite this ongoing prosperity there is endemic social exclusion and material deprivation for a proportion of the Australian population, reflecting inequality of income. The Australian Council of Social Services (ACOSS) reported that in 2010 one in eight adult Australians and one in six Australian children lived below the poverty line. This trend has barely shifted between 2003 and 2010.

Poverty for those people living on the margins is a struggle between having a roof over one’s head and putting food on the table. This struggle has become even more apparent to community agencies which operate Emergency Relief (ER) and crisis intervention services. Of particular concern are those households with children, where cutting or skipping meals, hunger and food insecurity are not being adequately addressed. Workers in the field have long maintained that low income households struggle to access nutritionally adequate food. In such households, where budgets are stretched, food often comes to be seen as a discretionary item thus forcing people to make difficult choices. This report focuses on the difficult choices that food insecure households are compelled to make in order to survive.

1.1 POVERTY, DEPRIVATION AND CHOICE

Being poor generally means having insufficient resources, which leads to difficult life choices. Saunders et al (2007) make a distinction between poverty and deprivation. Poverty is seen as inadequate income leading to an unacceptably low standard of living. Deprivation on the other hand is considered to be the enforced lack of socially perceived essentials. In the Saunders et al study this included such things as having access to sufficient food, adequate housing, heating in winter and access to medical and health services.

The current study considers the hard choices that individuals living with deprivation have to make; however an ‘enforced lack’ means that people in such circumstances often have no real choices when it comes to the essentials for living, usually a reflection of inadequate income. The Saunders et al research indicates that there are high levels of deprivation among people accessing community services. Indeed people were going without access to doctors, dental, disability and child care services because they could not afford them. One in four people did not have heating in winter, more than half could not afford new school books and uniforms for their children and 70% chose to forego home insurance.

Further evidence from the Australian Bureau of Statistics shows that low income households spend proportionally more on housing, energy and tobacco than middle income households, have similar patterns of expenditure in relation to food, clothing and household furnishings and spend proportionately less on alcohol, medical care, transport and recreation.

It has been argued in the literature that the nature of decision making is very different when comparing low income and higher income households. Pennings and Garcia (2005) contend that when people live day to day, survival, nor wealth maximisation, is the main goal. This reflects the shorter time horizons when making decisions, which in turn leads to a reduced capacity to be innovative or seize new opportunities when making fundamental choices. Community workers recognise the limited horizons of those individuals who are trying to work out if, when and how they will have enough food on the table to feed the family that night or the next week. In other words, the needs of the current self outweigh the needs of the future self; the decisions and choices made reflect that context.

Choices made by low income households can either reflect:

• An emotional (and sometimes irrational) response to their situation in an attempt to reduce stress or
• A problem solving (rational) approach aimed at trying to optimise the choices available.

The latter approach includes adopting budgeting and shopping strategies, deferment or juggling of bills, and seeking assistance from welfare agencies. Sanderson et al (2012) noted that:

The primary strategy of low income households was to reduce spending on essentials such as food and fuel—spending on food was usually reduced by cutting the range and quality of food purchased, spending on energy was usually reduced by cutting consumption.

Emotional responses on the other hand might include splurging on a lottery ticket in the hope of a big win, buying high priced designer shoes or brand name clothing for a child to help them fit in with their peer group and avoid stigmatisation, or spending on costly items such as tobacco, which individuals feel helps them ‘escape’ from their current situation.

1.2 ANGLICARE’S RESEARCH

The difficult choices faced by households living on the margins were highlighted in a national study of food insecurity carried out by a network of Anglicare agencies across Australia in 2012. The Anglicare network is a significant provider of Emergency Relief. In 2012 across NSW and the ACT more than 26,000 people accessed these services at a total cost of $4.85m, 40% of which was funded through the donations and support provided by local communities.

This current report examines data gathered from this national study for NSW and the ACT, highlighting the severity and chronic nature of food insecurity for households accessing ER services. The report identifies the difficult choices such households were making in meeting basic household needs in the context of the financial constraints imposed by low income. It also posits some possible policy solutions.
In Anglicare Australia’s national study, a total of 590 people accessing Emergency Relief (ER) services were interviewed over a six week period at 63 sites in all states. This was a purposive and targeted sample of people accessing ER or other forms of food support. Some 167 respondents were interviewed at ER centres in NSW and the ACT. This sub-sample forms the basis of the current report.

The survey period ran from late February to late March 2012, with an extension for the Northern Territory, where surveys were conducted a month later due to logistical issues. As a result, most participants were describing their food situation from mid December 2011 through to mid March 2012.

The central measure of food insecurity used in this study was adapted from the USDA Household Food Security Survey Module (HFSSM). The HFSSM is a series of questions on whether households have enough money for sufficient quantity and quality of food or meals, and whether the respondents worried about not having enough food. Specifically, the questions identify:

- Anxiety or perception that the household food budget or food supply is inadequate
- Perceptions that the food eaten by adults or children is inadequate in quality
- Reported instances of reduced food intake, or consequences of reduced intake, for adults
- Reported instances of reduced food intake or its consequences for children

The version of the HFSSM used in the study included questions about the three months prior to the survey period. Respondents answered for their household. Children’s and adults’ experiences were measured in separate scales, with 9 questions pertaining to adults’ experience and 7 for that of children in the household. Due to the sensitive nature of children going hungry, these questions were confidentially completed by the participant separate to the interview.

The HFSSM tool was supplemented by the inclusion of a single food sufficiency question, used previously in the Australian Bureau of Statistics’ National Health Survey.

Broader issues of food insecurity were also addressed through supplementary questions which included:

- Reasons why participants struggled to obtain food;
- Coping strategies used by food insecure participants;
- The impact of food insecurity on individuals and families;
- The experience of using emergency food relief services;
- Demographic information, including information on household/family, housing, income, employment, age, Indigenous status, postcode, country of birth, year of arrival and language spoken at home.
- Transport;
- Regular household expenditure;
- Strategies for managing the household food situation;
- Migration stream and visa status for participants who were born overseas.

The study was approved by the Ethics Committee of the Brotherhood of St Laurence. All participants received an information sheet on the survey and gave written consent to be interviewed. Questions on child food insecurity were completed by the participant without any assistance from the interviewer before being sealed in an envelope.

The first stage of analysis included the generation of food insecurity scores using the HFSSM. Frequencies and cross-tabulations were run for all close ended questions in the survey. The second stage involved an analysis of all open ended survey questions and other comments volunteered by respondents recorded by interviewers during the survey.

Throughout this report the terms ‘food security’ and ‘food insecurity’ are frequently used. The term ‘food security’ refers to access by all people at all times to enough food for an active, healthy life. At a minimum, food security includes:

1. The ready availability of nutritionally adequate and safe foods, and
2. An assured ability to acquire acceptable foods in socially acceptable ways (eg, without resorting to emergency food supplies, scavenging, stealing, or other coping strategies).

Conversely, food insecurity refers to the limited or uncertain availability of nutritionally adequate and safe foods or limited or uncertain ability to acquire acceptable foods in socially acceptable ways.
WHO ARE THE PEOPLE FACED WITH HARD CHOICES?

Food insecure households face difficult choices over food that can even compromise health. In the literature, a number of key socio-economic and group characteristics have been associated with food insecurity and challenging life choices:

- Low income
- Recipients of government benefits
- Renting as opposed to home ownership
- Homelessness
- Unemployed households
- Single parent households particularly single mother households
- Being Indigenous

Other characteristics in the literature that have been associated with food insecurity include: geographical isolation, drug and alcohol dependencies, frail age, special needs due to disability or ill health, recent divorce or separation, being in shared accommodation, being in a single parent family or lone person household, low education or school non-completion, being in a family with three or more children, households without elderly people, households with non-citizen heads, a history of mental illness, and living in the central city of a metropolitan area.

This following section provides an overview of characteristics commonly found among people in the NSW/ACT sample of the national survey who experienced food insecurity.

3.1 LOW INCOME AND GOVERNMENT BENEFITS

In the current study more than half of all households (61%) were living on incomes of less than $1,000 per fortnight compared with only 30% of households in the Household, Income and Labour Dynamics in Australia (HILDA) national sample. More than one in five food insecure households in NSW/ACT (22%) were endeavouring to live on incomes of less than $600 per fortnight.

A causal link has been identified in the literature between food insecurity and low income, particularly among people relying on government benefits. Questions in the current study regarding sources of household income revealed a high level of dependency on government benefits among food insecure respondents in the NSW/ACT sample:

- 44% (n=74) of households had at least one person aged 15+ years in receipt of a Disability Support Pension
- 31% (n=51) of households had at least one person aged 15+ years in receipt of the Newstart Allowance
- 37% (n=62) of households had at least one person aged 15+ years in receipt of the Family Tax Benefit
- 4% (n=7) of households had at least one person aged 15+ years in receipt of the Aged Pension
- 33% (n=55) of households had at least one person aged 15+ years in receipt of the Parenting Payment single
- 8% (n=13) of households had at least one person aged 15+ years in receipt of the Youth Allowance

• 19% (n=32) of households had at least one person aged 15+ years in receipt of a Carers Payment.

By comparison only 20% (n=33) of households had at least one person aged 15+ years in receipt of wages or a salary.

The high proportion of food insecure people on a Disability Support Pension (44%) in NSW and ACT is an issue for concern as it is the number of people in this study who are reliant on the Newstart Allowance (31%). However, overall, there was little variation regarding sources of income between the NSW/ACT sample and Anglicare’s national sample.

A reliance on government benefits is a significant barrier to healthy food consumption, particularly in regional and rural areas. A food basket study of regional and rural supermarkets in Victoria found that in regional and rural Victoria, couple families in receipt of unemployment benefits would have to put aside 40% of their income for groceries to be able to feed their families healthy food. Single parents would have to put aside 37% of their income to be able to feed their families healthy food. Families in these situations where the grocery budget is constrained are forced to buy unhealthy food or to go without food.

3.2 HOUSING TENURE AND RENTAL STRESS

3.2.1 Tenure

Food insecurity has been found to be positively associated with high rental costs and housing instability and negatively associated with home ownership. Within the NSW/ACT sample the overwhelming majority of households experiencing adult food insecurity were living in rented accommodation (82.5%). Of the remaining 17.5%, a small percentage (6.6%) were living in households that were either purchasing or owned their own home, while just over one in ten households (11.9%) were in insecure forms of accommodation or living on the streets.

Among renters, just under half were living in government housing (48%) and a slightly smaller proportion (40%) was renting in the private market. The remaining 12% were paying rent to community or co-operative housing (6%), or to other people (6%). This compares very differently with the national profile where the 2011 Census revealed that renters only make up 26% of the population whereas home buyers and people who own their own homes constitute two thirds (66%) of all households. The proportion of people nationally who reside in public housing is just 4%.

3.2.2 Rental Stress

Respondents in the study, who were renting, staying with family or friends, living in a boarding house or in emergency accommodation, were asked to indicate the amount of money they spent on housing. Households paying more than 30% of their income in rent are considered to be experiencing rental stress and households paying more than 45% are considered to be experiencing severe rental stress.
be experiencing severe rental stress. Rental stress can lead to food insecurity as money spent on food is more discretionary than that spent on housing. The findings for NSW/ACT are concerning. Almost 30% of food insecure households in the study experienced rental stress and a further 42% experienced severe rental stress. If this is broken down between public and private rental accommodation it is clearly evident that the greatest rental stress is experienced by those in the private rental market (Figure 1). More than 95% of food insecure households in the private rental market were experiencing some form of rental stress.

**FIGURE 1: Public vs Private Rental**

NSW/ACT Food Insecure Households

![Graph showing public vs private rental stress](image)

**KEY:**
- Severe rental stress ~45% or more of income on rent
- Rental Stress - between 30%-45% of income on rent
- No rental stress - Up to 30% of income on rent

### 3.3 UNEMPLOYMENT

Participants in the Anglicare Australia study were also asked to indicate the employment status of the members of their household. In food insecure households in NSW/ACT:
- 9% (n=15) of households had at least one person aged 15+ years in full time work
- 8% (n=14) of households had at least one person aged 15+ years in part time work
- 10% (n=16) of households had at least one person aged 15+ years in casual work
- 31% (n=52) had at least one person aged 15+ years looking for work
- 43% (n=71) had at least one person aged 15+ years unable to work
- 27% (n=44) had at least one person aged 15+ years doing home duties (looking after children or housekeeping)
- 24% (n=39) had at least one person aged 15+ years studying
- 7% (n=11) had at least one person aged 15+ years who was retired.

The number of food insecure households who have no member in any form of employment, is not a surprising finding given that a number of studies indicate a strong correlation between food insecurity or food insufficiency and employment status. Temple33 found that employment was linked to food sufficiency whilst Foley et al44 found that unemployment appeared to increase the likelihood of experiencing food insufficiency. However it should be noted that this employment profile is very different to what could be considered a nationally representative sample, such as the profile provided by the Household, Income and Labour Dynamics in Australia (HILDA) Survey. In more than 60% of the HILDA national sample of households at least one person is employed full time compared with only 9% of the NSW/ACT sample in the Anglicare Australia study. While one third of households nationally have at least one person in the household involved in part time work, the percentage in the NSW/ACT sample is only 8%. While only 6% of members in households nationally are seeking work, 31% of the NSW/ACT sample in the Anglicare Australia study is actively looking for employment.

### 3.4 HOUSEHOLD TYPE AND SINGLE PARENT HOUSEHOLDS

Single parents with children were the largest household type in the study, constituting one in three (33%) of all household types, followed closely by sole person households at 30% (Figure 2).

**FIGURE 2: Household Type**

NSW/ACT Food Insecure Households

![Graph showing household types](image)

### 3.5 BEING INDIGENOUS

There was a significant over representation of Indigenous people among food insecure households in the Anglicare Australia study – with 14% identifying as Indigenous compared with 2.2% nationally.63

The link between being Indigenous and being food insecure is not surprising. In a national study in 2004-5, five times more Indigenous...
Australians reported they had run out of food in the last 12 months compared with the general population45 (24% of Indigenous Australians compared with 5% of non-Indigenous Australians), including 4 times as many who went without food when they couldn’t afford more. This food insufficiency was most prevalent in the Northern Territory (with 45% running out of food), followed by South Australia (29%) and Western Australia (26%). Queensland and Victoria were 21%; Tasmania and ACT together were 19% and NSW 18%. Remote areas had a higher prevalence of food insufficiency (36%) than non-remote areas (20%). Aboriginality as a risk factor for food insecurity is echoed in other studies.46

3.6 AGE AND GENDER

Sixty four percent of food insecure households in the NSW/ACT sample were represented in the survey by women. The age of respondents was relatively young with 79% of food insecure respondents being 49 years of age or younger (Table 1).

**TABLE 1: AGE GROUPINGS OF FOOD INSECURE RESPONDENTS**

<table>
<thead>
<tr>
<th>NSW/ACT Food Insecure Households</th>
</tr>
</thead>
<tbody>
<tr>
<td>NUMBER</td>
</tr>
<tr>
<td>LESS THAN 20 YRS</td>
</tr>
<tr>
<td>20-29 YRS</td>
</tr>
<tr>
<td>30-39 YRS</td>
</tr>
<tr>
<td>40-49 YRS</td>
</tr>
<tr>
<td>50-59 YRS</td>
</tr>
<tr>
<td>60-69 YRS</td>
</tr>
<tr>
<td>70-79 YRS</td>
</tr>
<tr>
<td>80+ YRS</td>
</tr>
<tr>
<td>TOTAL</td>
</tr>
</tbody>
</table>

3.7 SUMMARY OF FINDINGS

The NSW/ACT sample in the Anglicare Australia study indicates food insecure households have demographic characteristics that are reflected in other studies. A critical factor is having a low income – and in this sample of food insecure households more than two thirds of respondents live in households with an income of less than $1,000 per fortnight. This reflects the welfare dependency of the sample and the inadequacy of some Government payments such as the Newstart Allowance. Most food insecure households are renting and those in the private rental market are very vulnerable to rental stress. Other characteristics which are more likely among food insecure households include being homeless, being a sole parent or being Indigenous.
Community agencies have spent a number of years observing the challenges faced by people who are food insecure. This chapter outlines the levels of food insecurity found among the NSW/ACT sample for both adults and children. Subsequent chapters then explore the choices which people are forced to make when they find themselves food insecure.

4.1 Levels of Adult Food Insecurity

In order to measure the breadth and depth of food insecurity experienced by the respondents and their households, a number of scales were developed using questions from the HFSSM. Separate scales were developed for adults and children to measure:

- The severity of food insecurity (based on the number of different manifestations of food insecurity that were experienced) and
- The frequency of food insecurity (based on how often these experiences were occurring).

Using the core HFSSM measure outlined in the Methodology section of this report, the severity of a household’s food insecurity can be categorised as:

- Food secure
- Food insecure
- Severely food insecure.

Households falling into the more severe categories of food insecurity not only answer positively to more questions, they tend also to give positive answers to the questions regarding more intense or severe experiences of food insecurity.

The severity of food insecurity was ascertained by counting the number of HFSSM questions that received a positive response (Table 2). Separate scales were derived for adults and children in the participating households.

### Table 2: Determining Severity Levels of Food Insecurity

<table>
<thead>
<tr>
<th>Severity Level</th>
<th>Adult Measure</th>
<th>Child Measure</th>
</tr>
</thead>
<tbody>
<tr>
<td>Food Secure</td>
<td>Positive responses to 0-1 adult questions</td>
<td>Positive responses to 0-1 child questions</td>
</tr>
<tr>
<td>Food Insecure</td>
<td>Positive responses to 2-5 adult questions</td>
<td>Positive responses to 2-4 child questions</td>
</tr>
<tr>
<td>Severely Food Insecure</td>
<td>Positive responses to 6 or more adult questions</td>
<td>Positive responses to 5 or more child questions</td>
</tr>
</tbody>
</table>

The nine questions which make up the Adult FSSM scale and the resulting frequencies among respondents from NSW/ACT are provided in Table 3.

### Table 3: Responses to the Adult HFSSM Questions

<table>
<thead>
<tr>
<th>NSW/ACT Food Insecure Households</th>
<th>In the Previous 3 Months...</th>
<th>Once or More Often</th>
<th>Never Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. We worried whether our food would run out before we got money to buy more</td>
<td>95%</td>
<td>5%</td>
<td>100%</td>
</tr>
<tr>
<td>2. The food we bought just didn’t last and we didn’t have money to buy more</td>
<td>95%</td>
<td>5%</td>
<td>100%</td>
</tr>
<tr>
<td>3. We couldn’t afford to eat the variety of food we should have</td>
<td>94%</td>
<td>6%</td>
<td>100%</td>
</tr>
<tr>
<td>4. How often did you (or other adults) cut the size of your meals?</td>
<td>89%</td>
<td>11%</td>
<td>100%</td>
</tr>
<tr>
<td>5. How often did you (or other adults) skip meals?</td>
<td>82%</td>
<td>18%</td>
<td>100%</td>
</tr>
<tr>
<td>6. How often did you (or other adults) eat less than you felt you should?</td>
<td>89%</td>
<td>11%</td>
<td>100%</td>
</tr>
<tr>
<td>7. How often were you (or other adults) hungry but didn’t eat?</td>
<td>77%</td>
<td>23%</td>
<td>100%</td>
</tr>
<tr>
<td>8. How often did you (or other adults) not eat for a whole day?</td>
<td>55%</td>
<td>45%</td>
<td>100%</td>
</tr>
<tr>
<td>9. Have you (or other adults) lost weight because you didn’t have enough money for food?</td>
<td>56%*</td>
<td>44%**</td>
<td>100%</td>
</tr>
</tbody>
</table>

* = “Yes”  ** = “No”

d. The “food secure” category includes people who are “marginally food secure”, i.e., people who are generally food secure but have experienced one aspect of food insecurity in the previous 3 months. It should be noted that people who are marginally food secure often experience a poor quality of life which is similar to food insecure households. D’Coster - Janes (2010).

e. Two respondents did not complete a sufficient number of adult questions to receive a food insecurity severity score.

The food insecurity severity scale for adults was calculated from the responses of the 169 respondents who completed the adult food security questions. In NSW/ACT 98.8% of respondents were food insecure and 82.2% were severely food insecure (See Figure 3).

### Figure 3: Severity of Food Insecurity

NSW/ACT Food Insecure Households
4. SEVERITY AND RECURRENCE OF FOOD INSECURITY

In particular, NSW/ACT respondents were significantly more likely to have experienced the following once or more often in the last three months:
1. Cutting the size of meals (89% for NSW/ACT compared with 80% for the rest of Australia excluding NSW/ACT).
2. Skipping meals (82% for NSW/ACT compared with 74% for the rest of Australia, excluding NSW/ACT).

In addition, more food insecure people lost weight in the last three months as a result of food insecurity in NSW/ACT (56%) when compared with the rest of Australia sample (46%).

4.2 FREQUENCY OF ADULT FOOD INSECURITY

Within the survey both the HFSSM tool and the National Health Survey question measured how frequently respondents experienced the phenomenon. The positive responses to the HFSSM discussed above can be further analysed by identifying situations where the phenomenon in question occurred:
- Only in one or two weeks during the 3 month period;
- Some weeks but not every week during the 3 month period;
- Almost every week during the 3 month period.

By combining these responses with the severity levels identified above, a second scale was developed to show the frequency of food insecurity among respondents.

Eight of the adult HFSSM questions include data on frequency. For seven of these questions, between a third and a half of NSW/ACT respondents were experiencing these aspects of food insecurity chronically i.e. almost every week during the previous 3 months (Table 4).

Adding the first and second columns together in Table 4 shows those respondents who suffered recurrent food insecurity, at least some weeks during the survey period. Recurrent food insecurity is shown by:
- 87% of respondents who worried that food would run out and there would not be sufficient money to buy more
- More than three quarters of households (78%) that ran out of food and were not able to buy more
- Four out of five households (81%) that experienced a lack of variety of food
- Adults in 82% of households who were cutting the size of meals and adults in 68% of households who were skipping meals
- 79% of respondents who indicated that adults in their household were eating less than they felt they should
- 68% of households where adults were going hungry but didn’t eat
- More than one third of households (40%) where adults regularly did not eat for a whole day.

4.3 SEVERITY OF CHILD FOOD INSECURITY

Of the 171 respondents to the adult survey, 99 had children present in their household at least part of the time. This represented 238 children, 195 of whom were living in the respondents’ homes permanently or most of the time and 43 of whom were living with respondents some of the time (e.g. in shared custody).

The severity and frequency of food insecurity among these children under 18 years of age has been calculated using seven child specific FSSM questions, representing a response rate of 83% of households with children.

Analysis of the child specific FSSM questions revealed that more than three quarters of the children in the sample (78%) were food insecure and more than one third (35%) were severely food insecure. In terms of the number of children in the sample:
- 48 children (22%) were food secure
- 92 children (43%) were food insecure
- 74 children (35%) were severely food insecure.

Table 5 illustrates these findings.
4. SEVERITY AND RECURRENCE OF FOOD INSECURITY

Table 5 shows that some children experienced aspects of food insecurity on a recurrent basis (i.e. 'weekly' or 'some weeks' over a three month period). Recurrent food insecurity among children was shown by:

- 69% of households with children reported feeding their children low cost food to make their budget go further
- 60% of households with children reported that their children did not have a sufficient variety of food. Parents choose instead to bulk up the family meals by supplementing with cheaper carbohydrates such as pasta, rice and potatoes rather than fresh meat, fruit and vegetables
- Almost one third of households with children (31%) reported their children not eating enough and 30% experiencing reduced meal portions because there wasn’t enough food in the household
  - Almost one in four households with children (24%) have children who were often going hungry,
  - In the worst case scenario, children were forced to skip meals in 14% of households and in 7% of households children often went whole days without food.

For children the findings were very concerning. Three out of four children lived in a food insecure household. In 14% of households children were forced to skip meals and in more than one quarter of cases (25%) children were forced to go hungry on a recurrent basis. In the worst case scenario, in 7% households, children did not eat for a whole day at least during some weeks.

4.4 SUMMARY OF FINDINGS

Using scales developed from the adapted HFSSM survey tool for the 171 NSW/ACT respondents, 98.8% of the sample was food insecure and 82.2% of respondents were severely food insecure. These levels were significantly higher than for the rest of the Anglicare Australia sample. Not was this a one off occurrence. At least some weeks during the survey period households reported worrying about running out of food (87%); actually running out of food (78%); cutting the size of meals (82%) or skipping meals entirely (68%). In some cases (68%) adults were hungry but did not eat because there was insufficient food and 40% regularly did not eat for a whole day.

“I just go without. As long as the kids have got theirs, that’s the main thing.”
5.1. WHAT CONSTRAINS CHOICE?

Poverty studies have shown that food is often the only discretionary item in the budget of low-income households and therefore prone to erosion by more pressing expenses. This situation can occur despite careful planning.

Lived poverty is a precarious existence where one small event can place a household into crisis. Emergency relief services are designed to function as a short-term support in a time of crisis. Generally this is understood as one small event can place a household into a state of crisis. These events are significant because low income households do not have resources to draw upon. Savings are low or non-existent and households tend to live from week to week trying to make ends meet.

The Anglicare study and other literature indicate there are a number of factors which force people to make hard choices in relation to food. Three of the most common are a lack of income, the cost of transport and the cooking and storage of food.

5.1.1 Income Inadequacy

As discussed previously, low income limits choice and forces people into making difficult choices. In the Anglicare Australia study, clients from NSW/ACT experienced significant levels of food insufficiency, which were largely due to economic circumstances and income inadequacy. Indeed 95% of all food insecure respondents indicated that they had run out of food in the last 12 months because they could not afford to buy more. This was significantly more than the average across the whole national sample (88%). For one in four respondents (24.8%) this was a weekly occurrence (Table 6).

90% did not have enough money to buy the food they needed

In subsequent questions it was also evident that a lack of income was a key element in accessing food. In fact 90% of all food insecure adults indicated that they did not have enough money to buy the food they needed and for just over half (55%) this was a problem because there was no one in the household with whom they could share costs.

In the Anglicare survey respondents were asked to consider the reason for their household’s food insecurity. The issues of major concern were the price of food and the lack of income. This was compromised by costs for rent, electricity and bills in general and the lack of money to make ends meet.

5.1.2 Transport Issues

In order to ascertain if physical access to food was an issue for them, respondents in the Anglicare study were asked about the time it takes them to get to the shops, their chief mode of transport and other questions in relation to access.

The survey found that some 44% of food insecure respondents in NSW/ACT lived within a short distance of the place they went to buy groceries, traveling for up to 10 minutes to get to the local shops. However 12% of respondents (n=20) travelled for over half an hour to an hour to get to the shops, and a small percentage (4%, n=7) travelled for at least an hour or more to get to the shops. Most of these

TABLE 6: HOW OFTEN DID YOU RUN OUT OF FOOD AND COULDN’T AFFORD TO BUY MORE? NSW/ACT Food Insecure Households

<table>
<thead>
<tr>
<th>NUMBER</th>
<th>PERCENT</th>
</tr>
</thead>
<tbody>
<tr>
<td>ONCE A WEEK OR MORE</td>
<td>39</td>
</tr>
<tr>
<td>ONCE EVERY TWO WEEKS</td>
<td>39</td>
</tr>
<tr>
<td>ONCE A MONTH</td>
<td>41</td>
</tr>
<tr>
<td>LESS THAN ONCE A MONTH</td>
<td>38</td>
</tr>
<tr>
<td>TOTAL</td>
<td>157</td>
</tr>
</tbody>
</table>

Respondents were also asked to consider the adequacy of their income. More than half (61%) of all food insecure respondents considered that their household did not have enough to get by on. Only 4% considered that there was sufficient income to get by on and provide a few extras.
5. HARD CHOICES AND FOOD

Respondents felt that not having access to a car had contributed to their food insecurity. Respondents were also asked which mode of transport they generally used to access the local shops. Just under half (46%) drove their own car and 44% walked at least some of the way to get to the shops. Almost one in four (23%) relied on public transport. A small proportion of clients used other transport options instead of, or in addition to, public transport or walking. These included using a bicycle (1%), getting a lift from a family member or friend (3%), borrowing someone’s car (1%) or catching a taxi (2%).

A subsequent question found that one in three respondents (34%) indicated that they had difficulty accessing shops because of health and mobility problems. Questions were also asked in relation to transport access; the findings indicate that there are also physical access issues:

- One in five respondents (22%) considered that public transport was inadequate and unreliable
- More than one third (37%) identified that not having access to a car for shopping worsened their food situation
- 41% felt that transport was too expensive

The literature is divided regarding the impact that distance to shops and transport availability has on a household’s food security. Undoubtedly however location can play a part in exacerbating food insecurity and lead to difficult choices in order to be able to cope. Fewer supermarkets spaced further apart in low income areas is a particular problem for car-less, low income households in areas with poor local public transport. For instance, whilst a food supply outlet may be within reasonable driving distance, there is only so much that a single mother with small children and without a car can carry home on the bus. This complication can also prevent people without cars from buying food in bulk, as the volume can make the shopping bag too heavy to carry a distance. Furthermore, although cheaper per unit, the overall price can be significant and other things may have to be foregone.

44% If I have a seizure, I can’t go out. It’s hard to take all the shopping on your own.
Have to buy small amounts due to living situation, can’t bulk shop.
Ride bike everywhere - difficult to carry groceries.  

Other Australian studies have identified lack of access to food outlets in disadvantaged areas. In its 2005 food security report, the City of Port Phillip in Victoria observed that the lack of low cost food outlets located within easy walking or close to public transport was an issue for many vulnerable and low income residents. O’Dwyer and Convery’s 2006 research identified the presence of food ‘deserts’ in Adelaide, where there was poor access to supermarkets due to distance (less supermarkets were found in the lower socioeconomic suburbs) and low car ownership.  

5.1.3 Cooking and Food Storage Access

Another issue which constrains choice is access to appropriate cooking and food preparation facilities. Some low cost accommodation, especially hostels and boarding houses, may not provide all the facilities necessary for cooking and have limited secure storage for food. Limited fridge and freezer space can also restrict the amount of cheaper bulk items that can be bought. Furthermore, when a fridge breaks down, food will not only be lost but there may not be enough cash on hand to replace this essential item. Eating low-cost, healthy meals is the most difficult for homeless people without any space in which to cook or store food. Housing overcrowding and inadequate cooking facilities have also been cited as factors contributing to food insecurity in some Indigenous communities.  

In the Anglicare Australia study these issues were evident. Almost one in ten food insecure clients in the NSW/ACT sample did not have a fridge (9%), 11% did not have a working stove, oven or microwave and 7% did not have the power evident. Almost one in four respondents (23%) health and mobility problems reduced their capacity to be able to cook for themselves.

44% Being a diabetic and heart condition have to buy more expensive food. Some nights can’t cook due to pain.
Disease in spine and leg makes it hard to stand - recent fall at a bus stand.

5.2. WHAT CHOICES ARE BEING MADE ABOUT FOOD?

People living on the margins with significant levels of food insecurity are forced to make difficult choices about food. This can range from choosing poorer quality food, protecting children by going hungry and accessing emergency food relief outlets, to changed cooking and shopping strategies. In the most extreme cases, people go hungry, skip meals or obtain food in socially unacceptable ways such as stealing.

5.2.1 Choosing Poorer Quality Food

Food insecurity is not just about accessing sufficient food but also being able to access food of an appropriate quality. More than half of the survey respondents (58%) indicated that on a weekly basis they had not been able to eat the kinds of food they wanted to, and for a further 21% this occurred at least once a fortnight (Table 7).

| TABLE 7: HOW OFTEN COULD YOU NOT EAT THE KINDS OF FOOD YOU WANTED TO? NSW/ACT Food Insecure Households |
|---|---|---|
| **NUMBER** | **PERCENT** |
| **ONCE A WEEK OR MORE** | 79 | 58.1% |
| **ONCE EVERY TWO WEEKS** | 28 | 20.6% |
| **ONCE A MONTH** | 19 | 14.0% |
| **LESS THAN ONE MONTH** | 10 | 7.4% |
| **TOTAL** | 136 | 100.0% |

In subsequent questions a third of NSW/ACT respondents indicated that it was difficult to access food of the right quality (31%) and for 43% they could not get a variety of foods.
5. HARD CHOICES AND FOOD

such as meat, vegetables, fruit, dairy products and bread. Respondents commented on the issues around having the same sort of meals every week:

Web three meals but we have them twice a week. The kids will say 'not again!' and I'll have to explain to them that things are expensive now. I had my business before. We always had a variety of foods. Our shopping bill used to be $300 per week. You’ve got to find cheap food now; it’s the same food you’ve got to eat [over and over again]!

Various overseas studies indicate that low-income families who have a less nutritious diet are aware that they are not eating well, however they cannot afford more healthy food, such as fresh fruit and vegetables. This was also found in the Anglicare Australia study where 68% of respondents felt they should eat more fresh foods but that these were too expensive. For 17% there was an acknowledgement that they needed to know more about making healthier meals.

Respondents were also asked about special dietary needs and how these were met. Over one third (40%) indicated that they needed special foods but could not purchase them because of the expense. Some clients commented:

I’m a diabetic and supposed to eat 6 meals a day with carbs and most nights I put meat and chips on the table ‘cause that’s all I can afford. Diabetic... Supposed to eat certain yoghurt but not cheap.

For a small number (10%), reflecting the lack of ethnic diversity in the client profile, there was difficulty in accessing culturally appropriate food. As one respondent commented:

can’t buy cultural foods with food vouchers.

In the open ended questions there were concerns around the price of meat, fresh fruit and vegetables and the need to substitute with cheap filling food, often not nutritious and high in carbohydrates. There was also concern about the sameness of the food which households had to eat on a regular basis, as evidenced by the following comments:

I can eat porridge 24 hours a day if I have to. A lot of people around here live on cereal and milk... My kids love corn, so sometimes I’ve just given them that for dinner. Cereal-sometimes that has become dinner for a night... until pay day. We buy a bag of potatoes to live on until there’s money for food.

Choosing low cost, poorer quality and high carbohydrate food to bulk out family meals is well recognised in the literature as a coping strategy for families on low incomes. A study in New Zealand by Wang et al found the ‘healthy’ foods were always more expensive than the ‘regular’ alternatives in both urban and rural outlets. Wang et al argue that the high cost of healthy alternatives, particularly of less processed foods and foods that are low in sugar, are more likely to prevent people from adopting healthier diets and preventing early onset diabetes.

It should be noted that these choices are often influenced by the timing of the receipt of income. When funds are received households tend to buy more variety and more nutritious foods but as the period lengthens to receipt of the next instalment of income less nutritious foods are substituted and food supplies are stretched.

US research suggests that changes in financial resources throughout the month, either because of the timing of income or assistance, can result in the change in type and quantity of food available. This is consistent with comments received as part of the Anglicare research:

Just rationing. Knowing that I’ve got 4 days before I get paid and spreading what food I have over the days I have to wait (like plain pasta) just so I have food in my stomach every day. My main strategy is to do my shopping on the Monday and Tuesday straight after my pay... that way if we run out I know there’s food in the cupboard... (it’s harder when daughter comes for access visits).

As the situation becomes more severe, the food intake of adults is reduced and adults experience hunger, but they spare the children this experience. In [the most severe stage], children also suffer reduced food intake and hunger and adults’ reductions in food intake are more dramatic.

As in international studies:

This trend was also seen within the NSW/ACT sample of the national study. The majority of respondents living with children (63.2%) were living in households where children fell into a less severe food insecurity category than the adults. Just over one third (34.4%) of respondents were living in households where children and adults fell into the same food insecurity severity category (Table 8).

5.2.2 Going Hungry to Protect Children

Perhaps the hardest choice is that faced by parents who desperately try and protect their children from the worst forms of food insecurity by going without food themselves so that their children can eat. This trend has been recognised in international studies:

### TABLE 8: SEVERITY OF ADULT AND CHILD FOOD INSECURITY, HOUSEHOLDS WITH CHILDREN

<table>
<thead>
<tr>
<th>NSW/ACT Food Insecure Households</th>
<th>ADULTS: FOOD INSECURITY SEVERITY</th>
<th>KEY:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>FOOD SECURE</td>
<td>FOOD INSECURE</td>
</tr>
<tr>
<td>Households where child food insecurity is less severe than adult food insecurity</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Households where child food insecurity and adult food insecurity are equally severe</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Households where child food insecurity is more severe than adult food insecurity</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

#### Total for children

FOOD SECURE FOOD INSECURE SEVERELY FOOD INSECURE TOTAL

FOOD SECURE 0.0% 6.9% 16.1% 23.0%

FOOD INSECURE 0.0% 8.0% 40.2% 48.3%

SEVERELY FOOD INSECURE 0.0% 2.3% 26.4% 28.7%

TOTAL 0.0% 17.2% 82.8% 100.0%
5. HARD CHOICES AND FOOD

In the open ended questions parents also indicated the choices they made when endeavouring to protect their children from the worst effects of not having enough food:

- “I just go without. As long as the kids have got theirs, that’s the main thing. Look after kids as number one priority. Always try to feed my daughter first. Have to make do with what you’ve got. Don’t worry me so much, it’s only making sure that I have enough for my kids, my own - plus the street kids.
- If your kids have got food you’re OK.
- The three adults might have less food on their plates so we always make sure the little one gets the nutrition she needs cause she’s growing.

5.2.3 Shopping Choices

In the open ended questions participants indicated that they chose to prepare well for their shopping trips by planning before they set out, by scouring catalogues, noting items on sale and writing a shopping list and not deviating from it. Some people sourced local markets and the larger chain supermarkets for fresh food and others spoke of buying hampers on sale.

- “We cannot always get fresh food and have to buy food that’s expired. Sometimes you get sick if the sale food is no good but you ‘learn your stomach’ to cope. Discovered that low fat [milk] lasts way beyond its use by date. It’s full cream milk that goes off. I buy low fat milk up to 15 days past its use by date. It can last up to 21 days.
- Rather than shop some people opted to try and grow their own:

   "...Growing a tomato plant that self seeded. Started training it with pickets I found lying around. Tomatoes are growing a bloody beauty - giving it away to neighbours. It’s a kilo every couple of days.
   - My pet aim is to grow native food and fruit/vegetables in a native corridor so homeless people can access it directly. Local councils should invest in community food cultivation in reserves."

5.2.4 Seeking Assistance

The literature indicates that a common choice for many is to seek assistance from ER outlets, community kitchens, family and friends. The Anglicare research supports this finding. In the last three months, 92% of households in the NSW/ACT sample had asked for food from an Emergency Relief (ER) centre and 29% indicated they had eaten somewhere that gave out free food.

92% of food insecure households sought help from Emergency Relief

Nor was this assistance limited to community agencies. A number of people (50%) had chosen to seek help from family and 41% had also sought the assistance of neighbours and friends. Participants reported that parents and siblings had come to their assistance either through monetary assistance or provision of meals to share.

5.2.5 Desperate Choices

One of the most common coping strategies was simply going without food – 69% of all food insecure adults indicated that this had occurred in the last three months. Portion control, was sometimes used in varying degrees of severity. Some comments received were as follows:

- “Make meals that little bit smaller so I am not using as much.
- Make food to last 2 or 3 days.
- I drink coffee to reduce my appetite.
- Sleep longer to skip breakfast.

Some families commented that when food ran really short they would send their children to stay with friends or relatives:

- “We get rid of the kids... ask my son to go to a mate’s place for a weekend to eat there. He understands the situation. He will ask and I’ll say can you nick off and come back after the weekend?... the 6 year old doesn’t understand but she’ll go and stay with my mum for a few days and me and my hubby will stay home and eat toast and sandwiches. We’ve got loads of bread in the freezer. We’ve started having to do this since the last year.

Other more desperate strategies involved scavenger schemes such as collection and sale of bottles and cans for recycling used to bolster the household income. Some turned to busking, which was described by one participant as being ‘one step up from begging’. A few mentioned going through bins and stealing food:

- “Start[ed] stealing to survive. I feel like running into Woolies, grabbing a trolley and running out. I haven’t done it but..."
I don’t want to be locked away from the kids. Then the kids will struggle more. It can make you feel desperate so you do desperate things... I know people who go out and steal... Once my landlord killed a sheep for us... Everything is on the verge of being disconnected. I have a padlock on the gate. If they can’t get in, they can’t do reads. I’ve got disconnection notices on everything. It’s like living in a jail. Have had to steal food (e.g. a pack of sausages)... Not proud of it. Ex wife is also stealing food. She has lost $200 payment for the 17 year old... hunger forces you to do things you don’t normally do... fear of getting caught. I pick up food off the street that’s discarded but is still OK. At times raided garbage bins. ALDI throw out heaps of stuff. Things are only 1 day old. I used to go out and raid and got good stuff...  

For some, one of the most important bills was that of electricity and there was a decided preference for using as little as possible. This rationing included not heating in winter but rugging up in warm clothes and retreating to bed early at night to stay warm.

5.2.6 Choosing between Food and other Essentials

People living the precarious existence of poverty need to juggle their budgets and make decisions around which bills to pay and which to extend. In the Anglicare study, two out of every three respondents in the NSW/ACT sample identified extending the due date of paying a bill (65%) and putting off paying a bill (67%). Some households bought food on credit (17%) and almost half (49%) had pawned or sold personal possessions in order to get money for food:

“... Took out a loan from Cash Converters. Live on credit card, pay off at tax time because partner’s tax pay off credit card. Living beyond means but what more can I do? "

Others would choose to just exclude from the budget such items as cigarettes and alcohol, junk food and treats, outings and recreational pursuits, and buying presents. They would also spend less on clothing which could be supplemented by buying from secondhand retail outlets.

5.3. SUMMARY OF FINDINGS

For people deeply entrenched in poverty and food insecure the choices they have in life are deeply constrained by their lack of income. This can lead to a precarious existence where one bill or life event can throw a household into crisis. What is evident from both the quantitative and qualitative data in this report is that such households make a number of rational choices in order to survive. These include budgeting, planning, putting off bills, extending the payment period for such bills, and seeking assistance form community agencies, family and friends. For some however, the measures chosen appear to be desperate – going hungry on a regular basis, pawning possessions, eating food that is expired, busking, shoplifting and sometimes stealing. The anxiety and stress which such uncertainty and difficult choices engenders is more fully explored in the next section.
Food insecurity and the consequent difficult choices this creates for both individuals and households affects nutritional status and health, which are contributing factors to wellbeing. Statistics Canada found that food insecure respondents were 3.2 times more likely to have experienced high levels of distress and were 3.7 times more likely to have reported symptoms suggesting a high probability of having had a major depressive episode in the previous year. Indeed food insecurity is known to lead to a range of social and emotional consequences including:

- worrying about the likelihood of going without food
- anxiety about not having enough food to show hospitality to friends and family
- anxiety amongst children
- feelings of deprivation
- a range of feelings associated with a lack of control over the food situation and the need to hide this (e.g., powerlessness, shame, inequality, exclusion, fear)
- coping strategies that may be considered socially unacceptable such as accessing emergency food relief, stealing, eating at soup kitchens, etc.

Respondents were given the opportunity in the Anglicare Australia study, via open ended questions, to give feedback on and impressions of the impact that food insecurity has had on themselves and their households. This section of the report details the accumulated responses for NSW and the ACT for the key impacts identified in the literature.

6.1 STRESS, ANGER AND ANXIETY

A number of respondents indicated the presence of stress and anxiety and, for some, this was overwhelming, sometimes leading to a sense of frustration. Anger was a recurring theme with people specifically using terms such as ‘angry’, ‘sad’, ‘cranky’, and ‘grumpy’ and feral along with references to fighting and arguments in the household as a result of being hungry:

‘Everyone gets irate, cranky with each other. Relationships are strained. It affects your life. You argue. It causes family breakdown.

It’s very stressful and upsetting. You feel like you’re stuck in a rut no matter what you do.

Stressful not knowing where next feed from or how you will get by until you can get to ER.

Get moody and angry, more depressed.

I just start growing at people.’

Some equated this stress with low energy and lethargy, others with family conflict, impaired capacity to think and function, and feelings of inadequacy. Several mentioned a sense of isolation and disconnection and others that the constant worry about accessing more food and how to access it was causing mental health issues:

‘Causes undue stress with my partner, [feel] cranky, lack of energy.

I don’t talk to others. It stresses me and my mental health goes down.’

In the open ended section of the survey parents made a number of comments which reflected their concern for their children, the stress this has created and the attempts being made to protect them from the worst impacts of food insecurity. Parental stress and anxiety over the lack of food in the household for their children was clearly evident. Also apparent was the overriding sense of guilt that some experienced over not being able to feed their children, leading to anger and frustration:

‘Worrying...stressful with kids... wondering if they’re getting enough.

It’s depressing... There’s nothing more depressing than not being able to feed your kids. You feel worthless as a parent. It’s the increasing prices of everything. You think, “sh*t, what kind of parent gives their kids cereal?”

Hurts to say no to the kids...

... feel embarrassed if teachers see the [kids] have unhealthy lunch(es).

It stresses me out when it happens and I cry. I think “God why can’t I have enough money for food?” It’s food, you know what I mean?”

Not to be able to feed your kid is unforgiveable. With kids it’s hard to explain to them: we’ve run out. It makes me want to burst into tears. It’s very hard.

Some respondents made comments in relation to depression, sadness, anger, loss of self worth, feelings of inadequacy and uselessness. Some referred to the food insecure experience as degrading, demoralising, devastating and disempowering. Others referred again to a sense of isolation and disconnection which appeared to be a self reinforcing cycle. For those who still had friends there was guilt that their friends had to help them out.

‘It’s quite depressing and humiliating and makes you feel like you fail at the most basic of needs. Just depression. Feel like you are not worth it. It’s depressing. Affects your social life. Frustrating, can get angry about it and not want to talk about it.

Feel sad. No one’s happy if there’s no food. We’re still under the lowest income - we can’t afford anything.

Less able to cope mentally and emotionally, lower self esteem, poor self image, definitely socially disadvantaged, spiritually confused.’

6.2 DEPRESSION AND SELF ESTEEM

Respondents made comments in relation to depression, sadness, anger, loss of self worth, feelings of inadequacy and uselessness. Some referred to the food insecure experience as degrading, demoralising, devastating and disempowering. Others referred again to a sense of isolation and disconnection which appeared to be a self reinforcing cycle. For those who still had friends there was guilt that their friends had to help them out.

‘Everyone gets irate, cranky with each other. Relationships are strained. It affects your life. You argue. It causes family breakdown.

It’s very stressful and upsetting. You feel like you’re stuck in a rut no matter what you do.

Stressful not knowing where next feed from or how you will get by until you can get to ER.

Get moody and angry, more depressed.

I just start growing at people.’

Some respondents specifically indicated feelings of shame and embarrassment as a result of food insecurity. For some this related to other people feeling sorry for them, shame at not being able to pay their way when they went out with friends or not being able to offer visitors a cup of coffee or biscuits. This in turn led to reduced social interactions and connections:

‘Can only go around to mate’s places so often. People looking down on you. For others accessing help from a service for food made them feel ashamed:

‘They don’t care that you’ve worked all your life and paid your taxes. Now you’re pigeonholed as scrounging off the government. I get help from friends but it’s embarrassing.’
6.4 COMPROMISED HEALTH

A number of respondents indicated that food insecurity had compromised their health. Specific health issues related to being diabetic and losing weight. A number spoke of being hungry and several described the feeling in some detail:

"I’m starving... get hunger pains."

You don’t have energy - you start getting stomach pains and you get to a point where you don’t feel like eating anymore because you become nauseous and stressed.

Health-wise, not having enough food in general, not being able to eat healthy food... missing out on meals is bad for your health. The more unhealthy foods are less expensive than the healthy foods. It you’re budgeting you have to buy unhealthy foods.

I’ve lost weight. I used to be 110kg, now I’m down to 85.

I’ve been losing weight from not having enough food.

I was a size 36 jeans, now I’m size 32.

Blood sugars and history of diabetes is a problem.

Some people on DSP [the Disability Support Pension] just live on chips and chocolate but get very sick - it’s cheap.

Bad because I feel sorry for my dad [father-in-law] because he has the insulin so he has to have food, sometimes I don’t do my kid’s food but I do his food.

As long as I have potatoes I can eat. Doctor wants fresh vegetables instead.

Respondents mentioned feeling tired, weary and lethargic, finding it difficult to get out of bed and get through the day’s chores, leading to a sense of depression, frustration, stress and hopelessness. Some maintained they needed to sleep more and others that hunger generated sleeplessness and disrupted sleeping patterns.

"You sleep a lot and you can’t do anything. Your life is hopeless. You don’t feel like showering.

It affects my motivation, my concentration and energy-wise on a daily basis. Not being able to do everything that I’d like to do in that day."

6.5 IMPACTS ON CHILDREN

The vulnerability of households with children to food insecurity has been documented in international studies. The risks for such children have been well documented. Children who live in food insecure households and are themselves food insecure are at risk and vulnerable to a broad range of significant and sometimes long lasting consequences. The US-based Center on Hunger and Poverty cites numerous studies that point to such consequences which include both psychological and behavioural impacts expressed through higher levels of aggression, hyperactivity and anxiety as well as passivity. Such children often have difficulties getting along with their peers and have an increased need to access mental health services. However the consequences of food insecurity for such children are not limited to these areas alone. There can be a lifelong impact on learning and education as shown by impaired cognitive functioning and diminished capacity to learn, lower school test scores and poorer overall academic achievement, repeating grades in school, truancy, tardiness and school suspension.

In the open ended responses participants commented on the perceived impacts of food insecurity on their children, particularly on their capacity to concentrate, their relationship with peers and evident anger and stress.

"The kids can’t concentrate on education when they don’t have enough to eat. Sometimes they go in the morning without breakfast. It affects them when they see other kids that have so much. It makes them feel worthless. Because we have medical issues are the children supposed to suffer as well? The children become very angry.

Kids embarrassed... different to other kids.

Kids see others have more and judge home... Difficult as a parent.

Affects my child’s feeling of being cosy - when she looks in the cupboard and nothing is there. End up with cravings for junk food.

Caused my daughter to attempt to commit suicide, frustrated that no one could or would help us."

6.6 SUMMARY OF FINDINGS

Never being sure of where to find the next meal or not being sure if the family will be fed adequately for the rest of the week clearly generates stress, anger and anxiety, which is well documented in both the literature and in the responses in the open ended section of the survey. Respondents indicated a range of emotions including anger and frustration, depression and low self esteem, and shame and embarrassment over their circumstances. There was clear evidence of compromised health, lethargy and a sense of hopelessness. The perceived impacts on children were concerning as they included reduced capacity to learn at school, going to school hungry, being embarrassed and angry in front of peers and being unwilling to invite friends home after school. For some people all these factors led to a sense of disconnection from both family and friends along with a sense of isolation and exclusion.
Policies that could make a difference

Food insecurity is an issue that needs to be tackled at a number of policy levels. Such policies need to provide better options for people which will prevent the need to make the kind of hard choices outlined in this research.

7.1 Food Specific Policies

A number of strategies to address food issues are being employed locally around Australia by state government, community groups, area health services, local councils and other agencies to improve the access to and supply of food in the local area. Some of these initiatives are being delivered in collaborative partnerships with businesses and the local community. Power discusses the two main approaches to redressing food insecurity - poverty elimination (anti-poverty or social justice approach) and making food systems sustainable (sustainable food systems approach).66 She further catalogues the two main approaches to redressing food insecurity - poverty elimination (anti-poverty or social justice approach) and making food systems sustainable (sustainable food systems approach).66

There have been a number of other food policies and/or strategies developed at Federal, State and local levels and these include:67

- The National Aboriginal and Torres Strait Islander Nutrition Strategy and Action Plan 2000-2010 (NATSINSAP): a COAG strategy, which included improving standards in remote community stores, as well as nutritional education and other local actions in remote Aboriginal communities. This strategy unfortunately does not assist the many urban Indigenous Australians at risk of food insecurity.
- Victorian Food for All, including subsidies and information for local councils to implement local food policies.
- Eat Well Australia policy, which finished in 2010, and individual State/Territory Eat Well policies.
- Shared disaster management and resilience and critical infrastructure development arrangements.
- Food chain information sharing and development.
- Regular healthy food basket price monitoring, as is conducted in Queensland68 and more recently in Victoria.
- Dietary recommendations which include low cost meals for economically disadvantaged households, as recommended by the Public Health Association of Australia (PHAA).69
- Funding for local initiatives that address issues specific to the local area. The Victorian Government’s Food for All policy provides such funding to local governments.
- However a coordinated and systematic approach needs to be developed across all jurisdictions to ensure food policies are implemented in all disadvantaged communities.

7.2 Monitoring Food Insecurity at a State and Territory Level

After years of advocacy by nutrition peak bodies and researchers, food security is once again being measured in the general population, as well as in the Indigenous population. Results of the Australian Health Survey, incorporating the National Nutrition and Physical Activity Survey, will be available mid 2013 and mid 2014 for the general and Indigenous populations.

A number of bodies70 have advocated for monitoring of food security in the general population by utilising:

- A short food insufficiency question71
- A separate question on separate coping strategies that incorporates cutting or skipping meals and reducing the variety of food.72
- More in depth measurement of food security for disadvantaged groups73
- Food price and supply surveys in urban and rural areas.74

Given the issues for low income, food insecure households as shown by this report it is imperative that regular monitoring of food insecurity occur across both NSW and the ACT.

7.3 Community Infrastructure

Infrastructure can be developed and supported by State or Territory Governments or local councils to enhance local food security, including:

- Land zoning to reserve arable land for food production.
- Planning new housing developments which incorporate supermarkets or other food outlets within walking distance, public transport routes to shops and a density level to enable food outlets to remain economically viable.
- Offering free or low-cost community transport to major food outlets and/or encouraging outlets to provide transport or home delivery.
- Inspecting the adequacy of food preparation and storage facilities at boarding houses, caravan parks, refuges and low cost temporary accommodation.
- Allowing community open spaces to become productive food growing areas, including incorporating community gardening and edible landscapes.

Many of the interventions relating to transport and placement of groceries aim to redress...
considerations when developing food policies. These strategies are also important to change the behaviour and accessibility of stores in food deserts have also been found to help alleviate spatial accessibility problems... Food intervention programs in food deserts may help alleviate spatial accessibility problems... Food intervention programs that encourage supermarkets to place new stores in food deserts have also been found to change the behaviour and accessibility of residents in those areas.

These strategies are also important considerations when developing food policies.

**7.4 EMERGENCY RELIEF**

The provision of food provides immediate emergency relief to food insecure households. In NSW and the ACT there are a number of such programs in operation at a local level, developed to mitigate the worst effects of food insecurity in communities. Indeed the Anglicare Australia study explored food insecurity, primarily through the many local emergency relief programs operating across the Anglicare network. Emergency Relief can take the form of food, grocery vouchers, payment of medications, contribution towards utility bills, assistance with housing and moving costs, and other forms of material aid. At times this is combined with further support such as financial counselling, no-interest loans, case management, brokerage, advocacy and a range of other support services. Provision of food can be an incentive for clients to connect to the service system and receive a deeper level of support that addresses not just the lack of food but some of the more complex underlying issues.

The provision of emergency food relief occurs on a daily basis around Australia. In 2010-11 approximately 700 community organisations, operating 1350 outlets, provided FaHCSIA-funded Emergency Relief. Emergency Relief was provided on 324,000 occasions in 2009-10. Food is a commonly provided form of assistance by ER centres. Agencies report increasing demand on an annual basis but do not receive a concomitant increase in funding to meet this increasing need.

Consequently, there is a need for increased support for agencies which provide emergency food relief. Further research and evaluation of outcomes for food insecure clients are also required as a matter of priority. Such initiatives should focus on food insecurity risks, food consumption patterns among disadvantaged groups, and the effectiveness of existing measures designed to mitigate food insecurity.

**RECOMMENDATIONS**

7. The NSW and ACT Governments increase financial support to agencies delivering food relief to low income households in Australia.

**7.5 CASE MANAGEMENT**

The people who seek assistance from ER services are among the most socially excluded households in the nation - a social exclusion that is represented by complex, multiple and diverse disadvantage. It is a recognition of the deep and entrenched nature of social exclusion and its multi causal and interacting nature that has led some Anglicare agencies to pilot intensive case management for people experiencing complex and multiple issues. ANGLICARE Sydney conducted such a pilot in its Wollongong ER service in 2010, based on three fundamental premises.

- **Efficacy:** Case management was anticipated to provide the person seeking assistance with more control over decision-making and the opportunity to develop reasonable and feasible personal goals. Each client would assist in the development of an individualised case plan to address their specific needs through the identification of their strengths and existing resources, which would be leveraged into strategies to resolve their presenting crisis and other underlying issues. It was expected that this strategy would increase levels of client engagement and ownership with the case plan.

- **Resilience:** People experiencing recurrent crises in their lives may struggle to do more than just meet their immediate needs for food, shelter and paying bills, which can leave them feeling anxious and hopeless about the future. Case management is aimed at breaking the cycle of recurrent crises by improving the living skills, resilience and wellbeing of the person accessing the service in an environment of emotional support, trust and Christian care.

- **Inclusion:** Given the case manager had significant access to service network information and would follow up on referrals using a ‘warm’ referral process, it was anticipated that case management would improve service access and engagement for the individual, build wellbeing and resilience, improve individual relationships with family members, and enhance their capacity to participate in the local community.

The evaluation carried out on the pilot and completed in 2012 demonstrated benefits across all these domains for clients and recommended continuation and expansion of the pilot across other ER sites. However the development of case management pilots has been funded by the NGO sector, not by government, and financial support is required if these innovative models of care are to be expanded.

**RECOMMENDATIONS**

8. The NSW and ACT Governments provide financial incentives to community agencies for the development of innovative service models, which are both long term and address multi causal, compounding and complex issues.
7.6 INADEQUACY OF NEWSTART

A particular concern in the national Anglicare Australia study was the number of food insecure households reliant upon the Newstart Allowance (30%). In the NSW and ACT sample a similar percentage (33%) was also reliant. It should be noted that income support payments have generally failed to keep pace with wages growth. This is especially true for payments such as the Newstart and Youth Allowances:

In most cases, out-of-work income as a proportion of in-work income has fallen, in part due to allowance rates failing to keep pace with wage growth. Only lone parents, whose income support is tied to an average earnings measure and who benefitted from more generous family benefits, were excepted. The flattening of the personal income tax system in the mid-2000s (e.g. through increases to the top threshold) contributed to a reduced capacity of redistribution.78

The gap between Newstart and the Disability Support and Aged Pensions has been increasing since 1997. This disparity is caused by the current system of indexation which benchmarks pensions to 25% of Male Total Average Weekly Earnings (MTAWE) and Newstart which is indexed to the Consumer Price Index. Wages have grown strongly in recent years while inflationary pressures have not been significant – causing the gap between pensions and Newstart to widen. Currently Newstart is below 50% of the median income poverty threshold.79 The Newstart Allowance is now so low that the OECD in a 2010 report recommended that it needed to be increased. Measures of relative poverty ... indicate that the Newstart Allowance should be raised...

to provide a more adequate level of income support.80 While the 2012 Senate inquiry into Newstart did not recommend raising the base rate they did recognise that the current level was seriously inadequate.

Anglicare believes that the levels of Newstart are now so low that it has become a significant contributor to poverty, financial hardship, food insecurity and social exclusion.

The relatively low rate of the Newstart Allowance, especially in the first year of unemployment: ‘raises issues about its effectiveness in providing sufficient support for those experiencing a job loss, or enabling someone to look for a suitable job’.81 Children are particularly impacted by food insecurity as evidenced in the Anglicare Australia study. Forcing single mothers with dependent children onto the Newstart Allowance, once their youngest child turns 8 years old, without complementary child care support arrangements and benefits, has pitched these households with children into deeper food insecurity and financial hardship. The NSW and ACT Governments need to actively lobby the Federal Government to constitute an independent body to regularly review the adequacy of all government funded allowances to ensure that payments are sufficiently indexed to increase the capacity of individuals to enter or re-enter the workforce.

10. The NSW and ACT Governments lobby the Federal Government to repeal section 1 of the Social Security Amendment (Fair Incentives to Work) Bill 2012, which has removed access to the Parenting Payment (single) for single parents whose youngest child turns 8 years old.

11. The NSW and ACT Governments lobby the Federal Government to increase the Newstart Allowance (NSA) and other allowance payments for single persons by at least $50 per week, as per the recommendations of the Henry Taxation Review and consistent with the previous increases to DSP and the Aged Pension in 2008.

7.6 HOUSING

Anglicare research indicates that a significant number of households who are food insecure are also housing insecure (12%). Furthermore, a significant number of food insecure households in this study also experience rental stress. The 2012 Anglicare Australia’s Rental Affordability Snapshot82 revealed that a single person receiving the Newstart Allowance, Youth Allowance or Austudy would have found no rental options in most capital cities. Surprisingly, a single person earning the minimum wage would have still encountered limited housing options in nearly all capital cities. In contrast, families with children who were reliant upon government benefits also had significantly reduced options that mostly ranged from between 0% and 2% of available rental housing stock in each capital city. Consequently, only families earning a double
minimum wage were generally found to be in a position to secure suitable housing, although these results were wildly varied across capital cities. Rental affordability is as much a regional issue as an urban one, as it has the potential to affect a household’s capacity to absorb cost of living pressures, and ultimately, to overcome long term disadvantage and participate fully in employment, education and/or community life.

It is evident that there is an urgent need for the NSW and ACT Governments to increase the supply of either affordable, supported or public housing to reduce the rental stress and housing insecurity experienced by low income households. Supported housing offers long-term or permanent housing to people experiencing long-term homelessness as a secure foundation for recovery and social inclusion, in conjunction with the provision of on-site and off-site support services, such as: case management, substance use treatment, counseling and psychosocial treatment. In Australia, the most well-known examples of supported housing are the Common Ground, Youth Foyer and Housing First models, which received funding from the Federal Government’s National Partnership Agreement on Homelessness.

This needs to be further supplemented by an increase in the current Commonwealth Rental Assistance (CRA) package. CRA is a rent supplement provided by the Federal Government through Centrelink to assist 1.2 million low-income households renting on the private market. The Australian Institute of Health and Welfare has shown that single person households comprise the majority of CRA recipients (52%), followed by single parents (22%) and couples with children (17%). The CRA’s Rent Assistance thresholds and maximum rates are adjusted twice annually in line with the Consumer Price Index. However, the Tenants Union of Victoria has found that between 1995 and 2009, median weekly prices in all capital cities rose by 41%. At the same time, the maximum rates of CRA remained steady in real terms, meaning that this assistance now covers a smaller proportion of rent in 2009 (between 17% and 24%) when compared with 1995.

The Henry Taxation Review recommended that the CRA be reformed as an urgent priority. Consequently, it is important that no current recipients are disadvantaged financially through any future reforms that would tighten up the eligibility requirements for the payment, as such changes could further jeopardise the housing security of low-income households. As a result, additional financial support is imperative in reducing the gap caused by the significant growth in market-driven private rents and the real terms assistance provided through the CRA. The assumption that all private landlords will increase rents in line with an increased CRA payment is a short-sighted argument that fails to improve the capacity of low-income households to gain stability and independence. It is therefore recommended that the NSW and ACT Governments lobby the Federal Government to increase the CRA by $30 per fortnight for all current recipients and have this matter tabled as an urgent priority at COAG.

**Recommendations**

12. The NSW and ACT Governments commit to substantially increasing the supply of social and affordable housing over the next four years.

13. The NSW and ACT Governments to lobby the Federal Government to increase the rate of Commonwealth Rent Assistance by $30 per fortnight for all current recipients.
This research shows that low income households are involved in a daily juggling act, making hard choices between food, housing and utilities. Those most at risk of having to make these difficult choices are the unemployed, single parents and people with a disability. Being indigenous also increases risk as does being a private renter. Low income combined with cost of living pressures and significant rental stress contributes to food insecurity.

For such households the choices around food are particularly difficult. In this study of NSW and the ACT 98.8% of households were food insecure and four out of five (82%) were severely food insecure. What does this mean? For many it means being constantly worried about whether food would run out (87%) or actually running out of food and not being able to buy more (68%). It means cutting the size of meals, skipping meals and sometimes going hungry. In the worst cases it means going without food for a whole day on a recurrent basis.

A number of children are exposed to food insecurity, despite the attempts of parents to buffer them as much as possible by going hungry themselves. In 14% of households children were forced to skip meals and in a third of households children were hungry because there was no more food. In the very worst cases it means going without food for a whole day on a recurrent basis.

How do households cope with food insecurity? For many their choices reflect a rational response to what appears to be an untenable situation. Respondents spoke of careful budgeting and planning, scouring stores for specials and lining up in the late afternoon and evening in supermarkets in order to get food which was being reduced in price. When these measures were not successful, respondents spoke of cutting the portions of their meals, skipping meals and going hungry. People were creative in their cooking and some indicated they grew their own vegetables to try and make ends meet. Respondents also spoke of extending electricity bills, not paying them, pawning possessions and buying food on credit. In the worst case scenarios people became more desperate in their choices, some scouring garbage bins, shoplifting and stealing.

What impact do these hard choices have on people? Respondents cited anger, shame, embarrassment and depression. They spoke of guilt – particularly when they could not feed their children adequately. In some cases their health was compromised – people spoke of losing weight and not being able to adequately look after medical conditions such as diabetes. There was also a sense of being isolated and disconnected from family and friends as they felt they could not go out with friends and pay their way nor could they invite anyone home because they could not offer them a cup of coffee.

Governments need to not only be aware of the extent of the problem of food insecurity and the nature of the choices such households are forced to make but to develop and implement policies which mitigate the worst effects of food insecurity. These include food specific policies and locally based strategies but must also include regular monitoring for prevalence. Emergency relief outlets should be funded to widen their capacity and scope to include case management and capacity building. One of the most critical issues for food insecure households is access to more affordable housing: this needs to be a high priority on government agendas and includes increasing the stock of affordable housing as well as raising Commonwealth Rental Assistance. Furthermore both the NSW and ACT Governments need to lobby the Federal Government to raise the level of the Newstart Allowance so that unemployed households are no longer living so far below the poverty line that their situation is not sustainable or tenable.

While prosperity in Australia is generally rising, it is not being shared by all. A number of households are living in significant poverty, finding it difficult to put food on their table and pay bills. Their short term horizon which involves juggling and balancing the family budget often outweighs their capacity to plan for the future. Current well being takes precedence over future life chances. This is particularly concerning for the number of children who, in a prosperous Australia, are experiencing poverty which compromises their pathways to education and employment.
BIBLIOGRAPHY


For thousands of families in NSW, life is a precarious existence - a daily battle to provide the essentials. The constant stress of juggling the most basic necessities has far-reaching impacts, further entrenching the social exclusion of families and children.

This timely report presents research findings and stories of people who face hard choices between paying the rent, paying bills and putting food on the table. The report’s conclusions and policy recommendations highlight this increasingly difficult juggling act which all levels of Government urgently need to address.