

The lived experience of food insecurity in Adelaide, South Australia: Stories of adversity, oppression, and the orthodox and unorthodox food acquisition strategies used to cope

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ABSTRACT

This study investigated the set of circumstances that tipped individuals into food insecurity and aimed to understand their experiences of utilising orthodox and unorthodox food acquisition practices. Guided by constructivist grounded theory, this research focused on two populations to address the research aims, questions and objectives. Sample 1 comprised of 15 participants who were food insecure and accessing emergency food relief agencies in metropolitan Adelaide, South Australia. Sample 2 involved seven staff and volunteers working within these agencies. Sample 1 data collection utilised the 6-item US Household Food Security Survey Module alongside a demographic survey. One-on-one interviews were conducted to gain deeper insights into the personal narratives and experiences of food insecure adults who access emergency food relief agencies and to understand their use of orthodox and unorthodox food acquisition strategies. Sample 2 data collection comprised one-on-one interviews with emergency food relief agency staff and volunteers to understand their perspectives on the provision of emergency food relief and their response to food insecure adults utilising other coping strategies.

The results revealed complex intersectionality surrounding food insecurity and poverty, and the adverse childhood and adulthood life events that led to the utilisation of orthodox and unorthodox food acquisition practices. Three main themes were identified. The first theme, *Life's not gone according to plan – stories of adversity*, documented the adverse childhood and adulthood events that led to food insecurity. The second theme, *Down the well without a ladder – stories of oppression and a brief glimmer of hope*, uncovered systemic factors contributing to oppression and how food insecure adults are trapped in this endless cycle, unable to change their circumstances. A subtheme, *A brief glimmer of hope*, documented the COVID-19 financial assistance provided by the Australian Government. The third theme, *Self-managing the situation*, explored the orthodox and unorthodox food acquisition strategies utilised by food insecure adults to mitigate the effects of food insecurity and poverty. This theme also documented the perspectives of emergency food relief agency staff and volunteers on the use of these strategies and their engagement with food insecure clients. The results shed light on the intersectionality and challenges that food insecure adults face. By examining their experiences, this study provides an understanding of the various life events leading to food insecurity and poverty, and the coping mechanisms utilised by those affected. A comparison with the literature aligns this with the

research questions. The implications of the findings are presented, highlighting recommendations for service delivery, policy development and further research.

The insights derived from both the perspectives of the food insecure adults and the emergency food relief agency staff and volunteers provides a unique and original contribution to knowledge. Ultimately, this study contributes valuable knowledge to the ongoing discourse on food insecurity, offering a holistic perspective that encompasses the lived experiences of those directly affected and the perspectives of those working in the emergency food relief sector.

DECLARATION

I certify that this thesis:

1. does not incorporate without acknowledgment any material previously submitted for a degree or diploma in any university; and
2. the research within will not be submitted for any other future degree or diploma without the permission of Flinders University; and
3. to the best of my knowledge and belief, does not contain any material previously published or written by another person except where due reference is made in the text.

Signed: *Michelle Watson*

Date: 18th April, 2024

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I'd like to start this acknowledgement section on a very personal note, as this has been an intense and revelatory journey for me, especially navigating through both family and my own personal health issues; the fact that I am here, writing this acknowledgement is celebratory in itself. There were times when I felt overwhelmed and wanted to stop but I kept persisting, with the help of some wonderful people who guided me along the way. My supervisors, friends, family and colleagues all played a part in this research study and resulting thesis, mammoth as it is, and they all deserve my thanks for sticking with me during the good times and the challenging ones.

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Finally, I am dedicating this thesis to the Anti-Poverty Network SA and in particular Helen (not her real name). I first met Helen for an interview in February 2022 and was immediately impressed by her moxie and determination that impoverished and food insecure people be treated with the respect they deserve. Her comment on being able to afford an avocado was one I will always remember as it demonstrated the divide and inequality people on a low income have been experiencing. And her analogies of being 'down a well' and 'poverty is a political choice' helped shape this thesis into one of human rights and social justice, highlighting the lived experience of oppressed people in South Australia. As Helen so eloquently stated at a recent Senate Inquiry (Commonwealth of Australia, 2023a) into the extent and nature of poverty in Australia:

Poverty is a political choice.

You choose to keep us in poverty. You choose to keep us homeless.

You choose to keep us hungry. You choose to keep us malnourished.

You choose to keep us in poverty.

Poverty is a political choice.

Thank you, Helen, I am so lucky to have met you and I sincerely hope my thesis and research in this space agitates for change and finally the care, compassion and humanity you, and others like you, deserve.

WORKS ARISING FROM THIS THESIS

Conference and other presentations

2021 SA Population Health virtual conference, Wednesday 20th & Thursday 21st October 2021 – 3-minute rapid-fire presentation on PhD progress

2021 Global Food Governance conference, Tuesday 15th to Thursday 16th December 2021 – presented results of scoping review

2021 SHARE Collaboration (Australian Household Food Security Research Collaboration), Monday 30th November 2021 – presented preliminary results of PhD study

Publications

Watson, M., Booth, S., Velardo, S. and Coveney, J. (2022), The orthodox and unorthodox food acquisition practices and coping strategies used by food insecure adults: A scoping review, *Journal of Hunger & Environmental Nutrition*, pp. 1-16, 10.1080/19320248.2021.2021121.

Watson, M., Booth, S., Velardo, S. and Coveney, J. (2023), The “who” and “why” of dumpster diving for food in wealthy industrialised countries – an international scoping review, *British Food Journal*, Vol. 125, No. 10, pp. 3784-99, 10.1108/bfj-01-2023-0014.

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ABBREVIATIONS

ABARES	Australian Bureau of Agricultural & Resource Economics & Sciences
ABS	Australian Bureau of Statistics
ACEs	Adverse Childhood Events
ACOSS	Australian Council of Social Service
ADRA	Adventist Development and Relief Association
AIHW	Australian Institute of Health and Welfare
ASIC	Australian Securities & Investments Commission
BNPL	Buy Now Pay Later
CBBC	Christies Beach Baptist Church
CGT	Constructivist Grounded Theory
CS	Coronavirus Supplement
CUMAC/ECHO	The Center of United Methodist Aid to the Community Ecumenically Concerned with Helping Others
DV	Domestic Violence
EFR	Emergency Food Relief
ES	Economic Support (payment)
FAO	Food and Agriculture Organization of the United Nations
HFSSM	United States Department of Agriculture Household Food Security Survey Module
ICESCR	International Covenant on Economic, Social and Cultural Rights
IFAD	International Fund for Agricultural Development
OFSC	Onkaparinga Food Security Collaborative
PBS	Pharmaceutical Benefits Scheme
S1	Sample 1
S2	Sample 2
SACOSS	South Australian Council of Social Service
SDG	Sustainable Development Goals
SEIFA	Socio-Economic Indexes for Areas
SSM	Social Supermarket
UNICEF	United Nations Children’s Fund
UPF	Ultra-processed Foods
US	United States
WFP	World Food Program
WHO	World Health Organization

PREFACE

Although I first became aware of the term ‘food insecurity’ when volunteering with OzHarvest in South Australia and through my undergraduate studies, it was only during my work on this preface that I remembered I had also experienced transient food insecurity. I was a sole parent, working full-time, paying rent, with my daughter in full-time childcare as well. I found it hard to afford food or pay my bills some weeks. I clearly remember an awful time shopping where I had to put food back on the shelves because we did not have the money to buy it; saying ‘no’ to my daughter was heartbreaking. During this time, Mum was my support network, providing food parcels and even paying some of my outstanding utility bills. This happened on two separate occasions. Exploring the support networks food insecure people utilise has made me aware that Mum’s assistance was part of these very mechanisms that food insecure people draw from, if they have these supports available. I still consider myself very lucky – I had a full-time job that paid well, yet despite that regular income, there were some weeks where we did not have enough money to buy food.

More recently, my experience with food insecurity was working as a volunteer for OzHarvest. I was in the early years of my degree and keen to contribute to the community. I signed up as a driver’s assistant with OzHarvest and went on the trucks that collected food from supermarkets and other establishments and delivered it to charitable organisations. I often witnessed an unfathomable demand for food at the charitable organisations and this struck a chord with me, especially in such a rich country. Whenever we made a delivery to an organisation, we were greeted warmly by the workers and volunteers as they helped us off load the day’s donations, excitedly talking about what they were going to make with this delivery. I found I was similarly greeted when collecting donations from organisations, especially while wearing the OzHarvest yellow t-shirt. On one memorable occasion, a Big Issue vendor clapped and thanked me for supporting vulnerable people like himself. Another occasion was also memorable but from a different perspective in that it really resonated with me; the OzHarvest truck was being reversed into the charity’s driveway and I saw a young man with a child in a pram. At that moment, I was struck by the realisation that food insecurity is affecting not just adults, but children as well. Being involved with such an organisation made me aware of how hidden food insecurity and hunger is in Adelaide and the impact it is having on future generations.

My PhD journey originally started out with an interest in dumpster diving and was a nod to my inspiring activist friend Hilary, who one day during our lunch together, confessed she’d been

dumpster diving to reduce food waste. We chatted further about this and from our discussions, and my work with OzHarvest, questions began to formulate – do food insecure people dumpster dive? Why do they do this? Do they find it risky? From these questions, my study evolved to also include all means of food acquisition, both orthodox and unorthodox, and the life events that tipped people into food insecurity and poverty.

GLOSSARY

Adventist Development and Relief Association (ADRA)

<https://www.adra.org.au/adra-network/>

ADRA's Community Pantry is a faith-based community pantry that offers free or low-cost food to those in need of emergency food relief, without proof of social assistance benefits. It is affiliated with the Morphett Vale Seventh-day Adventist Church in metropolitan South Australia whose vision is to "participate in the continuing work of Jesus" through "connecting with community" and "meeting and ministering to people's needs". The pantry is open on Mondays and Fridays from 12 noon to 2pm. ADRA also has a café that offers vegetarian meals (voluntary gold coin donation) on a Thursday night during school terms.

Anglicare Australia (including the Outer Southern Hub)

<https://www.anglicare.asn.au/> and

<https://anglicaresa.com.au/support/emergency-assistance/christiesbeach/>

Provides emergency assistance such as food, clothing, pharmacy vouchers, shoe vouchers for children, blankets and other linen to those in need. It also provides support, advocacy and referrals to other services, as well as community information, a financial counselling service, access to No Interest Loans (NILs), financial literacy and budget support services.

Anti-Poverty Network SA

<https://apn-sa.org/>

An advocacy and activist organisation that actively campaigns for a just welfare and housing system that put peoples' needs and rights first. It is an alliance of volunteers who are affected by or concerned about poverty and unemployment, and a voice for South Australians on low incomes.

Australian Bureau of Statistics (ABS)

<https://www.abs.gov.au/>

Australia's national statistical agency and an official source of statistical information on Australia, its economy, and its people.

Australian Council of Social Service (ACOSS)

<https://www.acoss.org.au/>

A national advocate supporting people affected by poverty, disadvantage and inequality, and the peak council for community services nationally. See also South Australian Council of Social Service (SACOSS)

Australian Dietary Guidelines to Healthy Eating

<https://www.eatforhealth.gov.au/guidelines/australian-guide-healthy-eating>

These guidelines were developed by the Australian Government in conjunction with the National Health and Medical Research Council and the Department of Health and Ageing. They provide information on food, food groups and dietary patterns that aim to promote health and wellbeing, reduce the risk of diet-related diseases, and reduce the risk of chronic disease.

Australian Institute of Health and Welfare (AIHW)

<https://www.aihw.gov.au/about-us/what-we-do>

An independent statutory Australian Government agency that provides information and statistical information standards for the health, community services and housing assistance sectors.

Australian Securities & Investments Commission (ASIC)

<https://asic.gov.au/>

Australia's integrated corporate, markets, financial services and consumer credit regulator.

Buy Now Pay Later services (including Afterpay, Klarna)	<p>Allow approved applicants to pay for purchases in four interest-free instalments. They offer quick account set up and are widely accepted online and in-store. One example is Afterpay</p> <p>https://www.afterpay.com/en-AU</p>
Cash Converters Australia	<p>www.cashconverters.com.au</p> <p>A pawnbroking business that provides cash for household items either through outright sale of the item or as a short-term loan on an item of value.</p>
Centrelink	<p>https://www.servicesaustralia.gov.au/centrelink?context=1</p> <p>Part of the national Services Australia Government agency, Centrelink provides social assistance payments and services to Australians. Examples of the payments provided through Centrelink include JobSeeker, Youth Allowance and Parenting Payment etc. (see individual Glossary entries for these payments).</p>
CHOICE	<p>https://www.choice.com.au/</p> <p>Australia's leading watchdog and consumer advocacy group, CHOICE researches and conducts investigations to bring the best and latest advice on what to buy, and what to avoid.</p>
Christies Beach Baptist Church (CBBC)	<p>https://christiesbaptist.org.au/</p> <p>In the suburb of Christies Beach, in the City of Onkaparinga council region, in metropolitan South Australia, CBBC provides emergency assistance including food parcels, medication, agency referrals, and limited help with bills. The emergency food relief agency is open for phone bookings between 9.00am and 9.30am on Mondays, Tuesdays and Fridays, with appointments with counsellors from 11am on the same day. The emergency relief service is only available during South Australian school terms.</p>
Community Housing	<p>https://www.sa.gov.au/topics/housing/public-and-community-housing/community-housing-rents-and-other-charges</p> <p>Community housing offered by the South Australian Government includes general tenancies, supported tenancies, and affordable housing, each capped at 25% or 30% of income.</p>
Container Deposit Scheme	<p>https://www.australianbeverages.org/initiatives-advocacy-information/container-deposit-schemes/south-australia/</p> <p>Introduced in South Australia in 1977 to reduce landfill and increase recycling of eligible beverage containers. A 10-cent deposit and refund is available on most beverage containers in South Australia.</p>
Crime Stoppers South Australia	<p>https://crimestopperssa.com.au/</p> <p>An independent community organisation that works with police, government, media, corporate partners and the community to help solve and reduce crime. Community members can report suspicious activity and this information is passed onto the police to keep communities and families safe.</p>

Emergency Electricity Payments Scheme	https://www.sa.gov.au/topics/care-and-support/concessions/household-concessions/energy-bill-concessions Eligible South Australians on a low or fixed income can apply for a household concession to help with the cost of energy bills. This concession is available to those on Centrelink payments.
Energy Bill Relief Fund – South Australia	https://www.energy.gov.au/rebates/energy-bill-relief-households-south-australia Provided by the Australian Government, eligible South Australian households can apply for up to \$500 a year (paid as a quarterly amount of \$125) to assist with their energy bills. This rebate is only available to people on an eligible concessions.
Embolden	https://embolden.org.au An alliance working to end violence against women and their children in South Australia. It is the peak body of domestic, family and sexual violence services across the state.
Fair Work Ombudsman	https://www.fairwork.gov.au/ Guided by the <i>Fair Work Act 2009</i> , Fair Work Ombudsman provides education, assistance, advice and guidance to employers and employees, promotes and monitors compliance with workplace laws, investigates breaches of the Fair Work Act, and takes appropriate enforcement action.
Finder	https://www.finder.com.au/ A financial comparison site where users can compare a wide range of products and services to ensure they are getting the best deal for their money.
Flybuys	https://experience.flybuys.com.au/how-it-works/ Flybuys is a rewards points system, where shoppers accumulate points when purchasing goods from a ‘partner’ retailer.
Foodbank Australia	https://www.foodbank.org.au/hunger-in-australia/what-we-do/?state=sa One of the largest food relief organisations in Australia, Foodbank focuses on distributing surplus food to emergency food relief charities. It has Mobile Food Hubs and Community Food Hubs that provide food relief to food insecure adults who have received a voucher from an emergency food relief agency.
Foodbank Food Hubs	https://www.foodbank.org.au/SA/food-hubs/?state=sa Offering a dignified shopping experience, the hubs are set up to resemble a general store and offer healthy food options, affordable recipe packs, and ready-made meals. There are four in metropolitan Adelaide – Christies Beach, Edwardstown, Davoren Park and Woodville.
MarionLIFE	https://marionlife.org.au/ A not-for-profit, faith-based community organisation and registered charity that provides support to individuals and families in need who reside in the Mitcham, Holdfast Bay, Marion and Onkaparinga council regions in metropolitan South Australia. It provides two visits every six months to food insecure people on social assistance payments, in the form of food and food vouchers, toiletries, blankets, clothing and some bill assistance. Emergency relief is available between 9am and 12 noon, Monday to Thursday, on a first-come-first-served basis.

National Debt Helpline	https://ndh.org.au/ A free service that offers non-judgemental and confidential financial counselling services to help people with their debts.
No Interest Loans (NILs)	https://goodshep.org.au/services/nils/ Provided by Good Shepherd, an organisation that provides services and support for family and domestic violence and financial insecurity. NILs applicants can borrow up to \$2,000 for household items, education fees and equipment, laptops and technology, car repairs and registration, and medical and dental costs. Applicants can also borrow up to \$3,000 for bond and rent in advance and rates bills.
Onkaparinga Food Security Collaborative (OFSC)	http://onkaparingafoodsecurity.org.au/ A collaborative of organisations working together to achieve healthier communities by connecting people to nutritious food, to community education, and to advocacy. It has an overarching vision for a food security in the Onkaparinga council region where everyone has access to sufficient affordable, nutritious food that feeds the body and the soul; communities are empowered to lead healthy, productive lives.
OzHarvest Australia	https://www.ozharvest.org/who-we-are/ Founded in 2004 by Ronni Kahn AO, OzHarvest’s mission is to “Nourish our Country” by stopping good food going to waste and delivering it to charities who help feed people in need. It collects surplus food from a variety of donors such as supermarkets, cafes, delis, restaurants, corporate kitchens, airlines, hotels and other food businesses.
Pay Day Loans (including Before Pay and My Pay Now)	https://www.beforepay.com.au/ or https://mypaynow.com.au/ Pay advance services that allow applicants to access a portion of their wages, before pay day, for a 5% fixed fee. They offer flexible repayment options, or allow applicants to spread their repayments over four instalments as long as the full repayment is made within 62 days.
Public Housing	https://www.sa.gov.au/topics/housing/public-and-community-housing/tenants/rent-water-and-other-charges/rent-in-public-housing Housing SA offers public housing where rent is charged at either the value of the property based on the State Valuer-General’s assessment or subsidised rent based on the household’s total assessable income before tax. If eligible for subsidised rent, the rent is capped at 30% of the household’s total assessable income before tax. As at July 2022 there were 17,000 people on the waiting list for public housing, and nearly 4,000 of them are in category 1 (deemed in urgent need) https://www.abc.net.au/news/2022-07-31/south-australian-public-housing-shortage/101286630#:~:text=There%20are%2017%2C000%20people%20on,Adelaide%20and%20regional%20South%20Australia.
Preventive Health SA (formerly Wellbeing SA)	https://www.preventivehealth.sa.gov.au/ and https://www.wellbeingsa.sa.gov.au/ A state government agency supporting the physical, mental and social wellbeing of all South Australians. Preventive Health SA works across primary and secondary prevention to lead system change and better support community health and wellbeing.

SecondBite	https://secondbite.org/who-we-are/ A not-for-profit organisation similar to OzHarvest where it redirects surplus food from landfill to people who are experiencing hunger.
Social Supermarket (SSM)	Community-based, not-for-profit charity organisations that provide affordable groceries, and sometimes clothing and household goods, to people living on low incomes. These organisations do not require proof of receipt of social assistance payments. For example, ADRA, which is part of the Seventh-day Adventist church https://www.adra.org.au/adra-network/ , or The Food Centre at Gepps Cross in Adelaide https://thefoodcentre.com.au/
Socio-Economic Indexes for Areas (SEIFA)	https://profile.id.com.au/onkaparinga/seifa-disadvantage-small-area A measure of relative disadvantage in a chosen Australian local government area. For example, the suburbs of Christie Downs, Hackham West, Huntfield Heights, O’Sullivan Beach, Morphett Vale, Christies Beach and Noarlunga Centre/Noarlunga Downs all have a SEIFA score between 800 and 920.4 versus the most advantaged suburbs in the City of Onkaparinga region having a score of 1,113.0.
South Australian Council of Social Service (SACOSS)	https://www.sacoss.org.au/ Undertakes research to help inform community service practice, advocacy and campaigning, and through a range of events promotes cooperation, and the sharing of resources and information. It is the peak body for non-government health and community services sector in South Australia.
United States Department of Agriculture Household Food Security Survey Module (HFSSM)	https://www.ers.usda.gov/topics/food-nutrition-assistance/food-security-in-the-u-s/survey-tools/ An adaptable survey tool to assess household food insecurity levels. The surveys are available in different lengths – 18, 10, and 6-item surveys.
Uniting Communities	https://www.unitingcommunities.org/ A not-for-profit organisation working alongside more than 80,000 South Australians each year. They are committed to recognising and addressing social and cultural issues affecting the community, through advocacy work.
World Health Organization (WHO)	https://www.who.int/ Coordinates the world’s response to health emergencies, such as the COVID-19 pandemic, promotes wellbeing, prevents disease, and expands access to healthcare.

Glossary of Australian and State Government social assistance payments and services, and Coronavirus Supplement and Economic Support payments

(figures correct as of January 2024)

Age Pension

<https://www.servicesaustralia.gov.au/age-pension>

The age to be able to receive the Age Pension is 67 years. Recipients must be an Australian resident of at least 10 years. The Age Pension is subject to income tests.

Payments vary from (includes Pension and Energy Supplement):

- \$1096.70 per fortnight for a single person
- \$826.70 per fortnight for a couple (each) or \$1,653.40 combined.

Centrepay

<https://www.servicesaustralia.gov.au/centrepay>

A free service provided by Services Australia for Centrelink social assistance payment recipients. They can nominate an amount to be deducted from their payments to go towards utilities and other bills.

Coronavirus Supplement and Economic Support Payments

Financial support during the pandemic, paid by the Australian Government to all recipients of social assistance payments. See also Figure on page 15 for the amounts and timing of these payments.

Disability Support Pension

<https://www.servicesaustralia.gov.au/disability-support-pension>

The Disability Support Pension is financial help if you have a permanent physical, intellectual or psychiatric condition that stops you from working. It is subject to non-medical and medical rules including medical evidence.

Payments vary from (includes Pension plus Pension Supplement and Energy Supplement):

- \$1,096.70 per fortnight for a single person
- \$826.70 per fortnight for a couple (each) or \$1,653.40 combined.

Employment Services Provider

<https://www.workforceaustralia.gov.au/individuals/coaching/providers/>

Employment Services Providers give support and advice to help with job searching. Part of this program includes Workforce Australia Employment Services, Employability Skills Training, Career Transition Assistance, Disability Management Service, ParentsNext, and other services to help people on social assistance payments find work

JobSeeker Payment

<https://www.servicesaustralia.gov.au/jobseeker-payment>

Financial help for those aged between 22 and Age Pension age and looking for work. The recipient must be unemployed and looking for work, or sick/injured and cannot do usual study or work for a short time. This payment is subject to income tests and mutual obligation requirements, e.g. agree to a Job Plan, meet with employment services provider, report all job searches, accept any offer of suitable work, or demerits and financial penalties apply. The recipient must be an Australian resident and living in Australia.

Payments vary from:

- \$749.20 per fortnight for a single person with no children
- \$802.50 per fortnight for a single person with dependent child or children
- \$686.00 per fortnight if partnered.

Parenting Payment

<https://www.servicesaustralia.gov.au/parenting-payment>

The Parenting Payment is the main income support payment for carers of young children. It is subject to income tests. If youngest child is under 6 years, parents must participate in ParentsNext program which helps parents plan and prepare for future study or employment.

Payments vary from:

- \$970.20 per fortnight for a sole parent (includes Parenting Payment and a pension supplement of \$27.80)
- \$686.00 per fortnight if partnered
- \$802.50 per fortnight if partnered but separated due to illness, respite care, or prison.

Recipients of the Parenting Payment may also be eligible for the Energy Supplement, Pharmaceutical Allowance, Telephone Allowance, Education Entry Payment, Mobility Allowance, or Remote Area Allowance.

ParentsNext

<https://www.servicesaustralia.gov.au/parentsnext>

ParentsNext is a support service for parents with children under 6 years who get Parenting Payment and is designed to help with study and work goals. Must meet participation requirements or Parenting Payments will be suspended. Participation requirements include going to quarterly appointments with provider, taking part in set activities, and agreeing to a Participation Plan.

Pharmaceutical Benefits Scheme (PBS)

<https://www.pbs.gov.au/info/about-the-pbs>

A government scheme provides affordable access to medication and related services. The government subsidises the cost of medicine for most medical conditions. From January 1, 2024 the cost of a prescription item will be no more than \$31.60, with people on a government concession card paying \$7.70 for medicines listed on the PBS.

Youth Allowance

<https://www.servicesaustralia.gov.au/youth-allowance>

Financial support for those aged 24 years or younger and studying or engaged in a full-time apprenticeship, or 21 years or younger and looking for work.

Payments vary from:

- \$395.30 per fortnight for a single person, under 18 years and living at home
- \$639.00 per fortnight for a single person, younger than 18 and living away from parents' home
- \$455.20 per fortnight for a single person, 18 or older living at parents' home.

CHAPTER 1: INTRODUCTION

1.1 Chapter overview

This chapter introduces the concepts of a human right to food and provides a definition of food insecurity along with details of its prevalence globally and in Australia. This chapter also examines the determinants of food insecurity, at-risk populations, the consequences of food insecurity and the provision of emergency food relief (EFR). In examining the determinants of food insecurity, this chapter also explores the impact of an unprecedented global event. While it was not the original intention of this research to delve into natural disasters, the global outbreak of coronavirus disease (COVID-19) provided a novel and opportunistic research opportunity, and a need to analyse the impact this event may have on an individual's food security. In particular, the effect COVID-19 had on food security, both globally and in Australia is discussed. This chapter finishes with a discussion of the Australian Government's financial response to the pandemic, the impact this extra money had for food insecure adults, and the implications for food insecurity once this financial support was reduced.

1.2 Food as a basic human right

*The first essential component of social justice is **adequate food for all mankind**. Food is the moral right of all who are born into this world ... without it, all other components of social justice are meaningless*

Norman Borlaug, Nobel Peace Prize winner (1970)

This thesis views food security as a basic human right. The United Nations Declaration of Human Rights (Article 25) maintains that “everyone has the right to a standard of living adequate for health and well-being of himself [sic] and his [sic] family, including food, clothing, housing and medical care and necessary social services” (United Nations, 1948). This right to food is also recognised in international law, and Australia signed the International Covenant on Economic, Social and Cultural Rights (ICESCR) in 1972, which was ratified in 1975 (Office of the High Commissioner for Human Rights, 2014). Article 11 of this Covenant reaffirms these basic human rights to food, clothing, shelter and financial support in times of need (Office of the High

Commissioner for Human Rights, 1966). On signing the ICESCR, Australia confirmed its commitment to ensuring that every person has the right to food, yet as a developed country, Australia still experiences a level of food insecurity within its population. In addition to the ICESCR, the *Sustainable Development Goals (SDG)* and the *2030 Agenda for Sustainable Development* were adopted in 2015 by all member countries of the United Nations, including Australia (United Nations, n.d.-b). These goals are an urgent call to action by all signatory countries, in a global partnership. More specifically Goal #2 is to end hunger and achieve food security by 2030, ensuring all people have access to a safe, nutritious and sufficient food supply (United Nations, n.d.-a, n.d.-b). All Australians have the right to food (Right to Food, n.d.), and when this right is lacking, “The Australian government is failing to fulfil its legal and moral obligations to guarantee the human right to adequate food” (Barbour et al., 2016, p. 1).

1.3 Food (in)security

This section provides the definition of food security used in this thesis, outlines the prevalence of food insecurity, and details its determinants and consequences.

1.3.1 Definition

*Food security exists when **all people at all times** have physical and economic access to sufficient, safe and nutritious food to meet their dietary needs and food preferences for an active and healthy life.*

Committee on World Food Security (2012)

The term ‘food security’ has undergone several definition changes since its inception in the 1940s amid considerations of post-World War 2 hunger and famine. Consequently, the definition has been redefined to capture the four ‘pillars’ of food security – availability, access, stability and utilisation (Committee on World Food Security, 2012), with the suggestion of including an additional two pillars to acknowledge the impact of agency and sustainability (Clapp, Moseley, Burlingame, & Termine, 2022). A functional and resilient food system is one where these six pillars are met and a failure of the system often affects these pillars in combination, not isolation (Chodur, Zhao, Biehl, Mitrani-Reiser, & Neff, 2018; Clapp et al., 2022). In their modelling of food

system failure, Chodur et al. (2018) identify the following: 'unavailability' is where food is not available at supermarkets/retail outlets through supply chain failure, 'inaccessibility' is a situation where food is present but economic and physical barriers exist, and 'unacceptability' is where, even if food is available, it is unsafe, or does not meet nutritional and dietary needs, or is not culturally or socially acceptable. Similarly, Clapp et al. (2022) also emphasise sustainability and agency as key to achieving food security; sustainability accounts for shorter-term disruptions, eg. market fluctuations and natural disasters, and agency acknowledges the autonomy of individuals to make decisions about their food security. These two additional pillars are important considerations, providing a complete picture of what is an extremely complex social issue.

Food insecurity has often been referred to as a 'wicked problem', one that is challenging, complex, multifaceted, highly resistant to resolution, and therefore requires a policy response from a variety of different organisations (Australian Public Service Commission, 2018; Grochowska, 2014; Walls, 2018). These wicked problems are often difficult to define and are therefore difficult to respond to by policymakers. Some wicked problems do not have a clear (re)solution, they have multiple social and organisational dependencies, are often multicausal, and are socially complex (Australian Public Service Commission, 2018; Walls, 2018). However, Bacchi (2016) postulates that the term 'wicked problem' has been created and used by systems theorists as an analytical framework to help deal with such complexity; a reductionist view that drives down the multiple key components to singular 'players' within a complex scenario, without due consideration being given to the multiple components and the intersectionality that are often the cause of a social issue such as food insecurity. The concern with this reductionist point of view is that it places the responsibility on the individual without acknowledging the drivers and "causes of the causes" of healthy inequity (Bacchi, 2016; Marmot & Allen, 2014, p. S517). Conversely, Marmot and Allen (2014) suggest that addressing the social gradient and the underlying social determinants of health, rather than focusing on lifestyle and individual behaviours, would indeed prevent inequities from occurring in the first place. Similarly, Brase, Dai, Schneider, Werlin, and Ebling (2019) also state changing the narrative from blaming the individual to acknowledging the intersectionality and social determinants of health allows an understanding of this complex social issue.

1.3.2 Prevalence globally and in Australia

Globally, the SDGs and the *2030 Agenda for Sustainable Development* were adopted in 2015 by all member countries of the United Nations, including Australia (United Nations, n.d.-b). These 17 goals were developed to improve conditions for all people on the planet. Of great significance to food security in both developing and developed countries is *Goal #2 Zero Hunger* (United Nations, n.d.-b) with recent data showing 600 million people worldwide are projected to experience hunger in 2030 (United Nations, n.d.-a). In 2021, one in three people struggled with moderate to severe food insecurity (Food and Agriculture Organization [FAO], International Fund for Agricultural Development [IFAD], United Nations Children's Fund [UNICEF], World Food Program [WFP], & World Health Organization [WHO] (Glossary), 2023; United Nations, 2023, n.d.-a). According to the FAO, moderate to severe food insecurity has risen steadily from 21.7% in 2015 to 29.6% in 2022 (FAO et al., 2023); however, has remained steady between 2020 and 2022, hovering around 29.4% and 29.6% (FAO et al., 2023). There is also a gender gap, with women over-represented in these global figures of food insecurity (FAO, IFAD, UNICEF, WFP, & WHO, 2021; FAO et al., 2023).

Severe food insecurity in Australia increased from 2.8% of the population in 2014–2016 to 3.4% in 2020–2022 (FAO et al., 2023). Moderate to severe food insecurity is higher, with 10.8% of the population experiencing this in 2014–2016, which increased to 12% in 2020–2022 (FAO et al., 2023). The Australian Bureau of Statistics (ABS)¹ (Glossary) data on food insecurity is considerably lower. In 2015, survey data reported that approximately 4% of people were living in a household that had run out of food in the preceding 12 months and could not afford to purchase more; additionally, 1.5% were living in a household where someone regularly went without food (ABS, 2015b). More recently, Foodbank Australia² (Glossary) published its annual hunger report, which showed 3.7 million households in Australia had experienced moderate to severe food insecurity in the previous 12 months (Foodbank Australia, 2023). South Australian figures in 2019 show 11.3% of adults were food insecure in the past 12 months (Wellbeing SA, 2019), and a Western Australian study reported 62% of adults experienced very low food security in the past 12 months (Seivwright, Callis, & Flatau, 2020).

¹ The Australian Bureau of Statistics provides statistical information on Australia, its economy and its people; <https://www.abs.gov.au/>

² Foodbank Australia is one of the largest food relief organisations in Australia; it provides surplus food to charitable EFR organisations; <https://www.foodbank.org.au/hunger-in-australia/what-we-do/?state=sa>

It is not unusual for these figures to be vastly different. The ABS and Preventive Health SA³ (Glossary) use a single-question measure of food insecurity (i.e. have you run out of food and could not afford to buy more in the past 12 months?) which does not consider the prevalence, severity or temporality of food insecurity. The single-item question measure also fails to understand food affordability, access to food, or the nutritional content of food available (Keating, 2013; Kleve, Booth, Davidson, & Palermo, 2018; McKay, Haines, & Dunn, 2019). Supporting this consideration that food insecurity figures could be under-represented, a systematic review reported food insecurity varied from 2% to 90% depending on the measurement tool used (McKay et al., 2019). They explain that the use of the single-item question is less sensitive compared with the multi-item survey tool developed by the United States (US) Department of Agriculture that can detect food insecurity prevalence and severity. Because of this distinct variation between measurement tools, the validated 6-Item Short Form US Household Food Security Survey Module (HFSSM)⁴ (Glossary) was administered to the participants in Sample 1 (S1), in order to capture vital information on the severity, temporality and prevalence of food insecurity as a standardised measure.

Further impacting the data on food insecurity is the frequency of measurement and the collection of national data in Australia. For example, the ABS last collected national food insecurity data in the 2011–12 financial year, with the previous survey being conducted in the 2004–05 financial year (McKay et al., 2019), meaning there is more than a decade gap of valid information on Australia’s levels of food insecurity. This gap in food insecurity data was identified by a recent Parliamentary Inquiry in Australia, commenting that “more work is needed to monitor and measure the extent of food insecurity” and recommending surveys to be conducted every three years using the standardised HFSSM (Standing Committee on Agriculture, 2023, p. 149).

1.3.3 Determinants of food insecurity and at-risk groups

Worldwide, the drivers of food insecurity are poverty, low income, conflicts, climate shocks, low productivity and inefficient food chains (FAO et al., 2021). Disasters such as bushfires and

³ Preventive Health SA, formerly Wellbeing SA, is a state government agency that “creates a balanced health and wellbeing system that supports improved physical, mental and social wellbeing for all South Australians”; <https://www.preventivehealth.sa.gov.au/>

⁴ The US Department of Agriculture Household Food Security Survey Module (HFSSM) is validated survey tool used to assess household food insecurity; <https://www.ers.usda.gov/topics/food-nutrition-assistance/food-security-in-the-u-s/survey-tools/>

pandemics (e.g. COVID-19) can also lead to food insecurity or increase existing food insecurity, and these factors are discussed further in Section 1.5 on page 12.

1.3.3.1 Poverty and low income

*Like slavery and apartheid, **poverty is not natural**. It is man-made and it can be overcome and eradicated by the actions of human beings. And overcoming poverty is not a gesture of charity. It is an act of justice. It is the protection of a fundamental*

human right, the right to dignity and a decent life.

Nelson Mandela (2005)

In Australia, one of the main drivers of food insecurity is poverty (Anti-Poverty Network⁵, 2021 (Glossary); Australian Council of Social Service [ACOSS⁶] (Glossary), 2020b; Booth & Pollard, 2020; Pollard & Booth, 2019). There is a link between poverty and food insecurity, seen through the increase in food charities and the rise in people accessing charity services (Booth & Whelan, 2014; Foodbank Australia, 2019, 2023; Pollard, Begley, & Landrigan, 2016; Richards, Kjærnes, & Vik, 2016). Poverty is a complex social issue and can be experienced by people who are unemployed or under-employed (e.g. casual work), live with a disability, come from a non-English speaking background, rent a home or live in a rural/remote region of Australia (Davidson, Saunders, Bradbury, & Wong, 2018). When experiencing poverty, food often becomes a discretionary item coming last on the list after the payment of other bills and purchases; in other words, there is often little or no money left to purchase food (Engels, Nissim, & Landvogt, 2012; Kleve, Davidson, Gearon, Booth, & Palermo, 2017). Poverty experienced during childhood can also persist into adulthood (Tilahun, Persky, Shin, & Zellner, 2021), creating a transgenerational cycle of poverty and even food insecurity.

More than 3 million Australians are living below the poverty line, and those who are affected most are barely existing on inadequate social assistance payments such as JobSeeker (Glossary) and

⁵ An advocacy and activist organisation that actively campaigns for a just welfare and housing system that put peoples' needs and rights first. It is an alliance of volunteers who are affected by or concerned about poverty and unemployment, and a voice for South Australians on low incomes; <https://apn-sa.org/>

⁶ A national advocate supporting people affected by poverty, disadvantage and inequality, and the peak council for community services nationally; <https://www.acoss.org.au/> See also SACOSS.

Youth Allowance⁷ (Glossary) (Davidson, Bradbury, & Wong, 2023; Davidson et al., 2018). Research has also documented that over 80% of Australian households who received social assistance payments in the 2015–16 financial year also reported food insecurity (Temple, Booth, & Pollard, 2019). Individuals and couples who receive government social assistance payments (e.g. JobSeeker Allowance, formerly NewStart, which has not seen a substantial increase since 1994), are experiencing a continually widening poverty gap because it is not keeping up with cost-of-living increases (Davidson et al., 2018). Both the study by Temple et al. (2019) and Davidson et al. (2018) echo an earlier study by Engels et al. (2012), where EFR users are more likely to be on government social assistance, suggesting the payments are too low and the social issue of poverty is not being addressed. Social assistance payments were not designed with food security in mind, rather they were originally implemented to provide “a basic safety net to alleviate poverty” (Richards et al., 2016, p. 65). However, many people who are receiving these payments still experience poverty and food insecurity as the cycle of poverty continues.

1.3.3.2 At-risk groups

Certain population groups are at a higher risk of becoming food insecure. These at-risk groups include Indigenous and Torres Strait Islander populations (ABS, 2015a), people living in remote areas, refugees and people seeking asylum, older people, single parent households and children who live in households impacted by the risk factors mentioned in this section (Bowden, 2020). Those with a low level of education (Foley et al., 2009), people with a disability (Schwartz, Buliung, & Wilson, 2019) and single people living alone are also more likely to experience food insecurity (Engels et al., 2012). Households where there are three or more children under the age of 18 are also at an increased risk of food insecurity (Foley et al., 2009).

A systematic review also found that people with severe mental illness (e.g. major depression, bipolar disorder and schizophrenia) are more than two times more likely to be food insecure (Teasdale et al., 2023). Another recent study involving people with severe mental illness reported that 31% were also experiencing food insecurity, with 12% classified as severely food insecure (Tripodi, Jarman, Morell, & Teasdale, 2022). Temple (2018) also found food insecure adults were more likely to be experiencing multiple stressful life events such as divorce/separation, death of a

⁷ JobSeeker and Youth Allowance are Australian Government support payments paid to people looking for work, studying, or engaged in an apprenticeship.

family member, serious illness or accident, or unemployment and inability to secure a job in comparison to food secure people.

Food insecurity is becoming increasingly prevalent, with research identifying a rising trend of low to middle income households experiencing food precarity from multiple determinants (Kleve et al., 2018). These determinants include insecure, part-time or casual employment, irregular working hours, a lack of physical access to food, and financial stressors such as an unexpected bill, or a change in household income (Butcher, Ryan, O'Sullivan, Lo, & Devine, 2018; Engels et al., 2012; Kleve et al., 2018). People in private rental are also at risk of food insecurity, possibly due to the decrease in affordable housing and the high cost of rent (Engels et al., 2012; Zorbas et al., 2023). Indeed, a recent study by Zorbas et al. (2023) reports that private rental costs often account for nearly 90% of social assistance payments, resulting in less money for food and increasing the risk of food insecurity. People experiencing homelessness, in particular vulnerable youth, are at greater risk of food insecurity through reduced access to fresh, healthy foods, a lack of storage and food preparation facilities, and food affordability (Crawford et al., 2014; Herault & Ribar, 2016). Similarly, Engels et al. (2012) also report homeless people and those living in crisis accommodation or transitional housing are more likely to experience food insecurity.

1.3.4 Consequences of food insecurity

Food insecurity greatly contributes to health inequities, with those on low incomes or living on or below the poverty line are less able to eat well because of a lack of income or means to purchase good quality food (Foley et al., 2009; Pollard & Booth, 2019; Seiwright et al., 2020; Wilkinson & Marmot, 2003). The long-term consequences of not having enough food to eat or not having access to healthy, nutritious foods are varied. These include poorer general health (Ramsey, Giskes, Turrell, & Gallegos, 2012; Seiwright et al., 2020), frequent hospital admissions or visits to a general practitioner (Ramsey et al., 2012), and depression and anxiety (Gundersen & Ziliak, 2018; Pollard & Booth, 2019; Pourmotabbed et al., 2020; Ramsey et al., 2012; Seiwright et al., 2020; Teasdale et al., 2023). One study also reported anxiety and stress from not being able to eat in a culturally acceptable way (Pourmotabbed et al., 2020) and another suggested the stress from being food insecure led to anxiety and depression (Seiwright et al., 2020). Difficulty concentrating, a lack of motivation, tiredness, weight loss and unmanaged medical conditions were also reported in a study by Pollard and Booth (2019). Chronic diseases such as diabetes and hypertension are also affected by food insecurity, with several studies suggesting people with

multiple comorbidities were unable to manage these chronic conditions (Gundersen & Ziliak, 2018; Mayer, McDonough, Seligman, Mitra, & Long, 2016; Pollard & Booth, 2019; Seligman, Laraia, & Kushel, 2010).

The impact of food insecurity on children also warrants a mention because of the long-term health and development implications for adulthood (Gallegos, Eivers, Sondergeld, & Pattinson, 2021). Children who are food insecure experience poorer general health, more school absences and behavioural problems (Ramsey, Giskes, Turrell, & Gallegos, 2011), and an increased incidence of asthma, depression and poor oral health (Gundersen & Ziliak, 2018). There are also the extreme consequences from long-term food insecurity of possible malnutrition, overweight and obesity (Pollard & Booth, 2019). Younger children (i.e. kindergarten age) experience poorer academic performance in reading and maths, declined social skills and weight gain (Jyoti, Frongillo, & Jones, 2005). Persistent food insecurity through kindergarten to grade 3 also led to a delay in children's reading; however, this trend was reversed if the household was no longer food insecure after grade 3 (Jyoti et al., 2005).

The impact of food insecurity on the emotional and psychological wellbeing of children is also of concern. Recent research highlights Australian children are aware of food insecurity in their household, and of their parents' attempts to shield them from it (Velardo, Pollard, Shipman, & Booth, 2021). In this study by Velardo et al. (2021), child participants spoke of fear of losing their family home and were exhibiting adult, precocious perspectives on the issue of food insecurity and the impact on their family. Indeed, another study by Leung et al. (2020) also reports psychological impacts on children ranging from the worry about not having enough food and their parent's wellbeing, to emotions of anger, frustration, embarrassment and sadness of not having enough food to eat.

1.4 Emergency food relief efforts in Australia

This section details the historical EFR efforts in Australia and general aspects of the Australian food relief sector.

1.4.1 Historical food relief provision

In the past, EFR efforts were in response to adverse events such as pandemics or great depressions. For example, when Australia experienced the Spanish flu in 1919, many Australians were confined to their homes to prevent the virus from spreading and, in response to this confinement, the Red Cross and Salvation Army established charity kitchens and delivered meals to the homes of those affected (O'Connell, 2017). Following the Spanish flu, the Great Depression, caused by the Wall Street crash in October 1929, necessitated the establishment of soup kitchens and sustenance payments, or ration vouchers (Lindberg, Whelan, Lawrence, Gold, & Friel, 2015; O'Connell, 2017; Wilson, 1997). However, it is not only in response to pandemics or depressions that these food relief measures have been implemented. Booth and Whelan (2014, p. 1392) postulate that food relief has been around since colonial times, "protecting poor people from starvation and homelessness".

1.4.2 The Australian food relief sector

The Australian food relief sector contains multiple players that are involved in the food banking, rescue and distribution of food. According to Pollard et al. (2018) and McNaughton, Middleton, Mehta, & Booth (2021) these players provide either indirect services (food banking and food rescue organisations) or direct services (organisations that distribute food to those in need, for example faith-based or community organisations – referred to as the EFR agencies in this thesis).

1.4.2.1 Indirect food relief services

An example of an indirect service is Foodbank Australia (Glossary), which describes itself as the 'largest hunger relief organisation in Australia', providing food to other organisations who in turn, distribute this food to approximately 815,000 people every month (Foodbank Australia, 2021; Lindberg et al., 2015). Other examples of indirect food relief services include OzHarvest Australia⁸

⁸ OzHarvest Australia was founded in 2004 by Ronni Kahn AO after she noticed a huge volume of food going to waste. Starting in Sydney Australia, she began rescuing food and delivering it to local charities, to becoming a leading food rescue organisation; <https://www.ozharvest.org/who-we-are/>

(Glossary) and Second Bite⁹ (Glossary). The collection of excess or unsaleable food is then provided to EFR organisations, also referred to as ‘direct’ food services (McNaughton et al., 2021; Pollard et al., 2018).

There is also the concern about the indirect food relief services positioning themselves as champions of environmental sustainability through the reduction of food waste, fostering the belief that food charity and food waste are “linked [and] a solution to hunger” (Silvasti, 2015, p. 477). Indeed, the majority of the food banking industry relies on industrial food ‘waste’, and even one organisation has been built upon this premise of “collecting quality excess food from commercial outlets and delivering it directly to more than 1300 charities supporting people in need across the country” (OzHarvest, 2020). The altruism exhibited by these organisations greatly improves their public image but does nothing to foster human rights to food nor does it provide a long-term solution to food insecurity, and in turn contributes to humiliation, indignity, and shame for those who access food relief (McNaughton, Middleton, Mehta, & Booth, 2021; Silvasti, 2015). This channelling of food waste and rejected product into the charitable food sector continually reinforces the belief that wasted food is only fit for those who are the most vulnerable in our community.

1.4.2.2 *Direct food relief services*

The direct food relief services, such as faith-based charities, welfare organisations and community initiatives, receive food from the indirect organisations (Booth & Whelan, 2014; McNaughton et al., 2021; Pollard et al., 2018). These agencies are non-profit and rely heavily on volunteer labour with few paid staff (Bourke, 2022; Pettman et al., 2022; Pollard et al., 2018). EFR agencies then provide food to vulnerable people through a variety of models, for example, food parcels, food vouchers, meals in a variety of settings, or access to a community food pantry that stocks low priced or free items (Pollard et al., 2018). These EFR agencies also purchase food from the major supermarkets directly using donated funds, or via donations from the general public (Pollard et al., 2018).

The accessibility of food through EFR agencies varies greatly, with some only open one or two days a week, and others for only a few hours in which appointments with a counsellor or a volunteer interviewer (to assess need) can be made. For example, Anglicare Australia’s Outer Southern

⁹ Second Bite is similar to OzHarvest where it redirects surplus food from landfill to people who are experiencing hunger; <https://secondbite.org/who-we-are/>

Hub¹⁰ (Glossary) at Christies Beach, in Adelaide's southern suburbs, are only open for phone appointments between the hours of 9am and 9.30am (Anglicare SA, n.d.). Additionally, the majority of EFR agencies are not open on weekends, public holidays or during school holidays, and tend to close for an extended break over the Christmas/New Year period (Christies Beach Baptist Church, 2022; MarionLIFE, 2020a; Pollard et al., 2018; SA Community, 2022b). This means that people who need food relief must find alternative sources of food during these times. Several studies have also reported that EFR agencies are uncoordinated in their efforts to provide food to vulnerable people, often limited in the availability of nutritious food, and experience funding and volunteer/staffing instability which affects their opening hours (Caraher & Furey, 2018; Kleve et al., 2023; Pollard et al., 2018). Similarly, Booth et al., 2018 also found the long queues to access food relief contributed to the frustration of utilising the EFR agencies. The diversity of stakeholders' interests in this space also contributes to a fragmented and disconnected delivery of food relief (Pollard et al., 2018).

1.5 Food security during the COVID-19 pandemic

This section outlines the effects of the pandemic on food security globally and in Australia as well as the Australian Government's financial response.

1.5.1 Global effects of COVID-19 on food security

Unprecedented events can also exacerbate food insecurity globally. In early 2020, COVID-19 unfolded. The FAO identified that countries most at risk of food insecurity during the COVID-19 pandemic were those already dealing with hunger or other crises, and that relied heavily on imported food (FAO, 2020). The United Nations further identified that individuals who were already disadvantaged would feel the brunt of COVID-19, both in terms of a lack of food but also from malnourishment leading to a lowered immune system (United Nations, 2020).

The United Kingdom was three weeks into lockdown and already recording a higher-than-average number of people going without food. Numbers had quadrupled, with a lack of food in supermarkets a large contributor to this increase (Lawrence, 2020; Loopstra, 2020). In the US,

¹⁰ Anglicare Australia's Outer Southern Hub offers a range of anti-poverty services to people living in the southern suburbs of Adelaide, South Australia; <https://anglicaresa.com.au/support/emergency-assistance/christiesbeach/>

adults with very low food security were further marginalised because they were not able to stock up on extra food in order to survive during a lockdown (Wolfson & Leung, 2020).

1.5.2 Effects of COVID-19 on the Australian food system and food security

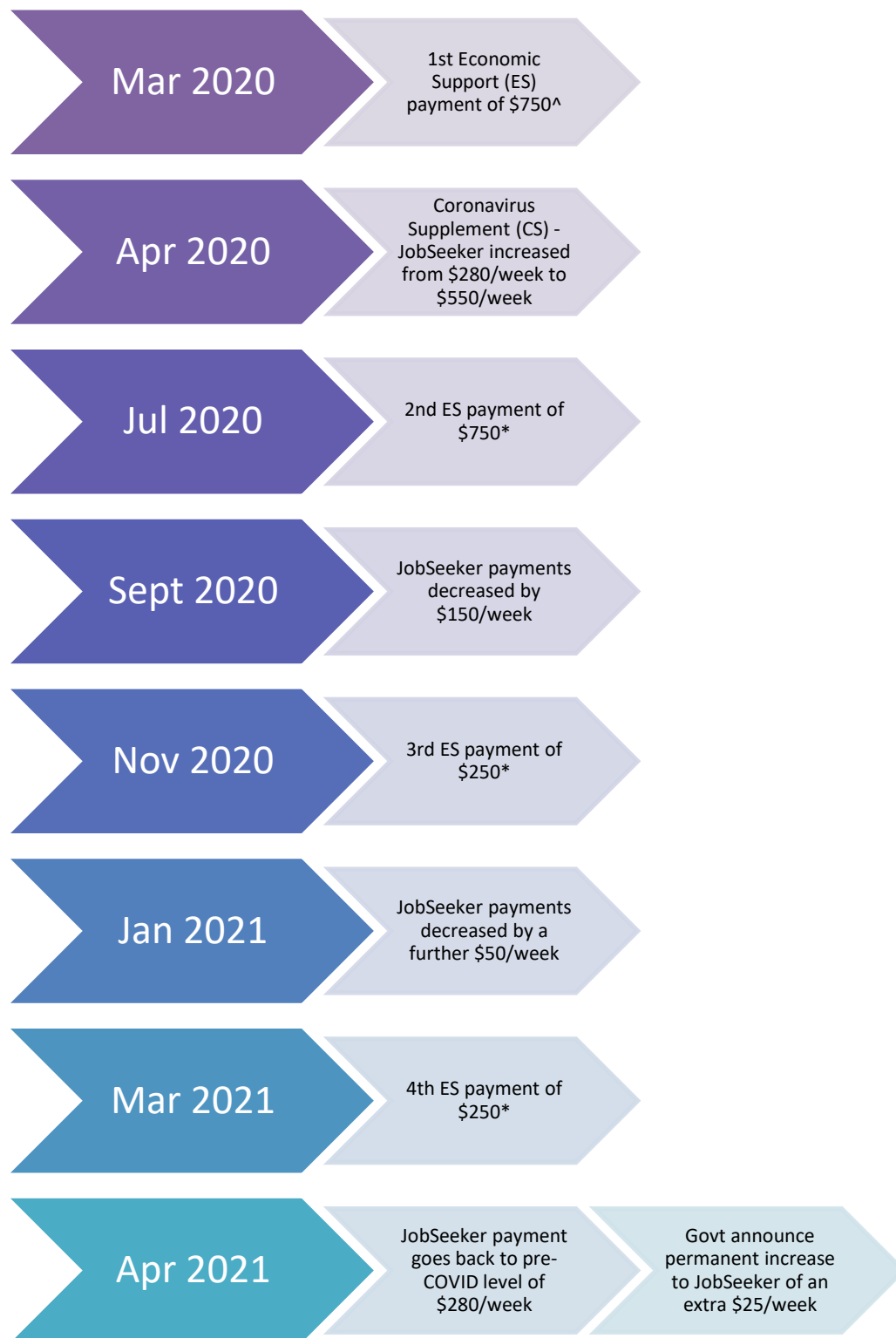
The COVID-19 pandemic further highlighted the fragility of the Australian food system, where the entire food chain, from farmer to warehouse to supermarket, was disrupted (Department of Agriculture, 2023; Eliaz & Murphy, 2020). While there was food along the supply chain, there were difficulties getting it to the wider population (Australian Bureau of Agricultural & Resource Economics & Sciences [ABARES], 2020). This in turn, caused panic buying by consumers, who were uncertain about how long the restrictions were going to be in place or whether the food would run out (Department of Agriculture, 2023). In response, essential food items such as pasta, sugar, flour, tinned vegetables and rice became scarce commodities as people engaged in panic buying and stockpiling, not knowing how long restrictions were going to continue. Supermarkets responded to this panic buying by placing limits on the numbers of items that could be purchased at any one time. While it is possible that concerns about a diminished supply of food drove this stockpiling reaction, Australia's food system produces more food than is consumed and exports over 70% of its agricultural production (ABARES, 2020). Australia's food supply chain is resilient; however, large-scale events such as a pandemic may cause disruptions to food supply (ABARES, 2020; Bartos, Balmford, Karolis, Swansson, & Davey, 2012). As such, the gap in supply was more an issue of logistics, following an unexpected surge in consumer demand where food became temporarily unavailable (ABARES, 2020; Keating, 2013). Sudden 'shocks' to the food supply chain, especially ones that occur from natural disasters, can lead to transitory food insecurity for some individuals (Keating, 2013).

In addition to the sudden shocks caused by natural disasters and pandemics, Australia does not hold any food reserves in the event of a disrupted food supply (Keating, 2013). Australia's food supply chain works to a 'just-in-time' logistics management, one that provides efficiency in moving food from the paddock to the plate very quickly. However, this also leaves Australian households vulnerable to natural disasters, as supermarkets can run out of food quite rapidly (Bartos et al., 2012; Carey, Murphy, & Alexandra, 2020; Keating, 2013). With supermarkets only having enough stock to supply customers for approximately one week, there is no buffer to any disruptions to the supply chain. This issue, coupled with panic buying, meant that supermarkets could not keep up with the increased consumer demand. Based on non-pandemic consumer shopping patterns, it is

estimated that the majority of Australian households only hold enough pantry items for two to four days on average, with those on low incomes having less pantry stock, leaving them even more vulnerable during these times of food supply chain disruption (Link 2009, as cited in Bartos et al., 2012; Keating, 2013). A recent Australian study on the food supply during COVID-19 reports that the majority of food insecure households surveyed had less than a week of food stored in comparison to food secure households that had 7–14 days' worth (Kent et al., 2022). Additionally, higher food prices, the inability to consistently obtain food, and a reduction of food 'specials' have been identified as additional barriers to food security during COVID-19 (Louie, Shi, & Allman-Farinelli, 2022).

1.5.3 Increased unemployment and food insecurity during COVID-19

The restrictions in the food supply were not the only adverse outcome of the pandemic. Thousands of people lost their jobs or had their working hours cut, leading to an increase in people accessing Foodbank (Glossary) and other EFR agencies, with some accessing food relief for the first time (Foodbank Australia, 2020; Stewart, 2020). A Tasmanian study reported food insecurity increased during 2020, particularly among those who had lost their main source of income due to the pandemic (Kent et al., 2020). These findings were echoed in two other Australian studies where changes to employment were associated with food insecurity (Kleve et al., 2021; Louie et al., 2022). Another study on the community food sector revealed these organisations experienced an unexpected increase in clientele and an increase in frequency of accessing food relief during the pandemic (McKay, Bastian, & Lindberg, 2021). This increase led to supply shortages from Foodbank Australia and other distribution channels that are used by EFR agencies, affecting the amount of food they could provide to those in need (McKay et al., 2021). Similarly, due to supermarket shortages, more people were using EFR agencies, adding to the pressures these agencies were experiencing (Foodbank Australia, 2020; McKay et al., 2021).



^ - given to all recipients of government social assistance payments

* - given to Age Pension, Carer Payment, and Disability Support Pension recipients ONLY

Figure 1 – Coronavirus Supplement and Economic Support payments provided by the Australian Government during the COVID-19 pandemic, March 2020 to April 2021

Source: Chen & Langwasser (2021)

1.5.4 The Australian Government's financial response to the pandemic

In response to the pandemic and the resulting loss of employment, the Australian Government provided one-off payments or increased social assistance payments (Australian Government, 2020a). The Coronavirus Supplement (CS) payment and the Economic Support Payments (ES)¹¹ (Glossary) cost the Australian Government an estimated \$32 billion (Chen & Langwasser, 2021) and were available to any Australian resident who received at least \$1 of an eligible social assistance payment, such as the Age Pension¹², the Disability Support Pension¹³, JobSeeker (Glossary). For example, JobSeeker recipients were given an ES payment of \$750 in March 2020, and fortnightly payments were also increased to \$550/week in April 2020. Because of this fortnightly increase, JobSeeker recipients did not receive any further ES payments (Australian Government, 2020b; Klein, Cook, Maury, & Bowey, 2021). Unfortunately, some people had to wait several weeks before receiving any money, leaving them in a state of extreme financial precarity (Stewart, 2020). Figure 1 presents the overall scheme.

It is interesting to note that the Australian Government has been historically resistant to raising the JobSeeker rate, despite campaigns asking for a \$65/day increase (Raise the Rate, 2019). The JobSeeker social assistance payment has been consistently below the poverty line (Melbourne Institute, 2021, 2022, 2023) despite meagre increases over the years. ACOSS (2020b) (Glossary) found that 66% of people receiving JobSeeker only had \$14 a day to live on after paying rent or mortgage payments, and 75% of people skipped meals because they could not afford to purchase food. This is because the JobSeeker rate has not kept up with the rising cost of living. For example, the JobSeeker payment for a single adult with no children and no other income is \$374.60 a week (\$749.20 a fortnight, current as of September 2023) (Services Australia, 2023b), substantially less than the estimated poverty line of \$601.50 per week (current as at March 2023) (Melbourne Institute, 2021, 2023). It is not surprising that people's lives were significantly impacted when the CS payments doubled the fortnightly amount of the JobSeeker payment. A survey of 600 JobSeeker recipients during COVID-19 reported that due to this increase, over 80% were able to

¹¹ The Coronavirus Supplement and Economic Support payments were made to recipients of social assistance payments; see also Figure 1 for the timing and amount of money paid by the Australian Government during the pandemic

¹² The Age Pension is provided by the Australian Government to residents over the age of 67 years; www.servicesaustralia.gov.au/age-pension

¹³ The Disability Support Pension is financial support for people who have a permanent physical, intellectual, or psychiatric condition that stops them from working; www.servicesaustralia.gov.au/disability-support-pension

eat better and more regularly, and 70% were able to catch up on bills (ACOSS, 2020a). Additionally, 67% said they could afford to pay for medicines and access medical care (ACOSS, 2020a). Another study on the impact of the CS payment reported recipients had improved financial security, and the CS payments allowed them to purchase food, medicine and housing (Klein et al., 2021). This had a flow-on effect of improved self-reported health and wellbeing (Klein et al., 2021).

The gradual return of social assistance payments to their pre-COVID state is also noteworthy. While the government announced a \$25/week permanent increase to JobSeeker, the low rate of this payment continues to stigmatise and demoralise recipients, adding to their dependent spiral into poverty. While the Liberal-National Coalition government, under Prime Minister Morrison, described the modest increase as 'appropriate' (Norman & Snape, 2021), its policy decision could clearly be considered a violation of human rights, based on the aforementioned arguments. Today, with a Labor government, the JobSeeker payment is still under the poverty line. The Albanese Labor government did not include a substantial and liveable increase to this social assistance payment in the recent budget, again leaving millions of people living below the poverty line. This, in combination with the rising costs of living as the Reserve Bank of Australia increased the cash rate in order to stave off a recession, is impacting people more than ever before.

1.6 Summary

Chapter 1 introduced the concept of a human right to food, defined food insecurity, established who is at a higher risk of experiencing food insecurity and its consequences, from a global and Australian perspective. Discussion of the EFR sector was also presented. Finally, there was discussion of the global pandemic and its impact on food security in Australia, along with the Australian Government's fiscal response and the resulting roll-back of social assistance payments to pre-pandemic levels. The thesis outline is as follows:

Chapter 2 – Scoping review presents the results of two scoping reviews; one that was conducted in early 2020 and published in 2022, and an update that was undertaken in early 2024. As part of this chapter, the concepts of orthodox and unorthodox food acquisition practices are defined and supported by findings from international literature. This chapter also presents the gaps in the literature based on the scoping reviews conducted, outlines the study's aims, objectives and

research questions, aligning with the concepts of human rights to food and socially acceptable food acquisition practices.

Chapter 3 – Methodology presents the research approach used and provides a background to grounded theory and constructivist grounded theory (CGT), an explanation of why this theory was chosen, and its link with social justice research. Next, theory generation, as part of the CGT approach, is discussed and the links to the study findings are outlined. Importantly, reciprocity for the participant, and how this is achieved, is explained. Chapter 3 finishes with an analysis of rigour and trustworthiness in grounded theory research and how it was achieved using credibility, transferability, dependability and confirmability.

Chapter 4 – Methods focuses on the population and study sample recruited, the different recruitment strategies utilised for participants, the data-collection instruments and data-analysis methods that led to theory generation. In addition, special consideration is given to research involving food insecure and impoverished populations – both for the participant and the researcher. Finally, the chapter outlines how the three main themes map to the research objectives and presents a detailed discussion on researcher reflexivity, positionality and the use of memos in CGT.

Chapter 5 – Results presents the results of data collection and analysis of S1 and Sample 2 (S2) participant survey and interview data, including demographic data for S1 (food insecure adults) and their food security status, and S2 participant information. This chapter also presents the three main themes and their relevant sub-themes, and demonstrates how each theme maps to the research objectives.

Chapter 6 – Discussion examines the key ideas that arose from data analysis using existing academic literature. Each section provides links to the relevant research questions and positions and discusses the findings in relation to the existing literature on the topic. Finally, the implications for practice and social policy, and recommendations for future research are presented along with a comprehensive analysis of the strengths and limitations of the study.

Chapter 7 – Conclusion finalises the thesis with some concluding remarks.

CHAPTER 2: SCOPING REVIEW

2.1 Chapter overview

This chapter represents both the initial scoping review which was conducted in January 2020 and published in the *Journal of Hunger and Environmental Nutrition* in January 2022 (Appendix 1 on page 164), and an updated article search conducted in January 2024. The new articles have been woven into the initial review; hence it will be different to the published version. This chapter also presents the rationale for conducting a scoping review before data collection, as part of the grounded theory method.

2.2 Literature reviews and the grounded theory method

The timing of the literature review in any research that utilises the grounded theory method is a contentious issue that has been debated by various scholars as it is seen to interfere with the process of generating new theory (Charmaz, 2014). However, it is important to acknowledge that most researchers come to their field of study with passion and a keen interest, and therefore cannot be truly exempt from these preconceived ideas (Charmaz, 2014). In fact, Charmaz (2014) asserts delaying the literature review to be risky as it leads to a lack of familiarity in the area of interest, along with the possibility of “reinventing the wheel”, repeating other researcher’s mistakes, and a general lack of familiarity with the research topic (Charmaz, Thornberg, & Keane, 2018, p. 419). As such, it was deemed imperative to review the available literature on the important social issue of orthodox and unorthodox food acquisition practices in order to develop a critical awareness of other studies in the same field – an “intimate familiarity” (Charmaz et al., 2018, p. 420). Charmaz et al. (2018) also states the importance of knowing how and by whom previous research has been conducted that will form the basis of a strong analysis of the social justice issue and form credibility within the study. Also, in a study that is likely to inform policymakers and enact social change, understanding what research has gone before will effectively identify gaps and extend the previous research (Charmaz et al., 2018). Charmaz et al. encourage this engagement with the literature as it helps to facilitate understanding of non-government organisation involvement with vulnerable and disadvantaged individuals.

2.3 Scoping review on orthodox and unorthodox food acquisition practices

This section is a combination of the original scoping review done in January 2020 and an updated article search in January 2024. The new articles have been woven into the original review and the text has been updated to match the thesis structure. For reference, the original published article can be found in Appendix 1 on page 164.

2.3.1 Introduction

Food security is subject to many definitions; however, the most widely accepted is that it “exists when all people at all times have physical and economic access to sufficient, safe and nutritious food to meet their dietary needs and food preferences for an active and healthy life” (Committee on World Food Security, 2012, p. 5). People who cannot access food in this way are considered food insecure. Globally, moderate or severe food insecurity affects 30.4% of the world’s population, a figure that has been steadily climbing (FAO et al., 2021). In Australia, approximately 4% of households are considered food insecure, where they have run out of food and not been able to purchase more (ABS, 2015b). In South Australia, this figure is higher, with 11.3% of adults aged 18 years and over running out of food and not being able to purchase more (Wellbeing SA, 2019). However, these figures may be even higher as the single-question measure used does not consider the severity, temporality or prevalence of food insecurity, nor the affordability, access and nutritional content of food available (Keating, 2013; Kleve et al., 2018; McKay et al., 2019). For example, a study from Perth, Western Australia reports that 62% of adults experienced very low food security and 18.8% experienced low food security (Seivwright et al., 2020). Being food insecure has far-reaching public health impacts for adults, with causal links to overweight and obesity, diet-related diseases such as type 2 diabetes, increased risk of depression, poor mental health and more frequent visits to healthcare providers (Pollard & Booth, 2019; Ramsey et al., 2012).

The term ‘orthodox’ is defined as “following or conforming to the traditional or generally accepted rules” and “the ordinary or usual type, normal” (Oxford English Dictionary, 2021). Based on this definition, it can be considered that orthodox and usual means of food acquisition are also socially acceptable. Expanding on the concept of socially acceptable food acquisition, the US Department of Agriculture (2020) also states that people should have access to nutritionally adequate and safe foods that can be acquired “in socially acceptable ways ... without resorting to scavenging, stealing, or other coping strategies”. In addition, socially acceptable ways of obtaining food have

been described as practices that are “dignified and in keeping with social norms” (Dowler & O’Connor, 2012, p. 45). From these definitions, it is clear that obtaining food from unorthodox sources such as rubbish bins or eating another person’s leftovers challenges this social norm of where and how food should be obtained. Nonetheless, the literature suggests that these types of coping strategies are sometimes pursued where food is scarce (Pollard, Booth, Goodwin-Smith, & Coveney, 2017).

The use of unorthodox food sources to procure food represents a violation of the basic human right of being able to access food in a socially acceptable way (United Nations, 1948). As such, being food insecure with limited access to sufficient, safe and nutritious food is also an indication of social inequity (Pollard & Booth, 2019). At a time where inequities are widening, it is prudent to question how and why some people use unorthodox food acquisition practices to cope during episodes of food insecurity. To date, no review has sought to address these questions. Given the significance of this issue, and its potential health-related consequences, it is important to better understand this social phenomenon. Therefore, the aim of this scoping review was to examine existing literature on orthodox and unorthodox food acquisition practices utilised by food insecure adults.

2.3.2 Methods

Scoping reviews are a useful method of examining the evidence where clarity of the research question is required (Munn et al., 2018) and where the focus is on broader topics of enquiry (Arksey & O’Malley, 2005). As such, a scoping review was chosen and was guided by the following question: what literature exists on orthodox and unorthodox food acquisition practices among food insecure adults? This section outlines the search protocol used and the findings based on the review of 25 articles.

The method recommended by the Joanna Briggs Institute (2015) was employed in this scoping review. First, a search of databases and articles was conducted by MW to gather search terms used to describe orthodox and unorthodox food acquisition practices and food insecurity. Second, a full search was conducted on 3 January 2020 by MW, and repeated again in January 2024, across both ProQuest and Scopus databases using all of the following the terms (and derivatives of these words): “food insecurity”, “poverty”, “hunger”, “low income”, “low socioeconomic”, “orthodox”, “unorthodox”, “risky”, “illegal”, “steal”, “theft”, “charity”, “rough”, “roadkill”, “food”, “meal”, and “eat”. The searches were not date-limited and as such included all literature that had been

published. Hand searching of articles and a Google search using the terms “orthodox and unorthodox food acquisition” and “risky or illegal food acquisition” was also conducted by MW, providing 159 articles. Citations were imported to Covidence (Veritas Health Innovation, n.d.), where duplicates were removed and then title and abstract screening was undertaken by MW. Full-text retrieval of 49 articles was undertaken using Endnote X9, and these were assessed by MW against the inclusion and exclusion criteria, leaving 25 articles for final review. A comparison of the articles retrieved during the first search done in 2020 and subsequent 2024 search identified an additional seven articles had been captured in the search. These seven articles were initially reviewed and coded by MW. They were subsequently divided between the other authors for cross-coding, ensuring all articles were coded by two members of the research team. Ongoing discussions took place between all authors to address any differences or conflicts. Thematic analysis of the additional seven articles was similarly guided by the Braun and Clarke (2006) 6-step method of constant re-reading, generating initial codes, continual searching for themes, and reviewing and naming of the themes. The findings and discussion are presented below. The seven additional articles have been woven into the initial published version of the 2020 scoping review as no new findings were identified.

2.3.3 Findings

The initial aim of this scoping review was to capture and document literature on unorthodox food acquisition practices; however, we also found food insecure adults were also engaging in orthodox food acquisition practices.

The 25 articles reviewed confirmed the existence of both orthodox legal coping strategies and unorthodox illegal and risky coping strategies utilised by food insecure adults to procure food. The reviewed articles were worldwide; however, the majority were from industrialised countries (US, Australia and Canada), with two articles from Africa, and only one article each from Mexico, Bangladesh, South Korea and Mozambique. Sixteen of the 25 reviewed articles recruited food insecure or low-income adults; however, one study interviewed nutrition educators in the US (Kempson, Keenan, Sadani, Ridlen, & Rosato, 2002). Three studies interviewed a low-income household representative who was involved in cooking and purchasing food (Cordero-Ahiman, Santellano-Estrada, & Garrido, 2018; Militao et al., 2022; Tarasuk, St-Germain, & Loopstra, 2019). Two articles specifically recruited adults with HIV who were food insecure (Anema et al., 2016; Whittle, Palar, Napoles, et al., 2015).

One article was a narrative review on the prevalence of food insecurity and described the coping strategies of university and college students in the US (Lee et al., 2018), another was a commentary on the existing literature (McKay & Lindberg, 2019), and one was an annual review detailing coping strategies used by food insecure adults (Seligman & Berkowitz, 2019).

2.3.4 Theme 1 – Orthodox legal coping strategies

Overall, 22 of the 25 articles mentioned the use of legal coping strategies to mitigate the effects of food insecurity. These strategies included relying on friends, family and neighbours for either food or money to buy food, and the use of financial or budgeting strategies, such as shopping discounts, bulk purchasing, and trading supermarket or store discount coupons to make money stretch further or to provide extra money for food. The authors noted these to be a common occurrence and pointed to the resourcefulness and resilience of food insecure adults. The sub-themes are presented below.

2.3.4.1 *Relying on friends and family*

Nineteen articles in the review described the use of friends, neighbours and family for food or money to buy food in times of need, and for information on where to access additional support. Of those, 11 articles reported friends, neighbours and family as a common source of food (Booth, Begley, et al., 2018; Cordero-Ahiman et al., 2018; Farzana et al., 2017; Jacknowitz, Amirkhanyan, Crumbaugh, & Hatch, 2018; Lee et al., 2018; McKay, McKenzie, & Lindberg, 2023; Militao et al., 2022; Pollard et al., 2019; Seligman & Berkowitz, 2019; Tabe-Ojong, Gebrekidan, Nshakira-Rukundo, Borner, & Heckeleei, 2022; Whittle, Palar, Hufstedler, et al., 2015). Park and Kim (2018) found it was common practice for low-income households to share food between family and friends. Ahluwalia, Dodds, and Baligh (1998), Militao et al. (2022), Seligman and Berkowitz (2019) and Wood, Shultz, Edlefsen, and Butkus (2006) noted that parents regularly sent their children to a friend or relative's home for dinner. The university students in the research by Lee et al. (2018) often procured food from friends or relatives or took advantage of the free food offered at university; they also shared this food with roommates. The participants in studies by Hoisington, Shultz, and Butkus (2002) and McKay et al. (2023) also shared food with others as a coping strategy for food insecurity.

The study by Ahluwalia et al. (1998) broke down the use of social networks into different categories – primary, secondary, and tertiary – and this depended upon the severity of food insecurity and the status of their relationship with family (i.e. friends were secondary and often

relied on if there were no family or a strained family relationship). It is interesting to note that neighbours were often used as a last resort (tertiary) as food insecure adults often found it hard to approach them for help.

Borrowing money from friends or family was mentioned in 10 of the reviewed articles. Ahluwalia et al. (1998), Anema et al. (2016), Farzana et al. (2017), Jacknowitz et al. (2018), Lee et al. (2018), Militao et al. (2022), Seligman and Berkowitz (2019), Tarasuk et al. (2019) and Wood et al. (2006) identified friends and family as a source of money to purchase food. Anema et al. (2016) also reported that participants who identified as food insecure were more likely to borrow money for food; however, did not state who they borrowed money from. Conversely, Lindberg, Lawrence, and Caraher (2017) only reported one participant who had borrowed money from a friend and received discount vouchers from a relative. Tarasuk et al. (2019) and Jacknowitz et al. (2018) reported that family shared their store discount privileges with participants. In three of the reviewed articles, friends and family were also mentioned as a source of information on services and programs that might be helpful (Ahluwalia et al., 1998; Booth, Begley, et al., 2018; Wood et al., 2006).

2.3.4.2 *Financial or budgeting strategies*

Financial or budgeting strategies were mentioned in 16 of the 25 reviewed articles, and this practice was mainly used to increase the amount of money people could spend on food or to stretch money further. Anater, McWilliams, and Latkin (2011) reported that participants often did not pay bills, used store credit to purchase food, or gambled for money to buy food in the previous 12 months. The authors identify these practices as “financially risky”. Cordero-Ahiman et al. (2018) also reported that participants purchased food on credit, a practice identified by the authors as a coping strategy. This practice was echoed in the narrative review by Lee et al. (2018), who discovered university students used credit cards to purchase food. Seligman and Berkowitz (2019) listed several financial strategies, for example obtaining short-term loans or using savings to purchase food, and Hoisington et al. (2002) reported that their participants also obtained cash advances, although where this money came from was not stated. Tarasuk et al. (2019) found their participants often missed a bill payment and or a rent/mortgage payment in order to prioritise food purchase, and Lee et al. (2018) similarly reported that university students delayed paying bills to purchase food. Ahluwalia et al. (1998), Hoisington et al. (2002), Kempson, Keenan, Sadani, and Adler (2003) and Wood et al. (2006) also reported this finding, whereby participants staggered or delayed bill payment in order to manage financially.

Ahluwalia et al. (1998), Hoisington et al. (2002) and Jacknowitz et al. (2018) reported that participants utilised coping strategies such as using supermarket discount coupons, choosing inexpensive food options, buying food in bulk, shopping for sales, or searching different stores for deals on specific food items. All of these strategies were also mentioned in the review by Seligman and Berkowitz (2019). The review of food insecure university students similarly reported that participants bought less-expensive foods as a way of stretching their money further (Lee et al., 2018).

Two similar studies were conducted by Kempson et al. (2002) and Kempson et al. (2003). In their first study Kempson et al. (2002), interviewed nutrition educators about food acquisition practices that their clients were engaging in. The second study (Kempson et al., 2003) sought to compare the nutrition educators' perspectives with the actual practices adopted by low-income clients. The coping strategies previously identified by the nutrition educators included preparing meals from inexpensive food (e.g. packaged meal mixes, generic brands), purchasing food from discount stores, bulk shopping and buying on-sale, buying inexpensive foods or nearly expired foods, or making low-cost dishes (Kempson et al., 2003; Kempson et al., 2002). Budgeting and establishing store credit were also reported as financial coping strategies (Kempson et al., 2003).

Other ways of obtaining more money to buy food were mentioned in 10 of the reviewed articles. Six articles reported that participants were more likely to pawn or sell possessions for money to buy food if they were food insecure (Anema et al., 2016; Farzana et al., 2017; Lee et al., 2018; Militao et al., 2022; Tarasuk et al., 2019; Wood et al., 2006). However, it was unclear as to whether the items being pawned belonged to the participants or had been stolen. Farzana et al. (2017) also report that participants stopped schooling of household members; however, the authors did not elaborate further on this strategy. Cordero-Ahiman et al. (2018) found participants made handicrafts that were then sold for cash. Some participants also migrated for work, while others engaged in casual labour (Cordero-Ahiman et al., 2018) and others took on extra work (Militao et al., 2022; Seligman & Berkowitz, 2019; Wood et al., 2006). The university students in the review by Lee et al. (2018) also increased their hours of work to earn more money to purchase food or applied for other government support in the form of loans or bursaries. Another coping strategy was mentioned by Militao et al. (2022) where participants rented a room in their home for additional income, or rented the home they owned while renting a smaller house to live in at a lower price. Whittle, Palar, Hufstedler, et al. (2015) also identified that participants recycled bottles or sold local street newspapers to increase available money for food. The articles by

Whittle, Palar, Hufstedler, et al. (2015) and Kempson et al. (2003) explained that participants sold blood or participated in research studies for cash or vouchers, thereby demonstrating considerable resourcefulness.

2.3.5 Theme 2 – Unorthodox illegal or risky coping strategies

Of the 25 articles reviewed, just under half mentioned illegal or risky coping strategies that were used by food insecure adults to procure food. Unorthodox coping strategies ranged from theft of food or money to buy food, risky sexual practices, begging or committing a crime in order to go to jail. Other practices that were considered risky to physical health, both in the short and long term, included eating food from questionable sources such as rubbish bins, eating other people's leftovers, skipping meals, modifying food intake and eating non-food items.

2.3.5.1 *Theft of money or food*

Overall, seven of the reviewed articles mentioned food insecure adults were resorting to theft of food or money to buy food; however, the proportion of participants engaging in these practices varied or was not fully reported in the articles. For example, two articles revealed very small numbers of participants had shoplifted food (Anater et al., 2011; Lindberg et al., 2017) while another article reported that 34% of participants had stolen food or drink, and 19% admitted to stealing money to buy food (Pollard et al., 2019). Other articles mentioned this practice but did not elaborate on how many of their participants engaged in it (Anema et al., 2016; Kempson et al., 2003; Lee et al., 2018; Whittle, Palar, Hufstedler, et al., 2015).

2.3.5.2 *Sexual practices in exchange for food or money to buy food*

Risky sexual practices in exchange for food or money to buy food were also mentioned in eight of the reviewed articles. Anater et al. (2011) reported that participants engaged in prostitution for food and Kempson et al. (2003) discovered children were being forced into prostitution by their parents to raise money for food. In the study by Anema et al. (2016) on people living with HIV, the authors observed participants were more likely to engage in risky methods of food acquisition if they were food insecure. Similarly, the articles by Weiser et al. (2007) and Militao et al. (2022) discovered food insecurity was associated with multiple risky sexual practices for women, such as selling sex for money or resources, having multiple sexual partners, and engaging in unprotected sex. These 'transactional sex' practices were also undertaken by men and women to gain either food or money for food in three other studies (Seligman & Berkowitz, 2019; Whittle, Palar, Hufstedler, et al., 2015; Whittle, Palar, Napoles, et al., 2015). Additionally, Whittle, Palar, Napoles,

et al. (2015) reported that that severe food insecurity often led to condom-less sexual transactions.

2.3.5.3 *Begging or committing a crime*

Begging for food or money to buy food was mentioned in eight of the reviewed articles. In four of these articles, only a small percentage of participants engaged in this activity (Anema et al., 2016; Booth, Begley, et al., 2018; Cordero-Ahiman et al., 2018; Lindberg et al., 2017). By contrast, Pollard et al. (2019) reported a higher percentage of Australian participants engaging in this practice, with 32% having reported begging on the street for money to purchase food.

Committing a crime with the intention of going to jail and receiving food while incarcerated was mentioned in four of the reviewed articles (Ahluwalia et al., 1998; Anater et al., 2011; Kempson et al., 2003; Seligman & Berkowitz, 2019). However, the number of people in the Anater et al. (2011) article who were engaging in this activity was minimal. Similarly, in Ahluwalia et al. (1998), only seven men spoke of committing a crime, with women not reporting the use of this unorthodox strategy. The review by Seligman and Berkowitz (2019) identified this practice as an individual coping strategy in order to access food within the justice system. The article by Kempson et al. (2003) described this activity as a new coping strategy, possibly suggesting the practice was becoming more prevalent and potentially normalised.

2.3.5.4 *Coping strategies and associated food safety concerns*

Fourteen of the reviewed articles mentioned coping strategies that could heighten participants' risk of food poisoning. For example, Anater et al. (2011), Hoisington et al. (2002), Kempson et al. (2002), Seligman and Berkowitz (2019) and Wood et al. (2006) reported that participants removed spoiled parts off food and Anater et al., (2011), Kempson et al. (2002) and Wood et al. (2006) found participants consumed date-expired foods as a coping strategy. Anater et al. (2011), Kempson et al. (2003) and Wood et al. (2006) also identified that participants were purchasing food in dented cans and damaged packaging, practices that could increase exposure to harmful bacteria (SA Health, 2019b). Kempson et al. (2003) also identified participants consumed fish caught from a contaminated river or purchased meat from private individuals. The authors described these practices as risky due to the nature of the food sources and the unknown handling, preparation and storage practices.

Anater et al. (2011) reported that participants ate other people's leftovers and a very small proportion admitted to eating so-called roadkill, defined as an animal that had been struck and

killed by motor vehicles. These two practices were also corroborated by Kempson et al. (2002) and Kempson et al. (2003); however, it was unclear where the leftovers had been obtained (e.g. from a rubbish bin). Similarly, the participants in Hoisington et al. (2002) also ate roadkill. Sourcing food from industrial skip bins (sometimes called 'dumpsters') or rubbish bins was reported in almost one-third of articles; however, this practice was not elaborated on by the authors (Anema et al., 2016; Booth, Begley, et al., 2018; Kempson et al., 2003; Lee et al., 2018; Lindberg et al., 2017; Pollard et al., 2017; Pollard et al., 2019; Whittle, Palar, Hufstedler, et al., 2015; Wood et al., 2006). The only articles that identified the consumption of non-food items were by Wood et al. (2006) and Kempson et al. (2002), where some individuals ate paper and pet foods to mitigate the effects of food insecurity.

2.3.5.5 Long-term nutritional impact of coping strategies

Fifteen of the 25 reviewed articles reported coping strategies that could have long-term nutritional impacts for the participants. Skipping meals and using portion control were identified in 13 of the reviewed articles (Ahluwalia et al., 1998; Anater et al., 2011; Cordero-Ahiman et al., 2018; Farzana et al., 2017; Hoisington et al., 2002; Jacknowitz et al., 2018; Kempson et al., 2002; Lee et al., 2018; McKay et al., 2023; Militao et al., 2022; Seligman & Berkowitz, 2019; Tabe-Ojong et al., 2022; Wood et al., 2006). Seligman and Berkowitz (2019) noted that mothers did this as a way of shielding their children from the effects of food insecurity, and Kempson et al. (2002) identified that parents ate less to ensure there was enough food for the rest of the family, a practice that was referred to as 'fasting'. Similarly, Ahluwalia et al. (1998) and Hoisington et al. (2002) reported that parents reduced their own portion sizes so their children had food. Other coping strategies identified in the articles that may have unintended consequences included binge eating when food became available (Anater et al., 2011; Kempson et al., 2002; Lee et al., 2018), suppressing hunger pangs with excessive fluid intake (Lee et al., 2018), consuming lower quality or cheap foods (Farzana et al., 2017; Hoisington et al., 2002; McKay et al., 2023; Militao et al., 2022; Tabe-Ojong et al., 2022; Wood et al., 2006) and eating a repetitive diet of tinned foods, pasta and bread (Hoisington et al., 2002; McKay et al., 2023; Militao et al., 2022; Wood et al., 2006).

2.3.6 Discussion

This scoping review examined existing literature on orthodox and unorthodox food acquisition practices utilised by food insecure adults. All the participants across the 25 articles reviewed were identified as low income and/or food insecure and had engaged in a variety of legal, illegal or risky

coping strategies. Although this scoping review identified 25 articles, the very nature of these coping strategies, along with factors such as stigma and shame, might lead to participants being unwilling to disclose details of illegal or risky practices.

Theme 1 spoke to the legal coping strategies utilised by food insecure adults. It is worth noting here that these coping strategies are also commonplace in food secure households, and therefore could be seen as orthodox and socially acceptable. Indeed, sharing food, using discount coupons, and bulk food purchasing, both within and outside of the family unit, are considered normal transactions, and these practices have been around for decades (Belk, 2010; Belk & Llamas, 2011). Therefore, the reliance on friends, family and neighbours for food and money to buy food was unsurprising and a common theme among the reviewed articles. However, there was no mention of whether this practice had any flow-on effect to those providing the assistance, that is, whether providing support to others inadvertently increases financial pressure. While the practice of friends and family supporting vulnerable people demonstrates compassion and generosity, it also sheds light on the ways in which food insecurity is represented as an issue to be addressed by individuals, without government intervention. It is also worthwhile noting that there are some groups of people who experience food insecurity, are socially isolated, and do not have access to any form of support network to draw upon in times of need; this may severely impact their ability to source food and might instigate the practice of unorthodox food acquisition.

Purchasing less-expensive foods was another strategy mentioned across the articles; however, the authors did not elaborate what the less-expensive foods were. This is an important distinction, as sustained consumption of energy-dense, nutrient-poor foods or ultra-processed foods (UPFs) has been linked to nutritional deficiencies and chronic diseases such as obesity, type 2 diabetes, cardiovascular disease and some cancers (Elizabeth, Machado, Zinocker, Baker, & Lawrence, 2020; Monteiro & Cannon, 2019; Moubarac et al., 2013). UPFs are produced from low-cost ingredients and have a long shelf-life, making them an attractive purchase for low-income individuals or those wanting to buy and store food in bulk (Monteiro & Cannon, 2019).

The financial and budgeting strategies utilised by study participants are a demonstration of their resilience, resourcefulness and ability to cope in uncertain financial situations. However, these coping strategies become less useful when there is little or no money to purchase food in the first instance. Several studies identified that food literacy, which comprises an individual's cooking and budgeting skills, is not linked to being food insecure (Huisken, Orr, & Tarasuk, 2017; Tarasuk, 2017;

Tuominen & Thompson, 2015). This suggests that food affordability, accessibility and income constitute fundamental reasons people cannot purchase food, rather than insufficient food literacy skills. Indeed, Reutter et al. (2009, p. 301) clearly point out that low-income adults are not “irresponsible spenders”. In fact, it is quite the opposite, as they are often engaged in resourceful ways of budgeting and money management strategies, thereby demonstrating resilience and tenacity (Reutter et al., 2009).

Other financial coping strategies used by food insecure adults are potentially problematic. For example, using a credit card or store credit, obtaining a loan, missing a bill or mortgage/rent payments, or delaying bill payments to purchase food may have long-term effects on an individual’s credit rating. They could also leave people worse off as they attempt to catch up these missed payments and any penalties incurred. The global rise of payday lending and Buy Now Pay Later¹⁴ (BNPL) (Glossary) schemes only add to a vulnerable person’s financial crises. Importantly, they have been termed “predatory lending” as there are negligible consumer protection laws in place to prevent this distorted power imbalance (Soederberg, 2014, p. 134). These types of financial products are increasingly popular due to aggressive and targeted marketing, their online presence, and because they are a quick and easy way of circumventing poor credit records to obtain finance (Chen, 2020). The for-profit microfinance industry, termed the “poverty industry” by Soederberg (2014, p. 133), is of concern, with consumer advocates expressing their fears that a lack of consumer protection, coupled with an industry that targets and preys upon vulnerable people, is potentially leading them into to a debt spiral, with one consequence being food insecurity (Blackwood, 2020; Kollmorgen, 2020). This review highlights their danger, and further work should accordingly seek to understand the ways in which such schemes impact on food insecure adults in the long term.

Theme 2 captured the use of illegal or risky coping strategies adopted by food insecure individuals. Almost all of the articles reviewed revealed the use of illegal or risky coping strategies that not only challenge social norms, but also the basic human rights of dignity and access to a safe, culturally and socially acceptable food supply. Such practices are of grave concern from a human rights and social justice standpoint. Chilton and Rose (2009, p. 1204) state that “the absence of food security implies a state of food insecurity” and is dependent upon government to implement

¹⁴ Buy Now Pay Later services allow approved applicants to pay for purchases in four interest-free payments, for example *Afterpay*; www.afterpay.com/en-AU

policies that enable the community to access food in a safe manner. Situations where people are breaking the law or using harmful and risky ways to obtain food could be considered a violation of the human right to food, due to their very unorthodox nature. The prevalence of these coping strategies in a majority of the reviewed articles suggests they are becoming normalised, which is cause for concern.

Beyond the violation of human rights, research participants reported exposing themselves to potentially life-threatening food poisoning through consuming food that might have perished, been incorrectly stored, or been dumped. Contaminated or unsafe food may not look, smell or taste any different (SA Health, 2019a) and as such, there may be no indication as to how long the food has been at that location (e.g. in a bin), what temperature it has reached, or whether it is safe to consume. It has been identified that people who retrieve discarded food from a rubbish bin, dumpster, or supermarket bin, are unlikely to report any occurrences of food poisoning due to the illegal nature of the activity (Anater et al., 2011). Furthermore, accessing these bins may involve trespassing on private property, which may carry a fine or imprisonment penalty. As such, it is possible that negative consequences associated with retrieving food from these locations are underreported in the literature.

The short- and long-term nutritional impacts of the reported coping strategies are also of concern. The practice of skipping meals or bingeing when food is plentiful is associated with poor nutritional and health outcomes. For example, Papan and Clow (2015) suggest this may lead to a food insecurity-obesity paradox, a cycle where the consumption of less healthy foods and the stress of being food insecure drives weight gain, obesity and chronic disease. Another study found bingeing when food is plentiful may cause disordered eating habits, leading to weight gain and obesity (Stinson et al., 2018). Four of the reviewed papers also mentioned parents had restricted their food intake to shield their children from the effects of food insecurity (Ahluwalia et al., 1998; Hoisington et al., 2002; Kempson et al., 2002; Seligman & Berkowitz, 2019). This protective response has also been echoed in a recent South Australian study by Velardo et al. (2021) where parents served their children food first and anything left over was for their consumption; a practice that was noticed by the children themselves despite attempts to the contrary. The unexpected stress and sadness associated with seeing loved ones go without food was identified as harmful and traumatic for children (Velardo et al., 2021).

Although the charitable or EFR sector was not the focus of this scoping review, it would be remiss to not include some discussion about the stigma surrounding access and utilisation of food from these services that might necessitate the use of unorthodox coping strategies. Stigma, low food quality, and limited choice has seen some food insecure adults preferring to seek out unorthodox sources rather than use food assistance programs (Vinegar, Parker, & McCourt, 2016). Similarly, in their study on homeless people accessing food relief, Pollard et al. (2019) found homeless people resorted to risky coping strategies for several reasons. These related to the strict eligibility requirements of food charities, the unsuitable or monotonous types of food offered at these organisations, or the lack of dignity experienced when using these organisations that contributed to stress, shame and stigma (Pollard et al., 2019). Vinegar et al. (2016) also reported similar findings, where limited opening times, long waits, the need to prearrange visits to obtain food and stringent qualification criteria led food insecure adults to source their food elsewhere. In a similar vein, recent research by McNaughton, Middleton, Mehta, and Booth (2021) described food relief as a source of anxiety and embarrassment for people accessing services. Feelings of shame and unworthiness often led to a “deep reluctance” to go to the service for food (McNaughton et al., 2021(p4)). Another discouraging factor that could limit access to food relief was the moral judgements, and sometimes open criticism, by the staff and volunteers who work in the centres (McNaughton et al., 2021).

2.3.7 Conclusion

This review confirms the existence of orthodox and unorthodox food acquisition practices among food insecure adults in a variety of industrialised and developing countries. These practices range from legal to illegal and risky, some of which are also becoming normalised. However, the literature is silent on the set of circumstances – or the ‘tipping point’ – leading to a person’s decision to go from sourcing food in an orthodox and socially acceptable manner to contemplate undertaking risky or illegal practices to obtain food. Although charitable and EFR agencies were not a focus of the scoping review, the link between food relief and unorthodox food acquisition practices warrants further investigation to understand why food insecure adults supplement their food intake from other sources. It is also important to understand how often they do this, despite having access to EFR. Only one study in this review interviewed nutrition educators, which points to a clear gap in the literature pertaining to the perspectives of frontline workers and volunteers in the EFR sector. As key stakeholders, it is important to understand food relief employees’ day to day experiences with food insecure people who acquire food using unorthodox coping strategies.

Further research into these perspectives is important to inform the delivery of policy and programs and provide valuable insight into how to intervene before the ‘tipping point’ to preserve health and moral dignity for people who are already experiencing precarious food environments.

The strength of our scoping review is the novel and important findings on the food acquisition practices of food insecure adults. Another strength is the worldwide approach that captures diverse economic, social and political contexts in the discussion of food insecure individuals. At the same time, we acknowledge these differences also limit the ability to generalise, which can make it difficult to compare and contrast responses to food insecurity and welfare provisioning in each country. We also acknowledge that shame and stigma associated with food insecurity may impact on the ways in which these practices are reported. Another limitation to our review is that it was conducted prior to the COVID-19 pandemic and therefore has not captured the unorthodox coping strategies that might have arisen from these unique circumstances.

2.4 Gaps in the literature and aims of the study

The scoping review introduced the terms ‘orthodox’ and ‘unorthodox’ and discussed the different coping strategies food insecure people use to acquire food or money to buy food; their significance to this study is discussed here. As mentioned earlier in this chapter, the Oxford Dictionary defines ‘orthodox’ as following or conforming to the traditional or generally accepted rules or beliefs of a practice, and “the ordinary or usual type, normal” (Oxford English Dictionary, 2021). Food security has also been further defined by the US Department of Agriculture (2020) as being “the ready availability of nutritionally adequate and safe foods” which are acquired in “socially acceptable ways (... without resorting to emergency food supplies, scavenging, stealing, or other coping strategies)”. Dowler and O’Connor (2012, p. 45) explain that socially acceptable ways of obtaining food are practices that are “dignified and in keeping with social norms”. It can then be assumed that shopping at a supermarket or farmer’s market or sharing food within the family unit is ‘usual’ and orthodox, whereas receiving food from an EFR agency or dumpster diving is not usual and could be considered ‘unorthodox’. Therefore, the initial focus of this study was to understand the orthodox and unorthodox food acquisition practices utilised by food insecure adults in order to address a knowledge gap in the literature. However, during data collection, it became evident that participants were sharing stories of adverse life events that tipped them into food insecurity. This led to subsequent interviews being modified to capture participants’ stories

of life events that triggered food insecurity, which then led to the use of orthodox and unorthodox food acquisition practices. Therefore, the aim of this study was to explore and understand the circumstances that led to a person becoming food insecure and document their orthodox and unorthodox food acquisition strategies used to cope with food insecurity.

2.5 Research questions

This study was guided by the following research questions:

1. Who is engaging in orthodox and unorthodox food acquisition practices in metropolitan Adelaide and what life circumstances tipped them into food insecurity?
2. What orthodox and unorthodox food acquisition practices are being utilised by food insecure people to mitigate the effects of food insecurity?
3. What did the COVID payments and cost-of-living payments mean for food insecure people?
4. How do food relief workers perceive emergency food distribution?

2.6 Research objectives

To answer the research questions above, the experiences of food insecure adults and EFR staff was guided by four specific objectives:

1. Investigate the set of circumstances (or tipping points) that lead to food insecurity and the need to source food using orthodox and unorthodox acquisition practices.
2. Understand the experiences of food insecure adults who access food using orthodox and unorthodox food acquisition practices.
3. Understand the impacts of COVID-19 especially during the time of the financial support payments.
4. Document the perspectives of EFR staff on the orthodox and unorthodox food acquisition practices being utilised by food insecure adults.

2.7 Chapter summary

This chapter presented the combined results of two scoping reviews, one conducted in January 2020 which was published, and the other in January 2024. This chapter also outlined the gaps in the literature and the resulting aims, research questions and objectives that guided the study. The next chapter, Chapter 3, discusses the methodology chosen to answer the research objectives, and explains how CGT applies to social justice research. Discussion of the process of theory generation and how rigour and trustworthiness is achieved using CGT is presented.

CHAPTER 3: METHODOLOGY

3.1 Chapter overview

Chapter 2 presented the results of two scoping reviews, highlighting the gaps in the literature, and outlining the research aims, questions and objectives. This chapter discusses the interpretative framework and research approach that was used to answer the research questions and objectives. A background to grounded theory and CGT is also presented, along with an explanation of why CGT was chosen, and its link with social justice research. Next, theory generation, as part of the CGT approach, is presented and how it links with the study findings. Importantly, reciprocity for the participant is explained and how this was achieved. Chapter 3 finishes with an analysis of rigour and trustworthiness in grounded theory research and how it was achieved using credibility, transferability, dependability and confirmability.

3.2 Interpretive framework – the constructivist paradigm

Constructivism guides how experiences of reality are interpreted, and the goal of this study was to understand how a person constructs their reality based on interactions with their world, by studying people in their natural setting (Charmaz, 2000; Creswell & Creswell, 2017; Denzin & Lincoln, 2000). This approach was appropriate for this study, which sought to understand and document the experiences of food insecure adults accessing EFR and seeking food utilising orthodox and unorthodox practices. In this work, it is important that the researcher attempts to construct this reality from the inside, allowing the data to reflect the experiences of food insecure adults accurately and truthfully (Charmaz et al., 2018). This ‘emic perspective’ gives the researcher an insider’s view, to accurately capture and document the participant’s language and meaning given to the social issue of food insecurity, thereby accurately recounting their experiences through their eyes (Olive, 2014; Willis, 2007).

3.3 Research approach

History, lived experience, the whole truth, unsanitised and unedited is our greatest learning resource. It is what informs social and structural change.

Grace Tame (2021)

3.3.1 Qualitative research

Researchers use qualitative research to discover and narrate people's actions and the meaning these actions have to them (Erickson, 2018). Qualitative methodologies aim to deeply understand a problem by seeking an explanation of processes and identifying the significance of the issue (Hesse-Biber & Leavy, 2006). A qualitative research approach was chosen for this study as it enabled the researcher to report on experiences of food insecurity and poverty, and the resulting orthodox and unorthodox food acquisition practices, from the perspectives of the participants (Bloomberg & Volpe, 2012). This study explored why food insecure adults utilised these practices and other coping strategies to manage their food insecurity, in order to elucidate participants' perceptions and voices. Grounded theory is one qualitative approach where the researcher uses a systematic process to gather, simultaneously analyse and interpret data, and generate theory (Creswell & Creswell, 2017). Further information about this methodology, and why it was adopted, is provided below.

3.3.2 Background of grounded theory method

Grounded theory is a systematic data collection and analysis method where theory is developed from data analysis; the research is thereby 'grounded' in the data, rather than the theory informing analysis (Charmaz, 2014). Grounded theory in its original form, under Corbin, Strauss and Glaser, was first positioned in the positivist worldview, and strongly linked with quantitative methods of research and the philosophy of reductionism (Charmaz, 2014, p. 12). This "outdated modernist epistemology" positioned the researcher's voice at the forefront and was still firmly rooted in the science of truth (Charmaz, 2014, p. 13). Historically, grounded theory emerged from studies of death and dying in hospital by sociologists Barney Glaser and Anselm Strauss. From these investigations, Glaser and Strauss produced theory around the "social organisation and the temporal order of dying" (Charmaz, 2014, p. 5). Glaser and Strauss challenged the traditional quantitative, positivist research approach often used to test hypotheses and quantify results, and

from this came a blending of the logic and structure of quantitative research alongside the emphasis on “emergent discoveries” that can be gained from qualitative methods (Charmaz, 2014, p. 9). Grounded theory has since been described as a “family of methods” (Bryant & Charmaz, 2013; Bryant et al., 2011, p. 11) or a “constellation of methods” (Charmaz, 2014, p. 14) because there are a set of guidelines and criteria for the collection and simultaneous analysis of the data, coding, memo writing, theoretical sampling and saturation, and theory generation (Bryant et al., 2011, p. 12). There are also different approaches to grounded theory, as outlined in this chapter.

Broadly speaking, what sets grounded theory apart from other qualitative methodologies is that the data collection and analysis occur simultaneously, with analytic codes coming from the data. In this way, the analysis is grounded in the data and not based on the researcher’s preconceived thoughts on theories (Charmaz, 2014). The possible theoretical explanations developed from the data go “beyond descriptive studies” and allow the researcher to provide in-depth conceptual understanding and explanation of the phenomenon being studied (Bryant & Charmaz, 2013; Charmaz, 2014, p. 8). Another differentiating aspect of grounded theory is the use of memos to “elaborate categories, specify their properties, define relationships between categories, and identify gaps” (Charmaz, 2014, p. 7). Theoretical sampling is another key aspect of grounded theory and involves modifying participant criteria and selecting participants who might answer specific questions; this process is used to refine any emerging theories (Levy, 2015) and is conducted after categories of data have been developed (Charmaz, 2011).

3.4 Constructivist grounded theory

CGT is the type of grounded theory that was selected for this study. CGT places the focus on the more flexible inductive, comparative, emergent and open-ended approach, which Charmaz developed from Glaser and Strauss’s original works (Charmaz, 2014). CGT aligns with the constructivist paradigm, in that reality has multiple constructions based on a person’s interactions in life, the environment, their society and culture, and the researcher and participant are linked through their interpretations of these interactions (Hall, Griffiths, & McKenna, 2013; Mills, Birks, & Hoare, 2017). Charmaz (2014) acknowledged this involvement of the researcher, considering them an active participant in the development of codes and categories, thereby suggesting the researcher’s own values also ‘construct’ this interpretation (Bryant, 2014; Charmaz, 2014).

CGT is appropriate for studies where little research has been done in the area of interest, and where the study intends to interrogate the phenomenon rather than describe and explain (Birks & Mills, 2011; Creswell & Poth, 2018). CGT is also considered a powerful method for social justice enquiry, allowing the researcher to address inequities concerning food, poverty and human rights, in order to influence policies and facilitate structural changes through its wider scope and in-depth analysis (Charmaz et al., 2018). This method is also suited to answering the research questions posed in this study as it “addresses power and inequality at micro, meso, and macro levels of analysis” (Charmaz et al., 2018, p. 411).

As such, this qualitative study was informed by CGT, which guided the collection, simultaneous analysis and constant comparison of the data, and the construction of theory. CGT provided an explanation of how and why food insecure adults utilised orthodox and unorthodox food acquisition practices, and the meaning they gave to this practice and the food they retrieved (Corbin & Holt, 2011). The specific context of this study required further investigation to understand how food insecure adults respond to their environment (poverty and food insecurity), and how they ascribe meaning to the practice of orthodox and unorthodox food acquisition (Corbin & Holt, 2011). Similarly, CGT allowed the researcher to explore emerging concepts of adversity and oppression that were arising from the data, and capture the extrinsic life events during childhood that persisted into adulthood. CGT also allowed the construction of theory to explain these complex social processes that influence a person and established their path into food insecurity and poverty, and to engage in orthodox and unorthodox food acquisition practices (Charmaz, 2014). Additionally, CGT was chosen for this study as it enabled the research to go beyond the descriptive and highlight social injustices and inequalities, both at the organisational and individual levels, in particular of power, social structures, and information dissemination (Charmaz, 2014).

Theoretical sampling is a tenet of grounded theory and should not be confused with other qualitative research approaches (Charmaz, 2006). It is the exploration of hunches and other questions that lead to a modification of the data-collection process, to investigate new avenues of thought (Charmaz et al., 2018). Charmaz (2006) states that theoretical sampling is a process that assists with conceptual and theoretical development, and not about gaining a representative population sample. Additionally, theoretical sampling allows the researcher to check and refine their codes and categories by ensuring the categories are robust, which helps to focus data

analysis and ultimately assist with theory generation (Charmaz, 2006; Charmaz et al., 2018).

Charmaz (2006, p. 100) refers to theoretical sampling as a process that “directs you where to go”.

Theoretical saturation is a concept developed by Glaser and Strauss and occurs when data collection “fails to add properties or dimensions to an established category” (Birks & Mills, 2015, p. 111). The category is essentially ‘saturated’ and nothing more can be found in the data. It is at this point where theoretical sampling has yielded no new codes and data collection ceases (Birks & Mills, 2015). Charmaz (2006, p. 113) suggests this occurs when the data “no longer sparks new theoretical insights, nor reveals new properties of your core theoretical categories”. She also cautions that this saturation is not the repetition of the same events or stories but rather the lack of new emerging categories (Charmaz, 2006) and where the categories and sub-categories are considered clear and robust, and theory can be developed (Birks & Mills, 2015).

3.5 Theory generation

Birks and Mills (2015) suggest theory generation starts with the analysis of the first piece of data, and continues throughout data analysis and the generation of initial and focused codes. Similarly, saturation of the major themes is also part of theory generation and is the beginning of the development of high-level “conceptual abstraction that is beyond description” (Birks & Mills, 2015, p. 115). This is achieved through initial coding for actions rather than themes, allowing the researcher to establish direction and allowing the high-level themes to lead into theory development (Charmaz, 2014). Furthermore, Charmaz (2014, p. 240) states that CGT identifies and analyses the differences and distinctions between the “hierarchies of power” that lead to adversity and oppression of impoverished and food insecure adults. Charmaz (p. 241) also suggests locating the “participants’ meaning and actions within the larger structures and discourses of which they may be unaware” as it reflects their adversity and oppression, the utilisation of orthodox and unorthodox food acquisition practices, and the current discourses and power relationships. Charmaz (p. 240) refers to this as learning the “how, when, and to what extent” the social issue is entrenched within the structures that contribute to food insecurity and poverty.

In this study, theory generation started initially during the final stages of data analysis and through the process of presenting the results. Figure 2 shows the researcher’s thought processes during

this period of analysis. Theory generation then continued into the writing of Chapter 6, where the main themes and sub-themes were interrogated for their robustness and ability to formulate theory. From this, Figure 3 was developed to explain the findings from this study, acknowledge what already exists in the literature, and recognise that food insecurity and poverty are a form of trauma. Following the application of the theory generation principles of CGT, the trauma-informed care and policy development framework was developed. More detail on how this framework can be applied to policy, practice and further research is discussed in greater detail in Chapter 6, on page 150.

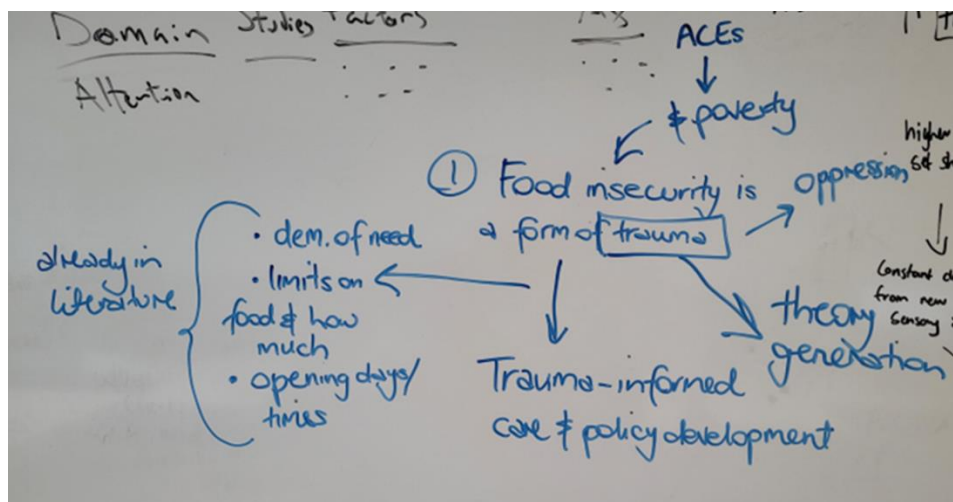


Figure 2 - Preliminary thoughts on theory and trauma

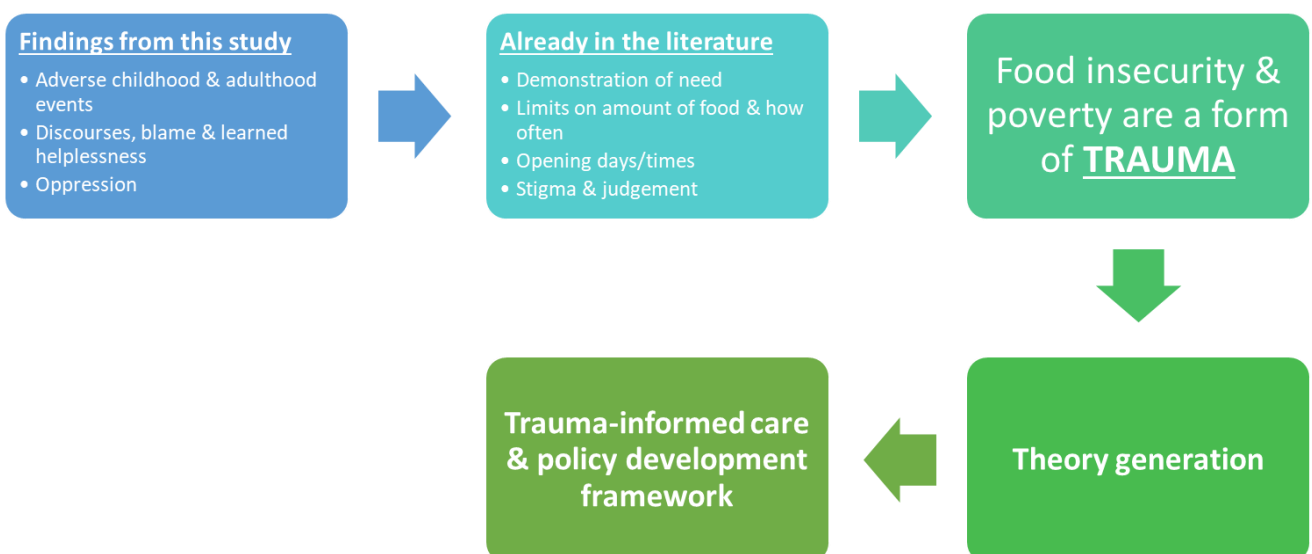


Figure 3 - Food insecurity and poverty are a form of trauma - the trauma-informed framework

It must be acknowledged that focusing only on orthodox and unorthodox food acquisition practices might have yielded a different outcome. However, the use of CGT allowed the researcher to adapt to emerging data around extrinsic life events that occurred during childhood and into adulthood. This new data allowed insight into participants' stories of adversity and oppression, which then began the thought process of trauma, into trauma-informed care and policy development as a framework for theory development. Trauma-informed social policy is already an established framework for policy analysis and development; however, it has rarely been applied to the provision of EFR and financial counselling that a food insecure adult may engage with (Bowen & Murshid, 2016; Brase et al., 2019; Hecht, Biehl, Buzogany, & Neff, 2018). By taking this trauma-informed focus, EFR workers can change their interactions with food insecure adults to one of responding to different types of trauma and acknowledging that food insecure adults may be survivors of this trauma (Brase et al., 2019). By utilising a trauma-informed framework, EFR agencies can respond to trauma with empathy and compassion, enact policy changes or develop new policies to ensure the food relief process is supportive rather than oppressive, and advocate for an increase in government funding for either the organisations or for increases in social assistance payments. EFR agencies are also uniquely positioned to empower food insecure adults by providing a safe space where they can share their experiences of trauma and resulting orthodox and unorthodox food acquisition strategies, without fear of judgement and stigmatisation.

3.6 Reciprocity

Reciprocity is an essential aspect when interviewing vulnerable participants. Reciprocity is the act of giving and receiving through the exchange of ideas for mutual benefit (Gallegos & Chilton, 2019) and involves the researcher giving participants something in return that makes a positive difference in their lives or creates social change (Liamputtong, 2007). Dickson-Swift, James, Kippen, and Liamputtong (2007) describe it as providing a human element through the opportunity of listening and being interested in people's stories.

One way of providing reciprocity is feeding the results of the study back to the participants. In this study, posters and infographics will be provided to the EFR agencies, to be placed on their noticeboards, and infographics posted on the social media pages of the Anti-Poverty Network SA (Glossary) (Booth, 1999; Liamputtong, 2007). The ability to identify gaps in the services provided

by EFR agencies is also valuable information for food insecure adults accessing the services and will enable the agencies to make changes to their procedures to benefit those who are food insecure, reducing the barriers to their services, or even improving the level of dignity and compassion shown to people accessing their services. This study also provides important information about extrinsic life events that are a potential prelude to food insecurity and poverty and the resulting use of orthodox and unorthodox food acquisition strategies. Identifying adverse life events and their impact on an individual may also be used to guide policy development or enact social change. There is also the cathartic benefit to participants who can vent their feelings about food insecurity, the social welfare system and the lack of systemic justice. This is particularly relevant for those participants who had experienced trauma and loss, giving them the opportunity to talk and be listened to (Felsher, Wiehe, Gunn, & Roth, 2018; Ritchie, 2015).

3.7 Rigour and trustworthiness in grounded theory studies

Rigour and trustworthiness in a qualitative study refers to the trust in the findings and can be demonstrated using the quality criteria (Korstjens & Moser, 2018) outlined below.

3.7.1 Credibility

Credibility is the 'confidence' in the research findings and can be achieved in a variety of ways, for example, through prolonged engagement in the field and the use of triangulation (Korstjens & Moser, 2018). Prolonged engagement in the field was achieved through immersion in the data and the inclusion of participants' voices in the analysis and write up (refer to Figure 5 on page 58 in Chapter 4). In this study, the researcher collected interview data for both S1 and S2 from February 2021 (pilot) and continued through to August 2023, comprising 30 months in the field.

Using triangulation to achieve credibility can be done in several ways. For example, in this study, data triangulation was achieved by collecting data from multiple sources, including through different EFR agencies, and via Facebook groups. Data triangulation was also achieved by using two different samples of stakeholders – food insecure adults' perspectives alongside those of EFR workers – and the results from S1 data collection was also woven into the interview guide for S2. The research team's involvement in coding, analysis and interpretation decisions also meant that investigator triangulation was achieved (Korstjens & Moser, 2018).

Credibility was further achieved through pilot testing the interview guides for both samples (S1 and S2), allowing modification to reduce any ambiguity of the questions. Questions for both S1 and S2 were also further refined to meet the research objectives, and to capture the economic changes in Australia and during COVID-19. For example, during the data collection for S1, several COVID-19 payments and one cost-of-living payment were given to recipients of social assistance payments and as such, questions around the use of this extra money were included in the interview scripts for both S1 and S2 (refer to Appendices 5 & 6).

3.7.2 Transferability

According to Korstjens and Moser (2018, p. 122), transferability is achieved by the description of the “participants and the research process” that will enable another researcher to transfer and replicate the findings to their own setting. For example, in this study the description of the sample, setting, demographic data, interview procedure and changes in the interview questions to reflect the iterative data collection and analysis process provide an opportunity for another researcher to assess the transferability of the findings to their own setting (Korstjens & Moser, 2018). The use of other forms of data such as field notes and memos, further add to the transferability of this study’s findings (Charmaz, 2006).

3.7.3 Dependability and confirmability

Dependability is reflected in an accurate and transparent audit trail of every decision that was made in the research process and at team meetings, and this was achieved by using a research journal and post-interview memoing, which were completed after each interview and during the transcription and analysis stages. A research journal was also utilised to document the decisions made during the study and the associated rationale for making changes to data collection.

3.8 Chapter summary

This chapter discussed the research methodology and the interpretative framework used to understand food insecurity, poverty, and orthodox and unorthodox food acquisition strategies. The next chapter, Chapter 4 will focus on the methods used to recruit participants, collect, analyse and interpret the data. Chapter 4 also presents the methods used to code the interviews following the CGT approach, the generation of the three main themes and their sub-themes. Finally, Chapter 4 maps the themes with the research objectives and summarises the researcher’s reflexivity, positionality, and the use of memos.

CHAPTER 4: METHODS

4.1 Chapter overview

The previous chapter outlined the rationale for the qualitative research methodology, the CGT approach, and interpretive lenses used to understand food insecurity, poverty, and orthodox and unorthodox food acquisition strategies. This chapter focuses on the population and study sample recruited, the different recruitment strategies utilised for participants in S1 and S2, the data-collection instruments utilised, and data-analysis methods that led to theory generation. In addition, special consideration is given to research involving food insecurity and impoverished populations – both for the participant and the researcher. Finally, the chapter outlines how the three main themes map to the research objectives and presents a detailed discussion on researcher reflexivity, positionality and the use of memos in CGT.

4.2 Population and study sample

This study sought to explore the nature of orthodox and unorthodox food acquisition practices used by food insecure adults and their experiences with EFR agencies in metropolitan Adelaide, South Australia. As such, there were two population samples recruited to answer the research questions and objectives: (1) food insecure adults who access or have accessed EFR agencies in metropolitan Adelaide, South Australia (referred to as S1), and (2) staff and volunteers who work in these EFR agencies (S2).

Given sampling for this study was based on theory generation rather than a representation of an entire population group (Charmaz, 2014), a purposive and snowball sampling method was employed. These qualitative sampling techniques allowed for selection of information-rich participants who were not necessarily representative of the population of food insecure adults (Grbich, 1999). Sampling continued until no new codes and new concepts were emerging and theoretical saturation was gained (Urquhart, 2013).

4.3 Recruitment strategies

Throughout this thesis, the concept of food insecurity highlights certain population groups who are more at risk of being food insecure. These research participants are defined as those who “experience several factors that diminish their autonomy and marginalise their lives” (Liamputtong, 2007, p. 3), and those who are “economically or educationally disadvantaged” (Stone, 2003, p. 149). Including impoverished and food insecure people in research is important to understand social justice and human rights issues from their point of view, understand how they have constructed this reality, document their lived experiences, and generate meaning from their interactions with EFR agencies and society (Creswell & Creswell, 2017; Gaudet & Robert, 2018). Barratt, Norman, and Fry (2007), in their study of people who inject drugs, revealed that the benefits of researching this population group included improvements to drug-related policies and practices, awareness raising and the provision of true information about drug use. Failure to include these people in research can also negatively impact findings and policy development from their under-representation (Sydor, 2012).

Despite its importance, research with certain population groups presents additional challenges that need to be carefully managed by a researcher, including those specifically related to recruitment. Within a research interview, discussions may be sensitive and shameful in nature, especially when recalling traumatic experiences that participants may not want to discuss or admit to. For example, in the case of exploring food insecurity and poverty, this could include sharing traumatic life events, or their use of risky or illegal practices to obtain food (Bonevski et al., 2014; Ellard-Gray, Jeffrey, Choubak, & Crann, 2015; Liamputtong, 2007; Sydor, 2012; Weibel, 1990). There are numerous challenges when recruiting and interviewing food insecure and impoverished people, including a lack of trust in researchers, perceptions that the research will not be beneficial to research participants, and the potential harms that may arise from participating (Bonevski et al., 2014). For some participants, there is also the fear of their illegal activities being exposed and the risk of criminal prosecution (Bonevski et al., 2014).

Given the population sample of food insecure adults could be considered hard to reach or hidden (Bonevski et al., 2014; Ellard-Gray et al., 2015; Sydor, 2012; Weibel, 1990) a passive recruitment strategy was utilised in this study. Lee et al. (1997) describe passive recruitment as a way of engaging participants using networks that are trusted and known to the participant instead of

approaching them directly. In this study, the networks utilised were EFR agencies that had existing contact and relationships with potential participants.

4.3.1 Passive recruitment of Sample 1 – food insecure adults

S1 comprised food insecure adults who had previously used or were currently accessing EFR services in metropolitan Adelaide. The use of established networks is a valuable and successful way of accessing participants in lower socio-economic groups (Stuber, Middel, Mackenbach, Beulens, & Lakerveld, 2020) as the EFR agencies and the people who work in them are trusted and therefore this trust may be transferred to the researcher (Liamputtong, 2007). This strategy has also been used by Ellard-Gray et al. (2015), where the use of community groups for recruitment overcame the barrier of distrust in the research process and researchers.

In September 2020, three EFR agencies (listed below) were approached at one of their monthly online meetings where the researcher was invited to discuss the aim of the study, process of recruitment, and the broad benefits and requirements of participation. These specific EFR agencies were chosen because they had an existing relationship with the researcher established through volunteer work with the Onkaparinga Food Security Collaborative (OFSC)¹⁵ (Glossary), and at previous community meetings and events. All three agencies indicated their willingness to participate in passive recruitment on behalf of the researcher.

Informal meetings with EFR agency key staff were held in January 2021 (Christies Beach Baptist Church [CBBC] – Glossary), May 2021 (MarionLIFE – Glossary), and August 2021 (Adventist Development and Relief Association [ADRA] Community Pantry – Glossary) where the objectives of the study were outlined, the process of passive recruitment, and information on the participant pack to be handed out to food insecure adults accessing the service were discussed. The participant pack included the study flyer, letter of introduction, information sheet, informed consent form and the researcher's contact details so any interested person could phone and book an interview or ask further questions about the study (Appendix 2 on page 160). In addition, an A4 study flyer was provided to the agencies, to be placed on their noticeboards, and a smaller A5 version to go into food parcels that would ordinarily be distributed to their clientele.

¹⁵ The Onkaparinga Food Security Collaborative is a collaborative of community organisation working together in the Onkaparinga council region to achieve healthier communities by connecting people to nutritious food, to community education, and to advocacy; <http://onkaparingafoodsecurity.org.au/>

4.3.1.1 Christies Beach Baptist Church

The CBBC is in the suburb of Christies Beach, in the City of Onkaparinga council region, in metropolitan Adelaide, South Australia. CBBC provides emergency assistance including food parcels, pharmacy vouchers, agency referrals, and limited help with bills (CBBC, 2022). The trained volunteers have experienced their own financial crises (CBBC, 2022). The EFR agency is open for phone bookings between 9.00am and 9.30am on Mondays, Tuesdays and Fridays, with appointments with counsellors from 11am on the same day (CBBC, 2022). The emergency relief service is only available during South Australian school terms (CBBC, 2022).

4.3.1.2 MarionLIFE

MarionLIFE is a not-for-profit, faith-based community organisation and registered charity that provides support to individuals and families in need (MarionLIFE, 2020b) who reside in the Mitcham, Holdfast Bay, Marion and Onkaparinga council regions in metropolitan Adelaide, South Australia (MarionLIFE, 2020a). Two visits every six months are provided to food insecure people on social assistance payments, in the form of food and food vouchers, toiletries, blankets, clothing and some bill assistance (MarionLIFE, 2020a). Emergency relief is available between 9am and 12 noon, Monday to Thursday, on a first-come-first-served basis (MarionLIFE, 2020a).

4.3.1.3 Adventist Development and Relief Association Community Pantry

The ADRA Community Pantry is a faith-based food pantry that offers free or low-cost food to those in need of EFR, without proof of social assistance benefits (SA Community, 2022b). It is affiliated with the Morphett Vale Seventh-day Adventist Church in metropolitan Adelaide, South Australia whose vision is to “participate in the continuing work of Jesus” through “connecting with community” and “meeting and ministering to people’s needs” (Morphett Vale Seventh-day Adventist Church & Community Centre, 2017). The pantry is open on Mondays and Fridays from 12 noon to 2pm. ADRA also has a café that offers vegetarian meals (voluntary gold coin donation) on a Thursday night during South Australian school terms (SA Community, 2022a).

4.3.1.4 Gatekeeper role of the agencies

Despite the usefulness and convenience of using EFR agencies for passive recruitment, additional considerations were taken by the researcher (Liamputtong, 2007). Gatekeepers are persons or organisations who control access to resources (Thomas, Darab, & Hartman, 2016) and in this study, they are the EFR agencies that determine a food insecure person’s level of ‘need’ and provide a variety of services. In controlling the access to food insecure people, the gatekeeper

could potentially keep the researcher out, either to protect the person from the researcher, or because the gatekeeper may not have access to all members of the population group (Ellard-Gray et al., 2015). In this study there was also the possibility of gatekeeper agencies screening potential participants and selecting people they thought were suitable to take part, therefore subtly influencing the population sample (Sydor, 2012), which could be seen as a limitation to the study. It is unknown whether this practice occurred; however, it was potentially overcome by the utilisation of different avenues of passive recruitment, such as the inclusion of flyers in food parcels and on noticeboards, effectively bypassing the 'selection' process but still maintaining the trustworthiness inferred by the EFR agency. Bypassing the gatekeepers was also overcome by utilising a different recruitment strategy, as detailed below.

4.3.2 Active recruitment of Sample 1 – food insecure adults

In addition to bypassing the potential influence of the EFR gatekeepers, it was also noticed by the researcher that recruitment via their agencies was very slow, possibly compounded by closures during school holidays and the limited interactions with potential participants. Active recruitment was utilised to overcome this delay and involved direct contact with the population sample by the researcher (Lee et al., 1997). In this instance, Facebook and opportunistic recruitment were utilised. Social media is a powerful way of engaging a large and diverse population, in particular hard-to-reach populations (Thornton et al., 2016). Facebook is being used by six out of 10 Australians (Correll, 2022) making it a cost-effective way of reaching a larger population sample. The researcher is a member of several community groups on Facebook where information about the study was posted. These groups were the *Current Members Only - Anti-Poverty Network SA*, *Anti-Poverty Network SA Forum*, the *Adelaide Dumpster Diving and Urban Foraging Community*, and the *Adelaide Dumpster Trading* (refer to Appendix 7 on page 190 for examples of posts on these social media pages). Recruitment via social media yielded an additional five participants.

The opportunistic recruitment occurred at two separate events where the researcher introduced herself as part of round table discussions. On these occasions, several people indicated that they were interested in having a chat and being interviewed. These events were in July 2022 at a morning tea hosted by the South Australian Council of Social Service (SACOSS)¹⁶ (Glossary), and in

¹⁶ South Australian Council of Social Service is a non-government health and community sector organisation that offers research, policy development, advice and advocacy for disadvantaged people; <https://www.sacoss.org.au/>

October 2022 at the City of Onkaparinga's *Affordable Onkaparinga*¹⁷ workshop. Recruitment via these events yielded another three participants.

4.3.3 Active recruitment of Sample 2 – staff and volunteers at the emergency food relief agencies

Active recruitment for S2 occurred towards the end of the data collection and analysis of S1 interviews. The researcher already had a relationship with many of the staff at the EFR agencies, which was established during the S1 recruitment stage. During the informal meetings with each EFR agency to discuss the recruitment of S1, the volunteers and staff present indicated they were happy to be involved. Follow-up emails were sent after the completion of S1 interviews to confirm (a) whether they were still willing to be involved, and (b) to organise a date, time and location for the interview. The EFR agency staff were also provided with a letter of introduction, information sheet, and consent form via email (Appendix 3 on page 171). The researcher also utilised networking at other events to recruit for S2, which provided access to participants from other organisations that might not have been included. Snowball sampling was utilised in this instance and provided an extra three participants.

During data collection for S2, it was noticed very few volunteers in the EFR agencies were aware of any orthodox or unorthodox food acquisition practices being utilised by their clients. This required a more targeted approach to pursue the question of whether this knowledge of food acquisition strategies was limited to only paid staff and recruitment was expanded. Further interviews with paid staff at government-funded agencies yielded more rich data on the use of orthodox and unorthodox food acquisition strategies being utilised by clients accessing their services.

4.4 Ethics approval and informed consent

Ethics approval was sought from the Flinders University Social and Behavioural Research Ethics Committee and approval was granted on 11 June 2020 (approval number 8641). Modification of the ethics approval to include recruitment via social media was granted in June 2021.

¹⁷ *Affordable Onkaparinga* is a service offered by the City of Onkaparinga that provides access to a variety of services and support to the community; it also runs regular workshops that are attended by community groups, advocacy groups, Members of Parliament and other interested parties; <https://www.onkaparingacity.com/Community-facilities-support/Affordable-Onkaparinga>

The research team initially agreed that a \$20 Foodbank voucher¹⁸ be offered to S1 participants for their time. However, it was during the active recruitment stage that the researcher was made aware that not all participants would be happy with a Foodbank voucher. As such, approval from the ethics committee was sought to include a \$20 supermarket voucher as an alternative. This additional approval was granted in September 2021. It was agreed by the research team that S2 participants would not be remunerated for their involvement in the study.

For both S1 and S2, once the participant had indicated their interest in the study, a date, time and location were agreed upon and the study information and informed consent form were emailed to them. A hard copy of the informed consent form was also brought to the interview to account for participants without printer access. This form was signed before the commencement of the interview, giving the participant time to change their mind and withdraw. At the commencement of the interview recording, the participant was also made aware that they could choose to not answer specific questions, or they could cease the interview at any time, without question or penalty.

4.5 Researcher wellbeing

There are specific and important considerations for researcher wellbeing when conducting sensitive research, especially with those participants who have experienced adversity, oppression and traumatic life events. The revelation of sensitive and emotional stories can have an impact on a researcher's mental health and their own emotional wellbeing, particularly in the case of doctoral researchers who are 'learning the ropes' of research (Velardo & Elliott, 2018). In particular, feelings of overwhelming guilt, sadness, and the avoidance of immersing themselves in the data over and over again were found by Velardo and Elliott (2021) in their study on the wellbeing of doctoral students that highlighted the importance of self-care during the research process. Self-care and emotional wellbeing were deemed a priority in this study, therefore specific strategies such as debriefing with supervisors, a trusted friend and other colleagues were employed, especially when managing emotions that arose from the interviews (Velardo & Elliott,

¹⁸ A Foodbank voucher allows the holder to purchase a nominated amount of food from a Foodbank Community Food Hub. These vouchers are only available from EFR agencies (and researchers) and can be 'agency pays' or 'user pays'; the vouchers provided in this study gave S1 participants \$20 to use at the Food Hub;
<https://www.foodbank.org.au/SA/food-hubs/?state=sa>

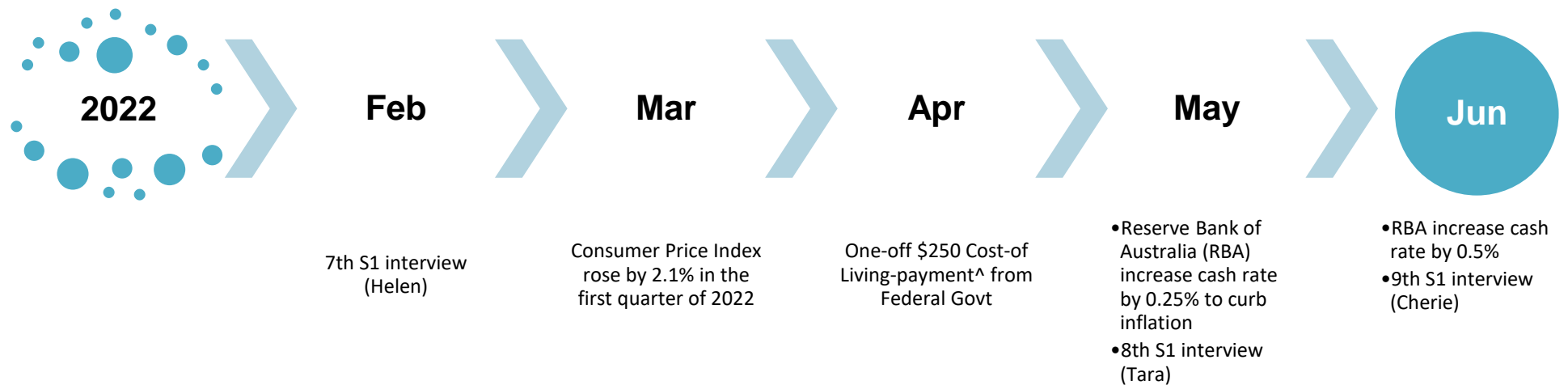
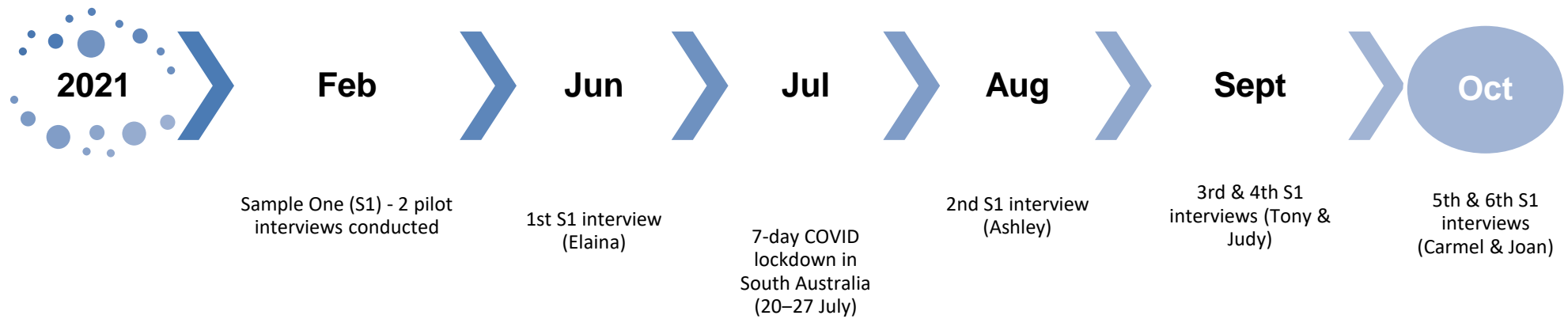
2018). Other strategies included using memos to document the researcher's feelings of privilege, spacing out the participant interviews, and taking rest breaks during transcribing and data analysis to minimise emotional trauma and burnout. This was especially important to minimise the emotional burden associated with sensitive research (Dickson-Swift et al., 2007; Velardo & Elliott, 2021). During this study, the researcher transcribed her interviews, something that Dickson-Swift et al. (2007) state can become emotional, awkward and uncomfortable when hearing the participants' stories again. Again, peer debriefing and memoing became valuable tools during this process, especially when experiencing feelings of guilt associated with privilege and discomfort with the perceived injustice experienced by participants.

4.6 Data collection

Data were gathered via semi-structured, face-to-face interviews to enable all participants in S1 and S2 to tell their stories with minimal influence from the researcher. All interviews were conducted in a private room and were audio recorded to facilitate transcription and data analysis.

S1 interviews were conducted in multiple locations depending on the recruitment route. For example, participants referred by the CBBC were interviewed at that location. Similarly, for any participant recruited via ADRA, a meeting room was utilised at the Morphett Vale Seventh-day Adventist Church. For those participants who were recruited via social media, a meeting room at the Flinders University Victoria Square campus was utilised. After each interview, the participant was given the choice of either a \$20 Foodbank voucher or a \$20 Coles voucher. S2 interviews occurred in a private room at the respective EFR agency, with one interview occurring in the participant's home as this was her place of work.

Data collection for S1 spanned 18 months from February 2021 to November 2022, taking into account the delay between ethics approval being granted and the COVID-19 pandemic restrictions imposed (see also COVID-19 measures for researchers on page 57). S2 interviews commenced in October 2022 and continued until August 2023.



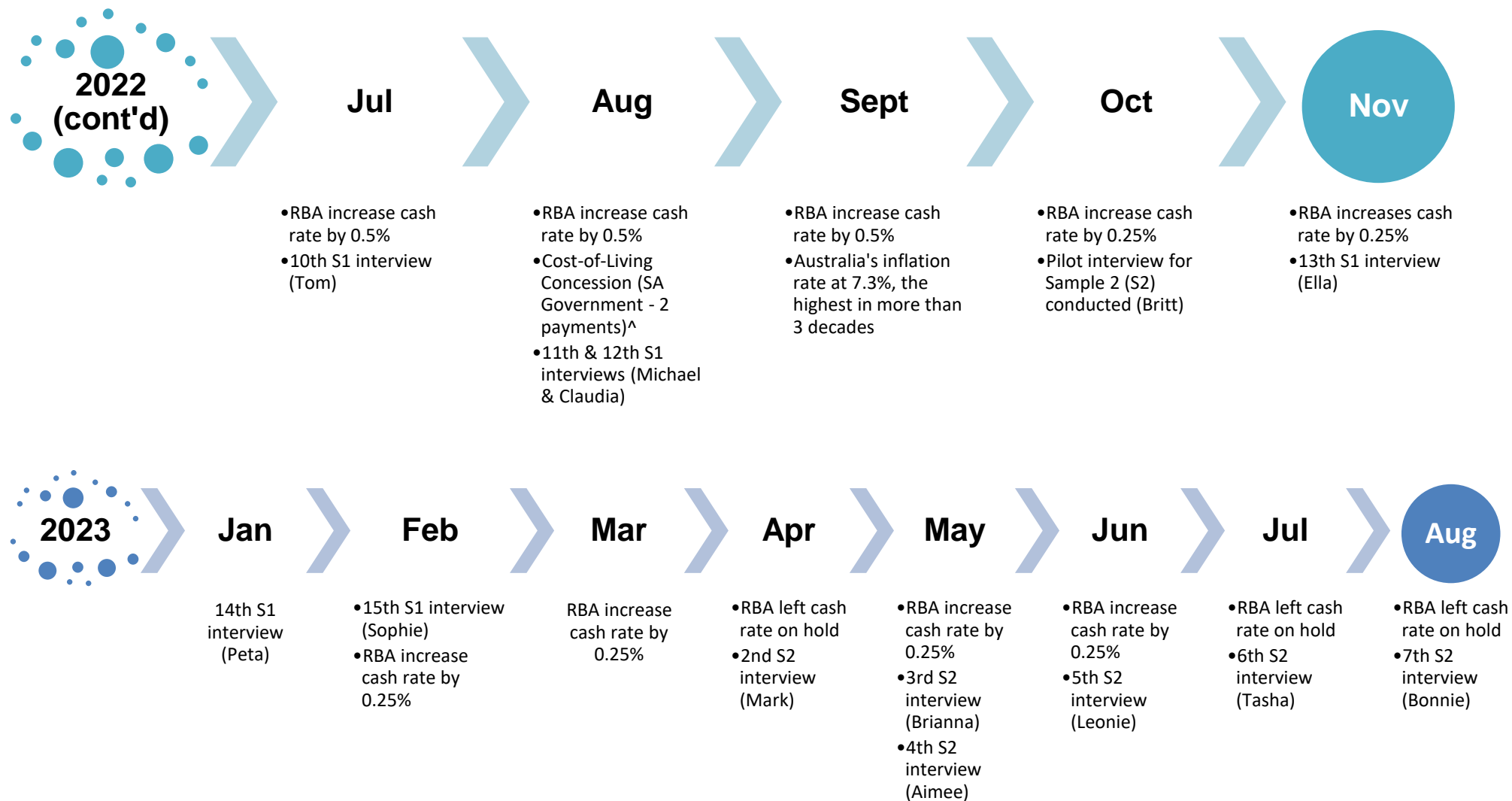


Figure 4 - Timeline of data collection for Samples 1 and 2, the COVID-19 lockdowns in South Australia, and Australia's cash rate and cost-of-living increases (2020–2023)
Source: Reserve Bank of Australia (2022)

During data collection for S1, South Australia experienced two lockdowns in response to the COVID-19 pandemic, in November 2020 and July 2021. Additionally, cost-of-living and interest rate increases began in March 2022, and the Reserve Bank of Australia continued to increase the cash rate for 10 consecutive months (Reserve Bank of Australia, 2022). In response to this, the Australian state and federal governments provided various supplement payments and cost-of-living increases to social assistance payment recipients. A detailed timeline is in Figure 4 - Timeline of data collection for Samples 1 and 2, the COVID-19 lockdowns in South Australia, and Australia's cash rate and cost-of-living increases (2020–2023) which pinpoints the two lockdowns in South Australia in response to the COVID-19 pandemic, the commencement of pilot interviews and participant data collection, as well as the cost-of-living increases/cash rate increases by the Reserve Bank of Australia. Further information on the social assistance payments and cost-of-living payments can be found in the Glossary of Australian and State Government social assistance payments and services, and Coronavirus Supplement and Economic Support payments on page xxiii.

4.6.1 Instruments – Sample 1

Three data collection instruments were utilised for S1 – the 6-item HFSSM and demographics survey (Appendix 4 on page 176), and interview guide (Appendix 5 on page 179).

4.6.1.1 *United States Household Food Security Survey Module*

The HFSSM was used to ascertain the level of household food security for each participant. It is a validated tool that provides an effective and accurate way of establishing household food security status and is considered to be the 'gold standard' worldwide (Butcher, O'Sullivan, Ryan, Lo, & Devine, 2019; McKechnie, Turrell, Giskes, & Gallegos, 2018). The 6-item survey module was chosen over the 10-item or 18-item module as it was considered to be less of a burden on the participant and was deemed by the research team as adequate to capture food security status (Blumberg, Bialostosky, Hamilton, & Briefel, 1999; Butcher et al., 2019). Chapter 5 presents the results of this survey on page 67.

4.6.1.2 *Demographic survey*

Along with their food security status, participants in S1 were also asked demographic questions such as age, gender, suburb they reside in and level of schooling. Questions on what government support payments they received as well as their household structure were also included in this survey. The results of this survey are presented in Chapter 5 on page 68.

4.6.1.3 Interview guide

The interview guide was developed by mapping the questions to the research objectives and was piloted in February 2021 on two people recruited from the CBBC. The guide was then significantly modified to improve understanding and remove any ambiguity in the questions asked (refer to Appendix 5 on page 179 for the interview guide and modifications made). Questions about risky and illegal food acquisition practices were also modified slightly to make them less confronting, and pictures of risky and illegal food acquisition practices were also used to prompt participants' thinking and to provide examples for consideration. Because of these substantial changes, the two pilot interviews for S1 were not included in the final sample.

Because data collection spanned from June 2021 to February 2023, there was a need to capture the changing economic landscape to adequately reflect people's current circumstances. To do this, the interview guide was modified slightly. For example, at certain points it was deemed necessary to include specific questions on the impact of the withdrawal of the CS and ES payments (Glossary), any recent cash handouts from the state and federal governments during COVID-19, and the impact the cost-of-living handouts had on the participant. Further information pertaining to these contextual changes was outlined in Figure 4 - Timeline of data collection for Samples 1 and 2, the COVID-19 lockdowns in South Australia, and Australia's cash rate and cost-of-living increases on page 54.

The interview guide for S1 also featured a short introductory explanation of the researcher's personal background and interest in the study, partly to provide information about the research context, and partly to build rapport and put participants at ease. Building rapport is a two-way process, whereby the researcher gives information about themselves as well as receiving information from the participant. This was achieved at the beginning of the interview where the researcher shared her story of volunteer work with OzHarvest (Glossary), journey through university and other research interests, and how she came to be conducting research on this topic. Other strategies the researcher used to put the participants at ease and build rapport was dressing in shabby jeans and an old t-shirt, something Vance (1995) and Booth (1999) recommend when researching these hard-to-reach populations.

4.6.2 Instrument – Sample 2

An interview guide was utilised for S2 data collection (Appendix 6 on page 186). A pilot interview was conducted in October 2022 with a key staff member of the CBBC. Following the pilot, minor

changes were made to the interview guide to reflect recent cost-of-living increases and the impact on the EFR agency and its clients. Questions were also added to the interview guide to reflect funding and grant requirements of agencies and the potential impact this might have on the provision of food relief services. An additional question to EFR agency staff was added to seek their perspectives on why there would be a lack of knowledge of orthodox and unorthodox food acquisition practices in some agencies, and in particular, from volunteers. S1 results were also woven into the interview questions for S2 to establish triangulation and to provide further meaning to the themes and sub-themes.

4.6.3 COVID-19 measures for researchers

The data collection and a global pandemic coincided with this study. On 24 March 2020, Prime Minister Scott Morrison released information on Australia's coronavirus measures; these measures were adopted to slow the spread of the virus and included new and enhanced social distancing measures and the closure of non-essential services (Morrison, 2020). Non-essential services included "places of worship" with weddings and funerals being the only exceptions (Morrison, 2020). Community and recreation centres were also closed except for those offering "essential voluntary or public services, such as food banks or homeless services" (Morrison, 2020). The impact of these restrictions meant that the EFR agencies involved in passive recruitment could no longer see people face-to-face for interviews; rather they were conducting appointments over the phone, with food parcels being left in the foyer for collection. In addition, the Flinders University College of Nursing & Health Sciences released a document regarding data collection during COVID-19 (email dated 20 March 2020 – Appendix 8 on page 193). This document asked researchers to "carefully review data collection activities for the foreseeable future" with recommendations to avoid entering places where people who may be at higher risk of contracting the virus might be. Face-to-face data collection was recommended to be halted. The impact on data collection for this study meant it was delayed for nearly a year until restrictions eased so that face-to-face interviews could be utilised. When face-to-face interviewing commenced, the recommendations were for social distancing of 1.5 metres during the entire data collection activity, and hand sanitisers had to be used by all parties. Masks were also worn to the interview location but taken off once the researcher and participant were seated. In addition to these recommendations, a COVID-19 checklist was completed before the interview and repeated on the day of the interview to ensure researcher and participant safety.

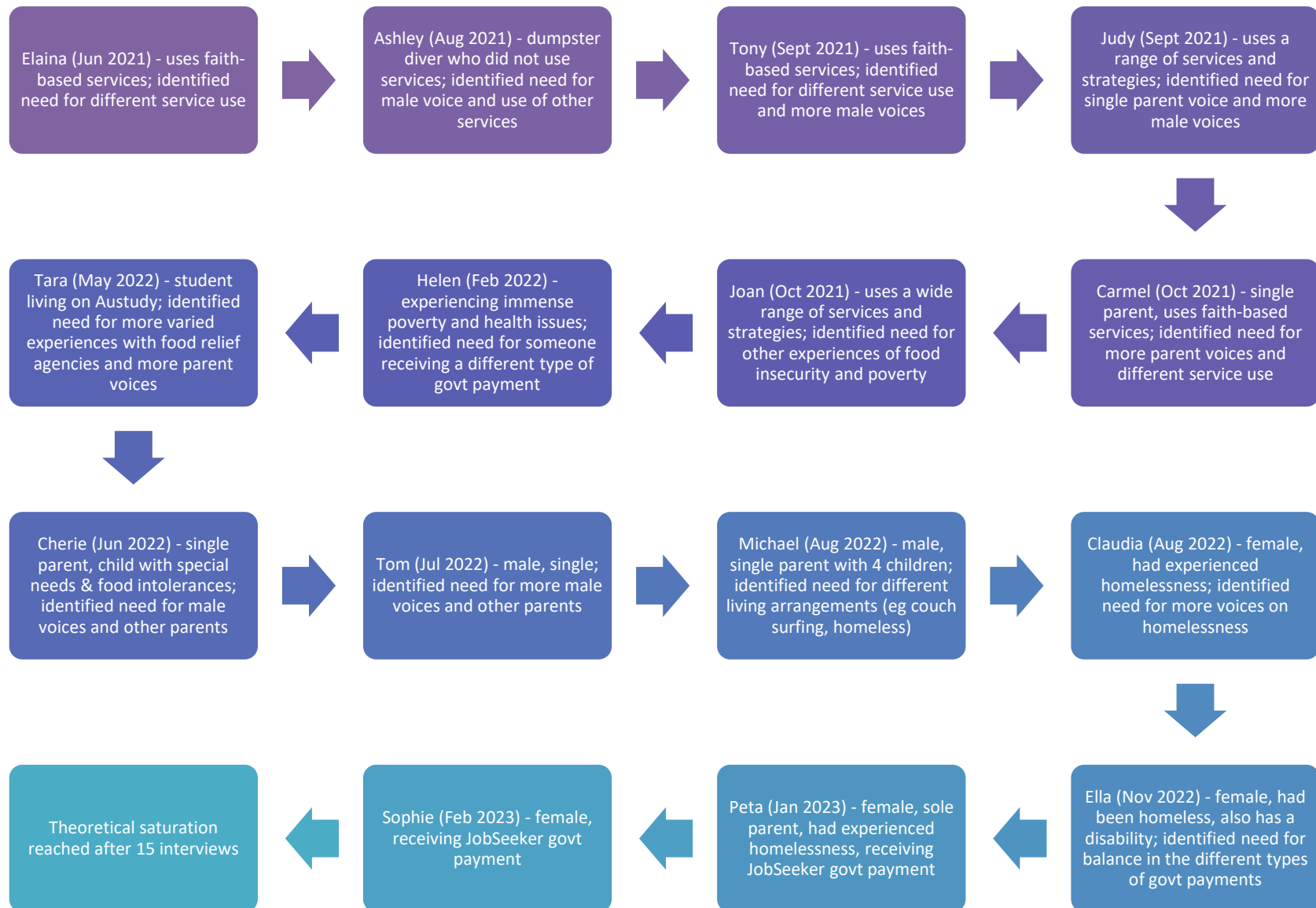


Figure 5 – Timeline of participant interviews for Sample 1 showing theoretical sampling in practice (pseudonyms used)

4.6.4 Theoretical sampling and theoretical saturation in practice

Theoretical sampling is an integral part of CGT, and is the exploration of hunches and questions that allows modification of the data collection process and recruitment (Charmaz, 2006). In practice, theoretical sampling occurred during the memoing, transcribing, initial coding and preliminary category development stages, where any gaps or new avenues of thought were pursued at the next interviews (Charmaz et al., 2018). Theoretical sampling also influenced the recruitment of subsequent S1 participants throughout all stages of data collection. For example, one interviewee for S1 was a parent with children living at home, two of whom had special needs. Previous interviewees were with single people living alone, so there was an identified need to investigate how parents with children navigated household food insecurity, therefore, recruitment focused on parents with children. Figure 5 shows the recruitment process for S1, the identification of gaps, and the investigation of these hunches and questions that were addressed during subsequent recruitment and interviews.

Theoretical sampling for S2 participants focused on obtaining a diverse participant sample to represent the different funding models. As mentioned in Section 4.3.3 on page 50, the sampling strategy was modified to reflect the lack of data on orthodox and unorthodox food acquisition practices from EFR agency volunteers. This response and rethink of recruitment is reflected in Figure 6, which shows the decisions made in order to gain rich data on the use of orthodox and unorthodox food acquisition strategies.

Theoretical saturation is when the collection of data does not contribute new codes or categories, the categories are considered saturated and data collection ceases (Birks & Mills, 2015). For S1 data collection, this occurred after the 15th interview as there were no new codes emerging and no new insights into the data. Similarly, for S2 data collection, theoretical saturation occurred after the seventh interview where the data revealed no new information.

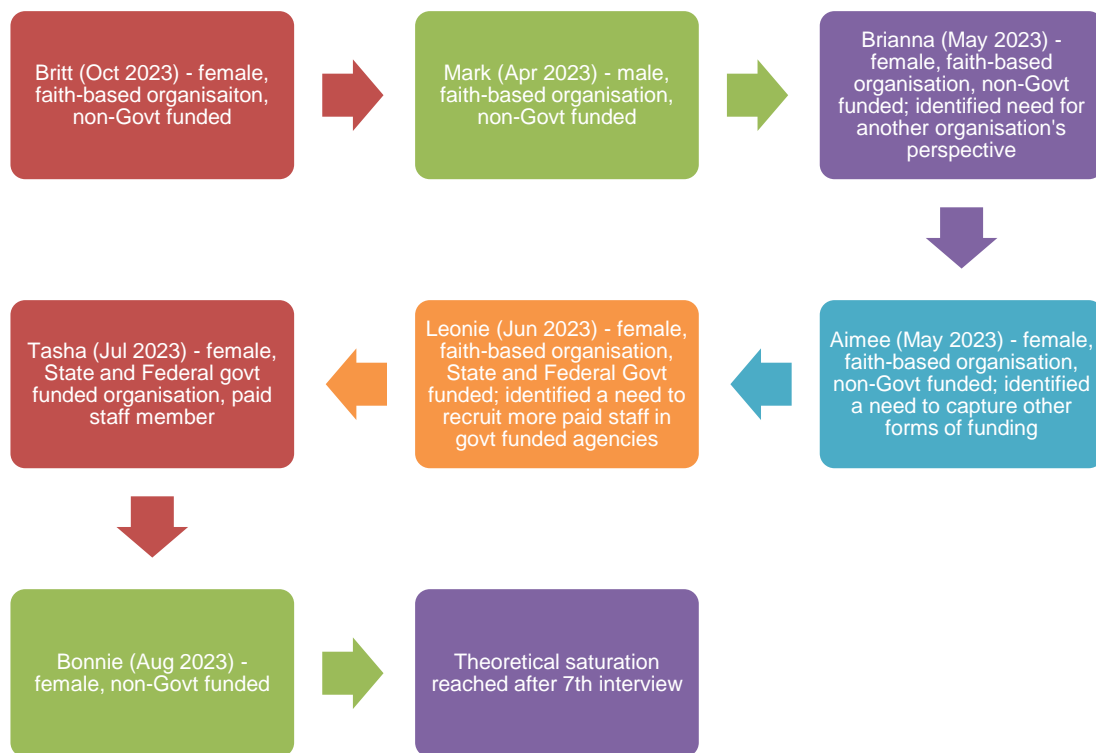


Figure 6 - Timeline of participant interviews for Sample 2 showing theoretical sampling in practice (pseudonyms used)

4.7 Data analysis

The researcher transcribed the interviews verbatim. Each interview transcription followed the same process – verbatim transcription of audio files from the interview, checking the transcript against the audio file for accuracy and importing the transcript into NVivo (version 1.3 [535]) for management and data analysis. Participants were not offered the opportunity to review their interview transcripts. This decision was made based on (a) they may not attend the EFR agency on a regular basis, therefore may be hard to find and (b) the researcher experienced trouble contacting participants after they had indicated a willingness to participate as their mobile phone number was disconnected, suggesting they had either changed their number or discontinued their phone service. The literature reflects advantages and disadvantages to interviewee transcript review. One of the main disadvantages is the changes made by the participant might alter the data significantly, losing some of its richness, and the reliving of their interview may re-traumatise the participant, especially rereading sensitive events (Hagens, Dobrow, & Chafe, 2009; Rowlands, 2021). However, Rowlands (2021) found participants only made superficial changes to grammar and no changes to the content of the interview, suggesting the transcripts were an accurate account.

Data analysis was informed by the grounded theory method of simultaneous data collection and analysis, and followed Charmaz's Two Phase Process: phase 1 of initial line-by-line coding and phase 2 of focused coding (Charmaz, 2014). However, these two coding phases were not linear or separate, rather they were used continually, in constant comparison, back and forth in order to interrogate the data (Charmaz et al., 2018). During the initial coding phase, labels were given to the data to make sense of the stories. This allowed for the identification of areas within the data that can be investigated further and highlighted "otherwise undetected patterns in everyday life" (Charmaz, 2014, p. 125), which drove the process of theoretical sampling. The process of initial coding also allowed the researcher to be open to what the data were saying, without subjecting it to preconceived theories or personal experiences. This process also helped to refocus subsequent interviews (Charmaz, 2014) by the inclusion of other avenues to be investigated. Transitioning between initial and focused coding facilitated the interrogation of the initial codes that occurred frequently and made the most sense. As such, preliminary categories started to emerge. Figure 7 shows the preliminary category *Life's not gone according to plan* and the sub-codes, and Figure 8 highlights the development of other emerging preliminary categories.

Name	Files	References
Life's not gone according to plan	1	1
Becoming unemployed	3	4
Challenging childhood	1	7
Different fathers to the children	1	1
Domestic violence and bad relationships	4	31
Abandoned when pregnant	1	1
Ex would take whole pay	1	1
Father dodging child support	1	2
Love her even though she's violent	1	1
Had everything, now got nothing	1	1
Hasn't worked out like that	1	1
Homelessness	4	15
Kicked out of home	1	1
Loss of home	2	2
Preparing for becoming homeless	1	1
I came from having it all	1	1
I haven't made mistakes	1	1
Loss of loved one	4	6
Not going to happen to me	1	1
Past abuse	1	3
Shoe was on the other foot	1	1
Trauma	1	2
Wasn't going without anything	0	0

Figure 7 - Example of a preliminary category

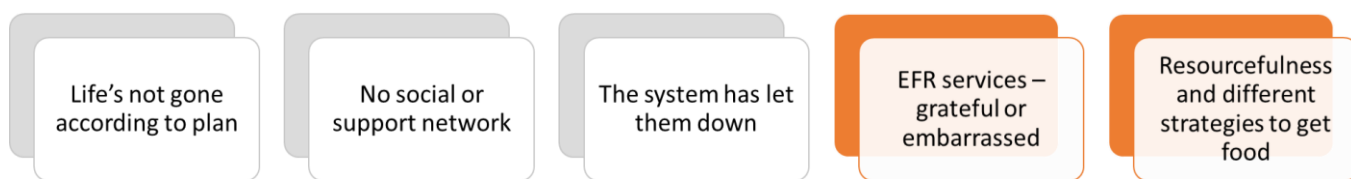


Figure 8 - Example of emerging preliminary categories

In order to establish transparency in the data analysis and coding, and increase rigour, the researcher utilised two methods: (1) side-by-side coding of the first interview with another member of the research team where coding labels were compared and discussed and (2) circulation of the codebook (NVivo) on two separate occasions to the research team. The researcher then met with the team to talk through the rationale for each category and the developing themes, inviting their ideas and critical questions. Feedback was considered and the categories were further refined to capture the orthodox and unorthodox strategies consistent with research aims and objectives. The initial codes were structured into more focused codes and overarching themes were beginning to emerge. During this phase and after a first rough draft of the results, the researcher was made aware that the themes were quite ‘micro’ and required further consolidation. The researcher then went back to the data and reconsidered the themes and sub-themes, resulting in a reorganisation of the findings into three main overarching themes with sub-themes (Table 1 below). Appendix 9 on page 196 also provides an example of the codebook for Theme 1: *Life's not gone according to plan*, showing the changes from the preliminary coding (see Figure 7 on page 61) to focused coding and the development of the sub-themes. During data collection for S2 and the write-up stage of S1 results, the researcher also took advantage of further refining the categories within these existing themes and sub-themes, to ensure the data was accurately capturing and representing the participant’s voices. S2 data collection and transcription also allowed reflection on these three main themes.

Table 1 - Final three main overarching themes with sub-themes

Theme	Theme 1: Life's not gone according to plan – stories of adversity	Theme 2: Down the well without a ladder – stories of oppression and a brief glimmer of hope	Theme 3: Self-managing the situation
Sub-theme	Relationship breakdown & divorce	Flaws in the system (no help from anyone)	Orthodox coping strategies
	Trauma & loss	Continual oppression – the narratives and discourses that keep food insecure adults 'down the well'	Unorthodox coping strategies
	Health issues	A brief glimmer of hope – the Coronavirus Supplement and Economic Support Payments	

4.7.1 Mapping themes to research objectives

As a final stage, these three themes were mapped to the research objectives by revisiting the aims, objectives and research questions and comparing them to the themes and sub-themes shown in Table 1 above. How each theme and research objective align with each other is shown in Figure 9.

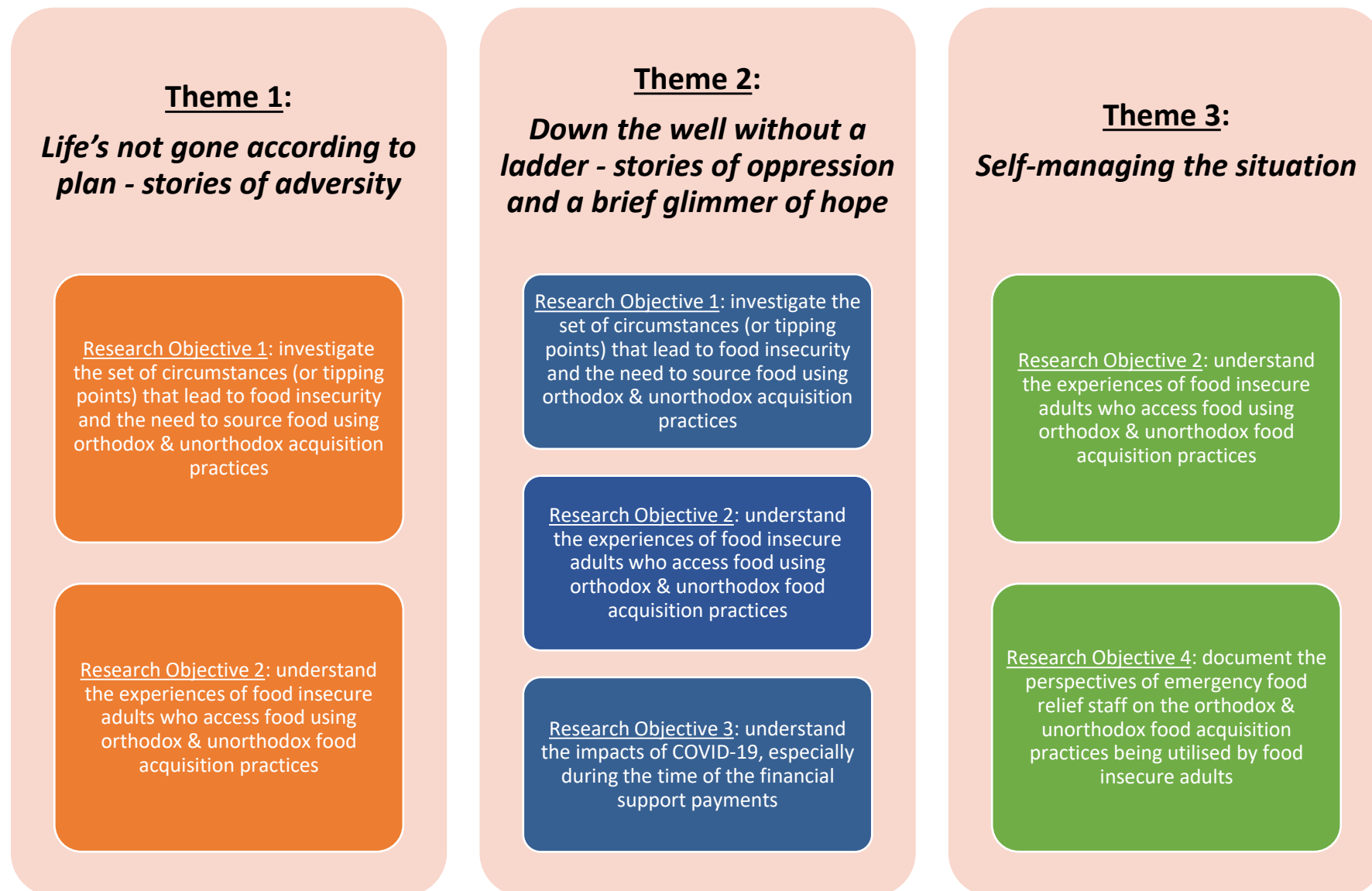


Figure 9 - Mapping of the three themes to research objectives

4.8 Reflexivity, researcher positionality and the use of memos in constructivist grounded theory

Reflexivity is the process of critical self-reflection by the researcher that seeks to address any biases and preconceived social constructs that will influence the creation of knowledge (Birks & Mills, 2015; Hesse-Biber & Leavy, 2006; Korstjens & Moser, 2018). Reflexivity also helps to ground the study, not only in the participants' experiences, but also in the researcher's own life experiences (Birks & Mills, 2015; Keane, 2014). Critical self-reflection involves the use of memos throughout the research process, on the researcher's own personal and professional experiences with the research, which allows the researcher to be intimately involved in the analysis (Charmaz, 2014; Keane, 2014). Writing regular memos facilitates the examination of the researcher's conceptual lens and how it influences their interpretation of the results and generation of theory (Korstjens & Moser, 2018). Charmaz (2014, p. 162) states memoing also "creates an interactive space for conversing with yourself about your data, codes, ideas, and hunches ... questions arise ... new ideas occur to you during the act of writing". These memos are a personal repository of ideas, thoughts, decisions, dilemmas, further questions to be explored and "insightful nuggets that you can mine" (Charmaz, 2014, p. 165). In this study, immediately following each interview and during the transcription and analysis stage, a memo was completed by the researcher, which recorded feelings about the interview, and any questions or pertinent ideas that arose from the analysis. The research memos are referred to in Chapter 5 of this thesis as they provide valuable insight into the researcher's feelings about the participants' experiences and their management of food insecurity, further adding to the rigour and trustworthiness of this study.

It was also noticed during data collection that stories of life events that had tipped adults into food insecurity were emerging. As CGT requires the researcher to remain responsive to the emerging data and themes, the focus of this study changed slightly to capture what circumstances tipped participants into food insecurity in the first place. In line with the scoping review, this study documented the orthodox and unorthodox food acquisition practices used by food insecure adults to mitigate food insecurity. Although this distinction is slight, the events that were uncovered by the researcher have framed this study as one of adversity and oppression as food insecure adults navigate their way through these childhood and adulthood experiences, the resulting trauma and continuing oppression.

4.9 Chapter summary

This chapter documented the research journey, the choice of population sample and recruitment, data collection and analysis. The three main themes were mapped to the research objectives, and the researcher's positionality, reflexivity and the use of memos during the data collection and analysis process were also discussed. The next chapter presents the findings of the data collected from the 6-item HFSSM and the demographics survey, as well as the three main themes and their sub-themes that were developed from data collection and analysis.

CHAPTER 5: RESULTS

5.1 Chapter overview

Chapter 4 presented the methods used in this study to recruit participants for S1 and S2 in order to answer the research questions and objectives. This chapter includes the results of data collection for S1 and S2 participants, including demographic data for S1 (food insecure adults) and their food security status, and S2 participant information. This chapter also presents the three main themes and their relevant sub-themes, and shows how each theme maps to the research objectives.

5.2 Results of Sample 1 food security survey

The short-form 6-item HFSSM (Appendix 4 on page 176) was used to measure the food security status of food insecure adults in S1. Figure 10 shows that all of the participants ($N = 15$) were food insecure; however, the level of food insecurity varied, with the majority experiencing very low food security ($n = 12$).

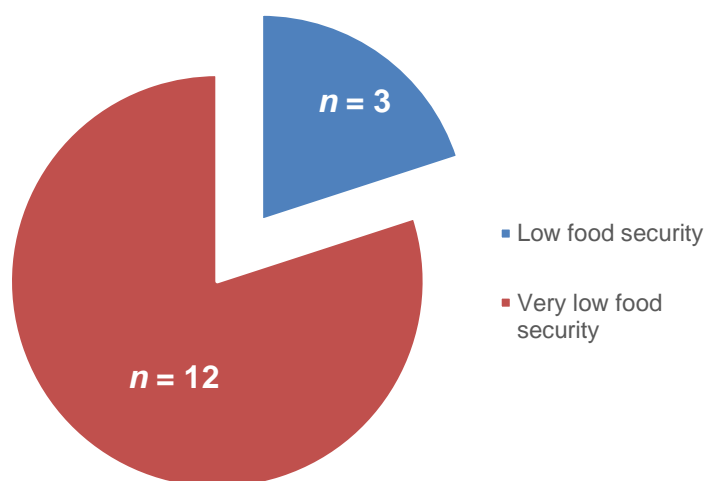


Figure 10 - Food security status of Sample 1 participants (food insecure adults), based on the US Household Food Security Survey Module 6-item questionnaire

5.3 Sample 1 demographic data

In addition to collecting participant food security data, a demographic survey was administered. The results of this survey are presented in Table 2. Most participants interviewed were female ($n = 12$, 86%) and the participants ranged in age from 27 to 73 years, with a mean age of 49.5 years. In addition to most participants being female, the majority lived alone ($n = 10$, 71%), and were unemployed ($n = 13$, 93%) and supported by either JobSeeker (Glossary) or the Disability Support Pension (Glossary). Table 2 presents further information on S1 participant demographics.

Table 2 - Demographic characteristics of Sample 1 participants (food insecure adults)

<i>Participant mean age range = 49.5 years</i>	<i>Number of participants (N = 15)</i>	<i>Percentage of total participants</i>
<i>20-40</i>	4	29%
<i>41-50</i>	3	21%
<i>51-60</i>	5	36%
<i>61-80</i>	3	21%
<i>Gender:</i>		
<i>Female</i>	12	86%
<i>Male</i>	3	21%
<i>Lived alone</i>	10	71%
<i>Lived with someone/children</i>	5	36%
<i>Highest level of schooling:</i>		
<i>Primary school</i>	3	21%
<i>High school</i>	4	29%
<i>TAFE</i>	3	21%
<i>University</i>	5	36%
<i>Employed:</i>		
<i>Yes</i>	2	14%
<i>No</i>	13	93%
<i>Social assistance payment:</i>		
<i>JobSeeker</i>	5	36%
<i>Disability Support Pension</i>	5	36%
<i>Parenting Payment</i>	2	14%
<i>Carers Payment & Allowance</i>	1	7%
<i>Austudy</i>	1	7%
<i>Age Pension</i>	1	7%

The participants resided in a variety of suburbs across metropolitan Adelaide. Table 3 shows the suburbs and relative Socio-Economic Index for Areas (SEIFA)¹⁹ score (Glossary) for each suburb and for the council region overall. This information shows that S1 participants did not only live in lower socio-economic areas such as Elizabeth North. Rather, a majority came from more affluent areas such as Unley, Parkside and Woodforde. This finding was unexpected and is an indication that pockets of food insecurity and poverty occur in higher socio-economic areas.

Table 3 - The council region, suburb, and Socio-Economic Index for Areas scores for Sample 1 participants' (food insecure adults) place of residence

<i>Council Region</i>	<i>SEIFA Score for Council region</i>	<i>Suburb</i>	<i>Overall SEIFA Score for Suburb</i>
<i>Playford</i>	855	Elizabeth North	698
<i>Port Adelaide Enfield</i>	936	Clearview	947
		Largs Bay	1026
<i>Charles Sturt</i>	985	Semaphore Park	937
		Henley Beach	1057
<i>Onkaparinga</i>	987	Hackham West	810
		Morphett Vale	930
		Old Reynella	1009
<i>Marion</i>	1001	Seacombe Gardens	939
<i>Unley</i>	1066	Unley	1062
		Parkside	1063
<i>Adelaide Hills</i>	1080	Woodforde	1111

Source: Australian Bureau of Statistics (2023) – data current 2016

5.4 Sample 2 information

All S2 participants ($N = 7$) were connected to a faith-based organisation; however, the place where the food relief was provided varied. For example, some agencies were affiliated with, and located next to or within, a church, whereas others such as Anglicare Australia (Glossary) and Uniting

¹⁹ The Socio-Economic Index for Areas (SEIFA) is a measure of relative disadvantage in Australian local government areas; <https://profile.id.com.au/>

Communities²⁰ (Glossary) did not have this immediate connection with a church or religion. Table 4 presents further information on S2 participants.

The EFR agencies differed in terms of their funding allocations. For example, CBBC and ADRA (Glossary), both connected to a church, mainly ran their food relief agency from parishioner contributions and grant funding. Conversely, organisations such as Anglicare and Uniting Communities were state and federal government funded/grant funded. This is an important distinction, as funding often determines the level of support that can be provided to food insecure adults, thereby potentially necessitating the use of a variety of orthodox and unorthodox food acquisition practices to supplement what they receive from EFR agencies.

Table 4 - Details of the agency, work status and funding arrangements for Sample 2 participants

<i>Pseudonym</i>	<i>Staff (paid) or Volunteer (unpaid)</i>	<i>Organisation</i>	<i>Affiliation</i>	<i>Funding Arrangements</i>
<i>Britt</i>	Staff	Southern Adelaide Family Enrichment Centre (SAFE Centre)	Christies Beach Baptist Church	Parishioner contributions and grant funding
<i>Mark</i>	Volunteer	SAFE Centre	Christies Beach Baptist Church	Parishioner contributions and grant funding
<i>Brianna</i>	Volunteer	SAFE Centre	Christies Beach Baptist Church	Parishioner contributions and grant funding
<i>Aimee</i>	Volunteer	Adventist Development and Relief Association	Seventh-day Adventist Church	Op Shop, Church community donations and fundraising
<i>Leonie</i>	Staff	Anglicare Victoria		State and federal government funding
<i>Tasha</i>	Staff	Uniting Communities		State and federal government funding
<i>Bonnie</i>	Staff	Hope's Café (Spire Community)	Uniting Church of South Australia and Clayton Wesley Uniting Church	Op Shop, food pantry, and café

²⁰ Uniting Communities provide advocacy and support services for South Australians experiencing hardship and poverty; <https://www.unitingcommunities.org/>

5.5 Theme 1: Life's not gone according to plan – stories of adversity

The data were organised into three overarching themes that are discussed in this chapter, starting with Theme 1: *Life's not gone according to plan – stories of adversity*. This theme addresses research objective 1 (investigate the set of circumstances (or tipping points) that lead to food insecurity and the need to source food using orthodox and unorthodox acquisition practices) and research objective 2 (understand the experiences of food insecure adults who access food using orthodox and unorthodox food acquisition practices). Table 5 presents the sub-themes.

Participant quotes are also included throughout this chapter to emphasise these findings and are presented as follows:

- Sample 1 participant – pseudonym, S1, gender (F or M), age, and government social assistance payment they are receiving
- Sample 2 participant – pseudonym, S2, gender (F or M), staff or volunteer (S or V), and agency they represent.

Table 5 - Theme 1: Life's not gone according to plan – stories of adversity

Theme	Theme 1: Life's not gone according to plan – stories of adversity	Theme 2: Down the well without a ladder – stories of oppression and a brief glimmer of hope	Theme 3: Self-managing the situation
Sub-theme	Relationship breakdown & divorce	Flaws in the system (no help from anyone)	Orthodox coping strategies
	Trauma & loss	Continual oppression – the narratives and discourses that keep food insecure adults 'down the well'	Unorthodox coping strategies
	Health issues	A brief glimmer of hope – the Coronavirus Supplement and Economic Support Payments	

The title of the Theme 1: *Life's not gone according to plan* was developed from a participant quote about how her life was not how she thought it would be:

Look I had my life planned, sorted, at that age I was gonna do this, this, this, this and this ... at that age I was gonna get married, I was gonna have two kids, it just hasn't worked out like that [laughs]. (Ashley, S1, F, 53, JobSeeker)

Indeed, many S1 participants were perplexed, even sad, when contemplating their life, and their experiences of poverty and food insecurity, and could not understand how they got into this situation. Participants found themselves in difficult circumstances, despite having a private school education, university education, or growing up in a household where they never experienced food insecurity. According to one EFR worker, emergency relief was there “to get [food insecure adults] through a bad patch” (Brianna, S2, F, V, CBBC); however, for some S1 participants their whole lives were comprised of unplanned life events. This first theme highlights the extrinsic nature of these unplanned life events and this section expands on how experiences of adversity led food insecure adults to resort to orthodox and unorthodox food acquisition strategies.

5.5.1 Relationship breakdown and divorce

Relationship breakdown was one significant factor that impacted participants as it often left them with a large amount of debt and food insecure. Joan (S1, F, 54, Disability Support Pension) bought a house with her partner and then the relationship “went to shit”; they sold the house for less than they paid for it, leaving them both out of pocket. Similarly, some S2 participants said family separation was one of the reasons they saw people for food relief and financial counselling, with one EFR worker (S2) citing her own experiences of losing everything due to her husband’s gambling and another from the perspective of having to stop paid work to look after children.

Relationship breakdowns also left participants as the sole carers of children, and reliant on the other parent to help financially. Three S1 participants were sole parents, supporting themselves and their children on social assistance payments. Often, they received no financial support from their ex-partner who was either ‘dodging’ their responsibilities, or they were also on a social assistance payment and could not contribute financially. Carmel (S1, F, 40, Parenting Payment²¹) provided an example of an ex-partner dodging his financial and parental responsibilities, who, with the help of his employer, was under-reporting his income, thereby not contributing to his

²¹ The Parenting Payment is paid to carers of young children; if the youngest child is under the age of 6 years, parents must participate in the ParentsNext program; www.servicesaustralia.gov.au/parenting-payment

children's welfare. Similarly, Peta (S1, F, 50, JobSeeker) had been a sole parent since she was 19, with no financial support during her children's younger years. She spoke of how she had been neglecting her own health during this time: "I wanted to feed my children so, more and more [it] became about feeding them and less and less [it] became about feeding me" (Peta, S1, F, 50, JobSeeker).

Another participant shared his experiences of becoming a single parent due to his ex-partner's neglect of their children; Michael (S1, M, 38, Parenting Payment) spoke of having to fly up to Queensland to pick up his kids, which left him in a precarious financial position and "robbing Peter to pay Paul with bills and that for the last two years". These circumstances were also confirmed by EFR workers (S2), with one stating that some clients had been with a partner "that's been on a good salary and then they've left them and they're not paying any child support" (Leonie, S2, F, S, Anglicare).

5.5.2 Trauma and loss

Most S1 participants shared stories of trauma such as domestic violence (DV), physical or sexual abuse as a child, or losses such as the death of a loved one, their job, or even their home. Similarly, the majority of EFR workers (S2), when asked about the reasons people seek out food relief or financial counselling, cited traumatic events ("all of them have experienced trauma in their lives" [Bonnie, S2, F, S, Hope's Café]) and loss in the person's life as a contributor.

Tasha linked this with mental health:

Most of that seems to have come from previous trauma, there's a lot of horrible stories out there around trauma, and it's just put them in a space where they really just, they can't cope very well. (Tasha, S2, F, S, Uniting Communities)

5.5.2.1 Domestic violence

DV had affected half of the women in S1, and in some instances, leaving violent personal relationships left them worse off, and most often homeless, and with "absolutely nothing [and] on the pension" (Carmel, S1, F, 40, Parenting Payment). Sadly, when Elaina (S1, F, 61, Disability Support Pension) was recounting what led her to using orthodox and unorthodox food acquisition practices, she explained: "Nothing dramatic really I've had a few bad relationships, domestic violence", suggesting she was somewhat accepting of these events that have left her impoverished and food insecure.

DV was also mentioned by almost all of the S2 participants, and this was often the reason clients were seeking out food relief. One EFR worker (S2) shared a story of a woman who was living with men who were abusing her (physically and sexually); however, she was staying in this relationship for a roof over her head and safety when drug dealers came around. From a different perspective, Leonie (S2, F, S, Anglicare) and Tasha (S2, F, S, Uniting Communities) spoke of how women left violent relationships, often when they were older, and after the kids had left home. The women affected were in their 50s, without superannuation or savings, and had no technical employment skills because they had been raising children for most of their lives.

Tasha summed up this dilemma perfectly:

Where they've put up with it [domestic violence] until the children have grown and then finally had the courage to leave but have no super, no job skills because obviously they were controlled for a start, but they also stayed at home and raised children, so just that trauma of going from "I've got to leave everything behind, my nice house, my everything". (Tasha, S2, F, S, Uniting Communities)

While women were primarily affected by DV, one male participant discussed how gender stereotypes and the system unfairly places all men in the 'perpetrator' category. Tony (S1, M, 61, Disability Support Pension) was experiencing DV from his wife and spoke of one occasion where the police were "absolutely screaming" at him and how the legal system, DV helplines, and support services were of no help to him because he was a man: "It's very unjust ... if a woman cries help, they'll evict the bloke out" and he was "putting up with" the violence and lack of help.

5.5.2.2 *Loss of a loved one*

The loss of a loved one or a significant person affected many participants, as this often led to a lack of stability or reduced their social and support networks. For Elaina (S1, F, 61, Disability Support Pension) it was the loss of her parents when she was 19 and 29 and the resulting sale of the family home that left her "devastated" and without a home base. As a result, Elaina spent most of her time moving from one location to another, with nowhere to call home. Carmel (S1, F, 40, Parenting Payment) experienced the devastating loss of a child:

She was 4½ months old, but she was only out of hospital for two months, she had open heart surgery at nine weeks old, she wasn't gonna have a good life, she was gonna suffer her whole life so yeah [huge sigh, trails off]. (Carmel, S1, F, 40, Parenting Payment)

Often, the loss of a loved one also signified the end of the support network they relied on. For example, Peta (S1, F, 50, JobSeeker) recounted that after her dad passed away, her family support eroded. Similarly, Judy (S1, F, 51, JobSeeker), who lost her mother and the valuable support she provided, stated: “I think it just made things worse when Mum died” and how this loss affected her deeply and left her “without having listening ear coz trauma’s awful”.

5.5.2.3 Childhood trauma

Some of the S1 participants spoke of their own personal experiences of childhood trauma that continued to impact their lives as adults. This trauma took many forms – poverty, abandonment, living in the foster care system and sexual abuse.

The exposure to poverty as a child had impacted many participants, with them sharing their experiences of growing up in poverty, living “in a poor family, extremely poor”, and how they often “went without”. These childhood experiences followed them into adulthood where they still experience food insecurity and poverty. In one interview, Ashley (S1, F, 53, JobSeeker) shared that it was her mum’s mismanagement of money that often led to the family going without food and being evicted from their home. This same participant also shared stories of being in and out of the foster system from an early age. The experience of childhood poverty had also influenced another participant’s attitude to food insecurity, which led to him teaching his children the steps, routines, and policies of EFR so they were “able to do it themselves” (Michael, S1, M, 38, Parenting Payment). Similarly, Brianna (S2, F, V, CBBC) spoke about “poor parenting” and how that led to a child growing up knowing how to “look after themselves”.

Tara (S1, F, 30, Austudy) very reluctantly shared the experience of being abandoned by her parents. She had lived in poverty as a child and was abandoned by her parents at an early age when her mother left home. Then a few years later, her father left her at school one day and locked her out of the house, leaving her homeless and couch surfing. Another participant had a violent father, so she left home at age 16, was sleeping on the streets and in and out of abusive relationships and addiction; as she recounted her story: “The first three decades of my life were full of trauma” (Joan, S1, F, 54, Disability Support Pension).

Sexual abuse as a child was also mentioned outright or alluded to by three S1 participants and confirmed by two EFR workers (S2) as another example of childhood trauma. Reluctantly Judy (S1, F, 51, JobSeeker) talked about losing her sex abuse counsellor who was giving her food vouchers. Similarly, Claudia (S1, F, 55, Disability Support Pension) skirted around the issue by saying, “I think

what happened to my life was early childhood trauma ... we lived next door to a presbytery and there was a gap in the fence, I'm sure you can fill in the details". She also shared that the suppressed memories of this abuse were affecting her as an adult: "I couldn't work out why I was falling apart then the memories surfaced and then I have been dealing with them since I was about 27". (Claudia, S1, F, 55, Disability Support Pension).

Generational sexual abuse was also revealed by one S1 participant who shared that she had been sexually abused as a child by her brother and had recently found out that her eldest son had been sexually abusing her youngest child. A couple of S1 parents also spoke of the abuse of their own children, not by their own hands, but by other family members.

5.5.2.4 *Job loss and unemployment*

Job loss was another common experience shared by participants. Some participants shared stories of being laid off unexpectedly or even their ongoing health issues affecting their ability to work (also see Section 5.5.3 on page 79). Judy's comment is an example of how job loss affected her life, tipping her into food insecurity:

I always thought 'it's not going to happen to me, I've got a job, I've got a roof over my head', I've got that, so initially what happened, I lost my job and suddenly ... things became difficult. (Judy, S1, F, 51, JobSeeker)

Being unfairly dismissed from their job or having to leave paid employment due to harassment was shared by a few S1 participants. Helen (S1, F, 57, JobSeeker) recounted her love of her previous job; however, after noticing abuse and neglect of the Elders living in the village and taking her complaints to the Fair Work Ombudsman²² (Glossary), she was unfairly dismissed:

I got sacked ... I even went to Fair Work (Ombudsman), I lost ... I got sacked ... and they marched me out of there, I couldn't even say goodbye to my residents, they marched me out of there like I was a bloody convict and I'm banned! (Helen, S1, F, 57, JobSeeker)

Experiencing harassment at work left Tara (S1, F, 30, Austudy) in a difficult position, where she had to stop working entirely. She went on to comment how this experience made her "increasingly disillusioned" about seeking employment in the future. Despite being one of the

²² The Fair Work Ombudsman helps promote harmonious, productive, cooperative and compliant workplace relations in Australia. It provides education, advice and guidance to employers and employees on workplace compliance and workplace laws; <https://www.fairwork.gov.au/>

youngest participants in this study, Tara's thoughts on capitalism and the working world belie her age. She explained:

This bitterness towards this idea of money and tying everything that people need to survive to money, and that employers leverage this and demean you constantly, under threat of you becoming homeless and then starving. (Tara, S1, F, 30, Austudy)

Interestingly, COVID-19 was attributed to several job losses, with Britt (S2, F, S, CBBC) sharing that CBBC had seen an increase during the pandemic as it had left a considerable number without employment, looking for work, and accessing EFR agencies. Job loss from the perspective of several EFR workers (S2) was compared with the precarity of life and how people who were "on 6-figure salaries and suddenly they've got nothing" (Leonie, S2, F, S, Anglicare). Tasha (S2, F, S, Uniting Communities) spoke candidly about a talk she gave at an exclusive private college and said a lot of people were only "four pay packets away from being in financial strife" much to the astonishment of the audience, but also reinforcing that unemployment and poverty can happen to anyone:

The gasp that went through [the audience] and the conversations afterwards, I had so many people come up to me, 'what do you mean by that?', and I'm like, well yes ... if you lose your job tomorrow ... what if your marriage breaks up ... what if you fall into depression. (Tasha, S2, F, S, Uniting Communities)

5.5.2.5 Homelessness

Homelessness is not just the lack of housing; it also includes those who are couch surfing at a friend's or family member's home or sleeping on the streets or in their car. The events that led to homelessness were varied and included instances where participants could no longer stay with family or friends, 'tough love' approaches by family, rental leases not being renewed or no longer being affordable, or the loss of employment.

Living with family or friends, including couch surfing, had been experienced by some S1 participants. The loss of her community housing²³ (Glossary) due to fire forced Claudia (S1, F, 55, Disability Support Pension) to spend 15 months couch surfing at friends' and relatives' homes until she felt she was no longer welcome and was forced to move on. She commented about how living in someone's own space must have been "very hard" for the person, how couch surfing has affected her relationship with family and friends, and the distress she felt every time she packed

²³ Community housing is provided by the South Australian Government; rents are capped at 25% or 30% of income; see also Public Housing (Glossary)

up her things and moved. This imposition on family was also mentioned by Ashley who spoke about being evicted and having to live with her grandmother:

There were times that we would stay with my grandmother which put a strain on the relationship with her, made it really hard because I love my grandmother, but you know, having her daughter and three children under her roof with her ... big strain on her too, and the intrusion on her life. (Ashley, S1, F, 53, JobSeeker)

Over half of the S1 participants revealed they had been evicted from their own home. Two S1 participants shared that they were kicked out of home at an early age, for reasons that were not elaborated on. Tara (S1, F, 30, Austudy) was only seven years old at the time her father locked her out of the family home and therefore she was forced to spend time “couch surfing [and] living with other people” and Carmel (S1, F, 40, Parenting Payment) left the family home at 13. Tough love was another reason, with Ella (S1, F, 27, Disability Support Pension) sharing that she was forced out of her family home due to her mental illness:

I had a very turbulent relationship with my parents because I refused treatment for my mental illness, they didn't want me in the house, but they also didn't want me homeless so if I came back to them and said, 'Mum I slept in a park last night', she'd be like, 'here's your bedroom'. (Ella, S1, F, 27, Disability Support Pension)

Interestingly this tough love leading to someone being evicted from the family home was also mentioned by Britt (S2, F, S, CBBC) who shared that it was often in response to drug or alcohol abuse, or gambling problems, and was one of the many reasons the church saw people for food relief.

Ella (S1, F, 27, Disability Support Pension) also shared that after being evicted from her family home, she had lived with friends in Melbourne, then moved back to Adelaide and lived in very unsafe accommodation with “a couple of people who had awful meth addictions”. This living arrangement was not ideal as she was sleeping on the living room floor, with drug dealers coming to the house at all hours. Rough sleeping was only mentioned by one other S1 participant, who left the family home at age 16 due to family violence. She commented that “it wasn't a lot of fun” but did not specify where she was sleeping at the time. However, one EFR worker (S2) said her agency saw a lot of rough sleepers and they were mostly women. Only one participant had been squatting: Helen (S1, F, 57, JobSeeker) squatted in her rental home after the lease ended and she was unable to pay the increase of an extra \$40 per week; she went on to comment, “I'll squat and

then I can go to jail and ... then I'll have a roof over my head", suggesting the extremes she would go to in order to avoid being on the streets.

After being served an intervention order by his wife and being evicted from his home, Tony (S1, M, 61, Disability Support Pension) lived in his car for five months, something he commented was "not safe" at his age. Other S1 participants had lived in their cars for other reasons. For example, Elaina (S1, F, 61, Disability Support Pension) lost her job and was then evicted from the home she was renting off a friend; he would not accept half the rent, forcing her to live in her car for a few weeks. She recalled the memory with humour, stating, "It was only a few weeks, but it was horrible, and I had my dog in there, oh my god, I never want to do that again! [laughs]" (Elaina, S1, F, 61, Disability Support Pension). Peta (S1, F, 50, JobSeeker), who had no permanent residence, shared that she was sleeping in a motel during the week and in her car on the weekends because she was using all her money to stay in the hotel.

5.5.3 Health issues

Health issues also featured highly in the interviews, with nearly all S1 participants experiencing some type of illness or disorder that prevented them from engaging in paid work and therefore relying on government social assistance payments. However, only five S1 participants were receiving the government Disability Support Pension, whereas others were receiving JobSeeker and were expected to find work. For example, Helen (S1, F, 57, JobSeeker), despite having had a stroke, chronic and unstable diabetes, and mental health issues including a nervous breakdown, was still trying to move from JobSeeker to the Disability Support Pension, something she said was "very hard" and involved multiple doctor and specialists' visits.

When asked what issues affect food insecure people the most, nearly all EFR workers (S2) said mental health "is a big one" and "one of the three key things". Tasha (S2, F, S, Uniting Communities) confirmed this by saying that poor mental health often stemmed from previous trauma and how it was "episodic at the moment". Similarly, Bonnie (S2, F, S, Hope's Café) shared that most of the people she interacted with had mental health issues that are "actually based in trauma". Interestingly, poor mental health affected most S1 participants, and included bipolar disorder, anxiety, social anxiety, stress or depression. Helen (S1, F, 57, JobSeeker) summed this up perfectly: "Most poor people you'll see will have mental illness ... all of them" and went on to speak about the stress of having no food and how "every day is fight or flight because every day is a survival day" (Helen, S1, F, 57, JobSeeker). Some of the S1 participant's mental health issues

were also linked with childhood trauma. For example, Joan (S1, F, 54, Disability Support Pension) linked her mental health issues back to trauma she experienced as a child and abusive relationships as an adult, and similarly, Claudia (S1, F, 55, Disability Support Pension) attributed her diagnosis of bipolar disorder to her childhood experiences; she is also on the Disability Support Pension but mentioned that “it [bipolar disorder] wouldn’t get you on it [now], which is terrible”.

The participants mentioned other health issues. For example, Cherie (S1, F, 46, Carers Payment & Allowance) has osteoarthritis that is exacerbated by caring for her adult daughter who has special needs. She then went on to list how her osteoarthritis was affecting her quality of life: “It’s affecting my ability to stand and cook my own food ... it affects my abilities to do most things so, some days I can’t even, I can barely get out of bed to use the bathroom” (Cherie, S1, F, 46, Carers Payment & Allowance).

There were also the health impacts of food insecurity, such as ongoing nerve pain which was exacerbated by a diet high in processed foods that is mostly available in dumpsters and at EFR agencies. A regular dumpster diver, Joan (S1, F, 54, Disability Support Pension) shared this ongoing problem:

If you’re hungry enough and chasing carbs or sugar because you’re hungry ... they’re the most available from dumpster diving and I eat them, it sets my [nerve pain] symptoms off ... if I’m starving, I eat shit, and yeah, and deal with it. (Joan, S1, F, 54, Disability Support Pension)

Another example of the health impacts of food insecurity and poverty is Helen’s story (S1, F, 57, JobSeeker) – on insulin for diabetes, Helen was rationing her dose because she could not afford medication, food and rent. This resulted in her having a stroke and ending up in hospital. Her hospital report stated the stroke was caused by “financial stressors leading to missed insulin doses” and she was classified by the hospital doctors and dietitians as having “community acquired malnutrition from food insecurity”. Helen had also been in hospital on other occasions due to diabetic induced ketoacidosis, a condition where the excess sugars in her bloodstream cause her blood to become over-acidic, due to her rationing insulin and possibly from her poor diet.

The researcher’s memo post-interview is noteworthy, as it highlights the lack of action on food insecurity in Australia, despite “community acquired malnutrition from food insecurity” being diagnosed by medical professionals:

Helen talked openly about her stroke. She was in hospital and being assessed by the community nutritionist/dietitian who said Helen had '**community acquired malnutrition**', it was actually given a specific medical term, it exists, it's noticed by medical personnel, by dietitians ... the medical specialists at the hospital wrote in her file that she [Helen] was rationing her insulin because she couldn't afford to buy more and the fact that she was also food insecure. So, it's [food insecurity] known, it's being talked about by medical professionals, it's been identified by the medical/dietetics professions, why the fuck aren't we doing something about it! (Memo, 3 February 2022)

Similarly, Judy (S1, F, 51, JobSeeker) experienced health issues directly related to food insecurity, and recalled a conversation with her doctor about why her iron levels were so low. Judy's response was, "I can't afford to eat red meat ... because I'm on Centrelink²⁴ (Glossary)" suggesting the payment is so low that she cannot afford to purchase vital nutritional food. Only one EFR worker (S2) identified the poor-quality food that was available to food insecure adults, and how the food "is high carb, it's high sugar, a lot of our guys have got [type 2] diabetes ... I worry about the effect on people's health" (Bonnie, S2, F, S, Hope's Café).

Another health-related concern was substance abuse, which was specifically mentioned by two S1 participants and one EFR worker (S2). Helen spoke quite eloquently about substance use, the links between food insecurity and poverty, and how some people in poverty "tend to self-medicate" because "when you have a shitty life, sometimes you wanna escape it" (Helen, S1, F, 57, JobSeeker). Similarly, Joan (S1, F, 54, Disability Support Pension) was addicted to heroin by the age of 22 after being involved with someone who was using the drug. She was no longer using heroin but spoke of the trouble she had stopping. Britt (S2, F, S, CBBC) also linked the issues of substance abuse and gambling with food insecurity and commented that providing people with food relief often fed the addictions because it gave them more money to purchase drugs or gamble.

Seven S1 participants also had children with major health issues that presented financial challenges, even to the point of putting them into debt paying for specialist and hospital visits or juggling hospital admissions. One S1 parent cried when she spoke of how her autistic son's NDIS (National Disability Insurance Scheme)²⁵ had run out, so she was "getting in debt [paying] for his [specialist] appointments" (Joan, S1, F, 54, Disability Support Pension). Single parent Carmel (S1, F,

²⁴ Centrelink, part of the Australian Government Services Australia department, delivers social assistance payments and services to Australians; <https://www.servicesaustralia.gov.au/centrelink?context=1>

²⁵ The National Disability Insurance Scheme (NDIS) supports Australians with a significant and permanent disability and their families and carers; <https://www.ndis.gov.au/>

40, Parenting Payment) has three children with special needs – one with schizophrenia, one with behavioural issues, and the other who has visual issues and requires eye surgery and glasses – she described it as being hard but still managed to inject some humour into the situation:

What you get on the pension [Parenting Payment & Family Tax Benefit] just isn't enough when you've got [children with health issues], like all the hip hop songs say, 'tryin' to make a dollar out of 15 cents' [laughs]. (Carmel, S1, F, 40, Parenting Payment)

Carmel (S1, F, 40, Parenting Payment) also explained how the Parenting Payment was not enough money to support her and her children; she was in the process of changing to the Carer's Payment because she cannot work while her son is at school due to his difficult behaviours and resultant problems at school. Similarly, two EFR workers (S2) also spoke of the health issues affecting the children of people seeking food relief. One client required glasses for her son, so the EFR agency was able to provide a voucher for government-subsidised glasses. Another spoke of how the father was accessing EFR for his son because of an organ donation that went wrong, and he ended up incapacitated and no longer able to work.

5.6 Theme 2: Down the well without a ladder – stories of oppression and a brief glimmer of hope

The second theme, Theme 2: *Down the well without a ladder – stories of oppression and a brief glimmer of hope*, addresses research objective 1 (investigate the set of circumstances (or tipping points) that lead to food insecurity and the need to source food using orthodox and unorthodox acquisition practices), research objective 2 (understand the experiences of food insecure adults who access food using orthodox and unorthodox food acquisition practices) and research objective 3 (understand the impacts of COVID-19, especially during the time of the financial support payments).

Like Theme 1, this theme arose from a S1 participant quote that captured the daily struggle food insecure adults face just to survive and how they are trapped in this endless cycle, unable to change their circumstances. Helen (S1, F, 57, JobSeeker) commented about the plight of those who are experiencing poverty and food insecurity and how the government had put people like herself “in this hole right, and they've taken all the ropes and ladders out, we have to get up that hole, [but] there's nothing there anymore”. The concept for this theme therefore centres on participant stories of oppression, and further highlights the extrinsic events that become tipping

points into orthodox and unorthodox food acquisition practices. The impact of the COVID-19 payments are included under this theme because the extra money provided temporary relief from food insecurity and poverty, effectively giving them a ladder and a brief glimmer of hope, lifting them out of the hole. Table 6 presents the sub-themes.

Table 6 - Theme 2: Down the well without a ladder – stories of oppression and a brief glimmer of hope

Theme	Theme 1: Life's not gone according to plan – stories of adversity	Theme 2: Down the well without a ladder – stories of oppression and a brief glimmer of hope	Theme 3: Self-managing the situation
Sub-theme	Relationship breakdown & divorce	Flaws in the system (no help from anyone)	Orthodox coping strategies
	Trauma & loss	Continual oppression – the narratives and discourses that keep food insecure adults 'down the well'	Unorthodox coping strategies
	Health issues	A brief glimmer of hope – the Coronavirus Supplement and Economic Support Payments	

5.6.1 Flaws in the system (no help from anyone)

Food insecure adults often spoke of how they felt forgotten by the government and agencies that were supposed to help them, fuelling their belief of being *stuck down the well without a ladder*. They also faced barriers to securing employment, and a lack of a social network to draw from in times of need, highlighting the structural deficits that create an ever-perpetuating cycle of oppressing people in poverty further. This in turn, changes the focus of this complex social issue to an individual's responsibility rather than providing the services that offer proactive action to help them improve their lives.

5.6.1.1 Unable to find secure employment

One example of feeling *down the well without a ladder* is being unable to find secure employment, something that would help them escape from the 'well' and reduce their reliance on social assistance payments. Several S1 participants spoke of barriers and surprisingly, of particular note, being TAFE or university educated is one such barrier. In her view, Cherie's degrees have led her to be considered "overqualified", even for menial supermarket checkout jobs and being second-

guessed by the employers because they thought she would not be “happy just standing on checkouts” (Cherie, S1, F, 46, Carers Payment & Allowance). Mental health issues were another obstacle to secure employment, as shared by Ella (S1, F, 27, Disability Support Pension) whose health issues meant she could never ask her employer to hold her job for her while she went into hospital for a month. Other S1 participants spoke of the inconsistency of hours of their casual employment or having no work because it was a seasonal job (e.g. only during the cricket season). Tara (S1, F, 30, Austudy) expressed this casual and insecure employment prospect as something stressful: “Employers leverage this and demean you constantly, under threat of you becoming homeless and then starving.” Another barrier to finding secure employment was being food insecure and impoverished, as expressed by Helen (S1, F, 57, JobSeeker), who took her concerns to a local Minister of Parliament, asking her, “How do you want me to go to work if I haven’t eaten in four days?” She went on to say:

I’ve not no teeth, my hair’s shit coz I haven’t been able to afford a haircut in three years, my clothes are hanging off me because I’m all skin and bone, and I’m delirious from hunger ... what’s the employer gonna say? Are you gonna pick me or the nice one there? ... How do they [the government] expect us to go find work when we’re hungry! (Helen, S1, F, 57, JobSeeker)

Despite having a job, one participant spoke of not being allowed to leave Catherine House²⁶ at six o’clock in the morning because they “don’t unlock the doors until 8.30am!” Peta (S1, F, 50, JobSeeker) was perplexed why, and in her words, “I’m trying to better my life here ... I’ve got a job!”. Another obstacle to securing employment was from exercising their right to not have the COVID-19 vaccination, which prevented Sophie (S1, F, 47, JobSeeker) from finishing her studies and gaining employment in the aged care sector. Digital poverty was cited as another hurdle in the quest for secure employment, with a lack of phone credit or internet/computer access preventing them from applying for jobs. Even reporting to their employment services provider²⁷ is a digital process, and this presents a never-ending cycle of not having enough money to afford these utilities, which then prevents them from gaining paid employment that would give them the money – another example of not being able to escape from this ‘well’ because of continual barriers within the system. One EFR worker (S2) also suggested another barrier to securing

²⁶ Catherine House is an organisation that supports women experiencing homelessness and domestic violence <https://catherinehouse.org.au/>

²⁷ An employment services provider helps people on JobSeeker, Parenting Payment and Youth Allowance search for work, gain skills for work, or transition into the job market; <https://www.workforceaustralia.gov.au/individuals/coaching/providers/>

employment was because the employment services provider “isn’t doing what’s needed by the person” or putting the unemployed person forward for jobs that are “outside the realms [of their abilities]” (Britt, S2, F, S, CBBC).

5.6.1.2 Government support is inadequate

The lack of support from the government was mentioned by almost all S1 participants. From the failing healthcare system to inadequate social assistance payments and a general reluctance of the government to provide a substantial increase, S1 participants were feeling forgotten by the government and tended to have a lack of trust in them.

Several S1 participants expressed a lack of trust in the government to do the right thing and look after people in need, even to the point of identifying their own personal political choice deeming them “not the right group to receive anything”. One S1 participant compared the Australian Government to something out of a Kafka²⁸ novel, demonstrating her level of distrust:

It’s just really frustrating just how nonsensical all of it feels ... I don’t know if you’ve read anything by Franz Kafka, it feels like a Kafka novel. (Tara, S1, F, 30, Austudy)

Even a participant from S2 expressed her concern with the government’s tendency to focus on whatever the ‘hot topic’ of the moment was, sharing her views of how the government tackles social issues:

‘Oh we need to do that and we’ll focus on it for three years’ and then ‘ooh no we need to switch, so we’ll cut all the funding from that’, lose good people, do all of that sort of stuff and ‘we’ll switch over to this’, to housing or yes, so flavour of the month stuff, and it’s not holistic and it’s not working. (Tasha, S2, F, S, Uniting Communities)

When describing the Australian Government, participants used words like “corruption”, “embellishing figures”, “lying”, “censoring”, “lacking empathy” or how the system was “rorting” them to describe their feelings. A few participants also referred to Australia as the “lucky country” and how food insecurity and poverty should not be occurring in such a rich country. However, the biggest concern expressed by S1 participants was how inadequate the social assistance payments are, especially JobSeeker. S1 participants shared that they were choosing which bills to pay that fortnight and were continually “chasing your tail” and “robbing Peter to pay Paul” to manage what

²⁸ Franz Kafka https://en.wikipedia.org/wiki/Franz_Kafka; his novels feature "protagonists facing bizarre or surrealistic predicaments and incomprehensible socio-bureaucratic powers"; Kafka explores the themes of alienation, existential anxiety, guilt, and absurdity

little money they have. Other S1 participants stated social assistance payments were “ridiculous” and “a pittance”, and that “the inflation rate doesn’t match the pay”. This lack of financial support left S1 participants feeling “angry”, “bitter” and “worried”, and another obstacle to them escaping from the “well” of oppression.

S1 participants also expressed how stressful it was living like this. For example, Joan explained “[I’m] just worried about fucking income all the time, like about how I’m gonna make everything work” (Joan, S1, F, 54, Disability Support Pension). Outraged, another participant was angry that the Australian Government was reluctant to raise JobSeeker, even though they “just gave a bloody tax cut to the billionaires!” (Claudia, S1, F, 55, Disability Support Pension) further demonstrating their lack of trust in a government that is charged with helping people. Their frustration was shared through stories of “not enough money”, “no way to get ahead”, how there was always “no food in the house” and feeling hungry because they were only “eating once a day” and how this was exacerbating their health conditions. One S1 participant spoke eloquently of the plight of a friend: “I know a friend of mine ... was malnourished, like she lives in fucking Australia and she’s malnourished!” (Joan, S1, F, 54, Disability Support Pension). Joan also went on to say:

[sigh and long pause] Everybody that is living like this, living without a balanced diet, we’re all gonna have health problems, we’re all getting them and it’s gonna cost the government a fuck load more for that, mind my language ... if the only thing they care about is financial then it’s gonna cost them more but I guess that’s not in this election cycle is it. (Joan, S1, F, 54, Disability Support Pension)

Further adding to their struggle and the feeling of being trapped down the well, most of the S1 participants commented that their social assistance payments have not kept up with the cost of living, making it harder for them to afford the essentials:

My housing costs have gone up, my electricity costs have gone up, my internet costs have gone up ... all my fixed expenses have increased and the pension hasn’t increased in a way that’s meaningful to cover the fixed expenses so it means that the proportion of my income I have to spend on food or to spend on clothing or transport or anything it’s dwindled so, it worsens the food insecurity. (Ella, S1, F, 27, Disability Support Pension)

Two EFR workers (S2) also shared their awareness of how low the social assistance payments were, and how people will struggle to afford even basic necessities on these payments. Bonnie (S2, F, S, Hope’s Café) referred to JobSeeker as “disgusting” and “wicked”, and how people on these payments “just plain don’t have enough [money]” and “there is no great big deep

psychological society cause, they're not given enough money, that's it, that's all it is, not enough money!" Interestingly, Britt (S2, F, S, CBBC) said her church often refers people to Centrepay²⁹ (Glossary). This comment from Britt, which appears helpful at first, is suggestive of a lack of awareness of the rising costs of living and a misunderstanding of how low social assistance payments are, and a further confirmation of how food insecure adults are kept down the well of oppression.

Most S1 participants were also having trouble affording dental visits and their medication/s on social assistance payments. Dental care was mentioned by a couple of S1 participants who stated visiting a dentist can be "embarrassing" because of the poor condition of their teeth. One S1 participant called tooth decay and missing teeth the "badge of poverty" suggesting dental care is one preventive health measure that gets missed when impoverished. Even though prescription medications are heavily discounted through the Pharmaceutical Benefits Scheme³⁰ (PBS – Glossary), some participants were having to choose between buying food or medication, with a few sharing that in order to cope, they often ceased taking their medication or found ways to stretch it out until the next pay day. Unfortunately, this can have disastrous results, as evidenced by Helen, who got caught out when she was rationing her insulin:

Yes, so I wasn't taking [insulin] every day or anything like that so, I ended up in hospital quite a few times with just my um, glucose levels, low, very, very low ... then I had the stroke. (Helen, S1, F, 57, JobSeeker)

Another S1 participant shared how much her medications cost her each month: "You look at the basis of those four meds on a monthly costing ... we're almost up to 26, 27 dollars just on four meds on a monthly basis" (Peta, S1, F, 50, JobSeeker). However, only two EFR workers (S2) acknowledged how hard it was for people on social assistance payments to access timely health care and medications, with one stating the constant decisions people on social assistance payments have to make: "Literally, do I eat, or do I have my medication, or which medication is more important for me to get this week?" (Bonnie, S2, F, S, Hope's Café).

²⁹ Centrepay is provided by Services Australia; it is a voluntary bill paying service, free to Centrelink customers, where you can arrange regular deductions from your social assistance payment to go to utilities and other bills; <https://www.servicesaustralia.gov.au/centrepay>

³⁰ Pharmaceutical Benefits Scheme is a government scheme that provides affordable access to medication and related services; <https://www.pbs.gov.au/info/about-the-pbs>

Apart from struggling to survive on government social assistance payments, most participants spoke of the stress and additional pressure from unexpected bills, where they must make the decision about how to effectively manage the expense along with their usual bills and food. A few S1 participants spoke about car repairs or large veterinary bills for their animals, something they had not budgeted for. Three EFR workers (S2), who were from the same organisation, also spoke of these unexpected bills and how that brings clients to their church seeking food and financial assistance.

The costs of running a car was also a concern for S1 participants, especially when having a car is essential for appointments, job hunting, or even accessing EFR agencies. Registration, repairs and petrol all add up when on a fixed income. Sophie (S1, F, 47, JobSeeker) commented about paying her car registration: “The lump of 160 dollars out of your pay that’s three, four hundred dollars a fortnight is huge” and similarly, Tara (S1, F, 30, Austudy) shared that she sold her car because she could not afford to pay for her driver’s licence or car registration. These increased costs were also reflected in the EFR sector where Britt (S2, F, staff, CBBC) recalled:

We have had recently phone calls of people ringing up just for petrol cards, just for petrol vouchers ... so that’s something we’ve not had before so that’s new, yeah and we don’t have petrol vouchers. (Britt, S2, F, staff, CBBC)

Those who were in community or public housing (Glossary) were thankful that the cost-of-living increases did not affect them as much because their rent was capped to their income. However, the S1 participants who were renting privately were experiencing hardship as their rents were increased when the landlord passed on increases in their mortgage repayments. One participant commented: “I heard the median rents in Adelaide were 56 dollars a day and Centrelink is 48 dollars a day!” (Peta, S1, F, 50, JobSeeker), and another stated three-quarters of her social assistance payment went on private rent. Another S1 participant shared how much she was paying in rent: “280 dollars a week” and equating it with the “600 [dollars] a fortnight” she was receiving in social assistance payments, leaving her almost nothing left at the end of each fortnight.

5.6.1.3 *No support network to rely on*

Two-thirds of S1 participants said they were unable to rely on family for food or money to buy food. A common theme throughout the participant interviews was that they had become estranged from family, or that relatives had passed away, leaving them with no support. Stories of “bad family connections” or of family turning their backs on participants were shared,

demonstrating the social isolation of S1 participants. Carmel (S1, F, 40, Parenting Payment) expressed her frustration at having no support: “I’ve got no family, I can’t even ring up and ask for five bucks off my mum or anything, I have no contact with any of my family.” Some had family who were in a similar situation of being on social assistance payments or had health issues of their own (“they’ve both got cancer”), whereas a couple of S1 participants spoke of not wanting to ask for help because they had a hard time accepting it and would rather give help than take it. One S1 participant spoke of the perceived negative connotations of going to her parent’s place for a meal as she felt she was “scrounging off of my parents” (Ella, S1, F, 27, Disability Support Pension). She also spoke of the difficulties asking for food from her mum who would say “go buy your own” even though they were in a financial position to help her out.

A few S1 participants mentioned that they stopped going to friend’s places or out with friends because they could not reciprocate, or they simply could not afford it. One S1 participant even lied about not being hungry when going out with friends:

The odd occasion that I go out for a meal for somebody’s birthday or something like that, I just say I’m not very hungry and I’ll just get an entrée, but I’m alright with that, you know, it’s no biggie. (Joan, S1, F, 54, Disability Support Pension)

This social isolation was also mentioned by one EFR worker (S2) who spoke of food insecure people not mixing with others “because they can’t afford to offer them even a cup of coffee” (Britt, S2, F, S, CBBC).

5.6.2 Continual oppression – the narratives and judgements that keep food insecure adults down the well

Many S1 participants spoke about how hard it was navigating food insecurity and poverty, without also having to contend with demeaning language and judgement when accessing different services. This sub-theme arose from an S1 participant comment about calling food insecurity what it really is – that people are going without food and in some cases starving. She commented about society “sanitising” the term food insecurity by:

Making it acceptable [and] okay for people to use ... when you unpack it and people describe it, it means that people are going without food, well what is that? ... because it is a sanitised way that ... assuages people’s middle-class *noblesse oblige* bullshit ... let’s call it what it is, let’s say people are starving because they are. (Claudia, S1, F, 55, Disability Support Pension)

Nearly all S1 participants spoke of feeling “not welcome, not wanted”, that they “don’t deserve [more food]”, felt as though they were “extraneous”, “judged”, “mocked”, and thought of as “dole bludgers” and “drug addicts”. One participant summed up her experiences by saying: “there are some people that take great delight in putting the boot in, into impoverished people” (Ashley, S1, F, 53, JobSeeker) and another commented that staff: “judge between the deserving poor and the non-deserving poor ... they just wanna make you feel worse about yourself, like kicking someone when they’re already down, it’s just not okay” (Cherie, S1, F, 46, Carers Payment & Allowance). Similarly, Helen (S1, F, 57, JobSeeker) was a little more direct in her comments about EFR agencies: “They don’t have that empathy, they don’t, they can’t understand that, if it hasn’t happened to [them], it can’t be happening to you.” One participant even spoke of how awful he felt walking into an agency for food, which was exacerbated by the community food hub not being located near supermarkets, and the branded bags to carry to food home in. He stated:

A lot of the time with like food banks and stuff like that, it’s right down here [indicating down the road] it’s not up near the other food section [indicating supermarkets] so that makes it quite obvious where you’re coming from, depending on the agencies as well some of them like to put in their own bags which can make it a bit of embarrassment when you’re walking home with the food. (Michael, S1, M, 38, Parenting Payment)

A few S1 participants spoke of the EFR workers expecting them to be grateful for the service and food they had been given. One participant likened this to the *noblesse oblige* where “the nobles of the old days were obligated to take care of their serfs and there is some of that goes into the volunteers” (Claudia, S1, F, 55 Disability Support Pension). Specifically, one EFR worker (S2) referred to this attitude of some EFR volunteers as “do-gooder” behaviour where they were only volunteering to “help the poor people of the world” and “look how good I am” (Tasha, S2, F, S, Uniting Communities). Similarly, another S2 participant cited the reason she was volunteering:

I don’t sleep well at night worrying about the inequity among us and so I donate, and I’ve donated to charities as long as I can remember ... otherwise I’m not sleeping ... but I do sleep better knowing I’m making a difference. (Brianna, S2, F, V, CBBC)

Tasha (S2, F, S, Uniting Communities) also said her experience with volunteers led to her awareness of how “condescending” they could be and the impact this can have on food insecure clients. She commented: “And they will talk to [a client] and go ‘oh, you poor darling’” and how volunteers are not “bad people but [it] is about them”. In addition, the language used by some S2 volunteers during their interviews was also quite noteworthy, with a couple referring to their clients in a way that might inadvertently stigmatise them. For example, Brianna (S2, F, V, CBBC)

spoke of how aware she was about the lack of hygiene of some clients and another S2 volunteer (Mark, S2, M, V, CBBC) shared a conversation he had with a colleague about a woman escaping DV, where he referred to her as “a dodgy one”.

Further adding to the perceived humiliation of accessing food relief, food insecure adults were also referred to a financial counsellor, something that was also considered demoralising by S1 participants, as exemplified by Ella: “... it’s like, you try to live on my income, I don’t need financial counselling ...” (Ella, S1, F, 27, Disability Support Pension). A referral to a financial counsellor was also seen as unnecessary, as Ashley (S1, F, 53, JobSeeker) commented: “... a lot of people that work in financial advice say poor people don’t need financial advice, they need a better income, they need better finances”. Britt (S2, F, S, CBBC) also shared this sentiment, saying, “Anybody on a JobSeeker payment, [in a] private rental, running a car, [they] will never be out of poverty!” Referrals to financial counsellors often came with a proviso when a food relief client came back seeking more than their allocated four visits a year, as demonstrated by Mark who emphatically stated:

We turn that leaflet over and we go, ‘they’ve had four visits ... okay what have they done? Oh they’ve gone to finance, budget counselling and they’ve done this, and they’ve done that’, yeah, we’ll give them a fifth [visit]. (Mark, S2, M, V, CBBC)

Adding to the narratives surrounding food insecurity were public perceptions that it was easy to eat healthily and on a tight budget, which could stem from a lack of awareness of poverty and food insecurity. Ashley (S1, F, 53, JobSeeker) recounted a conversation she had with another person about food insecurity and how hard it was for food insecure people to afford fresh food; this person’s response was, “Oh just go down to the central market and buy lentils, just buy lentils”, oversimplifying an extremely complex social issue. This type of response was also amplified by an EFR worker’s comment about buying “a kilo of rice ... yes it’s just rice and yes you have to put stuff with it but that’s gonna last you a week” (Tasha, S2, F, S, Uniting Communities). A lack of awareness of food insecurity and poverty was also conveyed by an EFR volunteer, who said: “So by visiting ... as infrequently as they need to ... it preserves them [EFR] for when they’re absolutely critical” (Brianna, S2, F, CBBC); this similarly is suggesting not only a blindness to the other food acquisition practices used by food insecure clients, but of poverty. Similarly, Mark (S2, M, V, CBBC), when asked if he had heard any stories of clients obtaining food or money to buy food in risky, unsafe or illegal ways, commented: “We don’t delve into what they do ... that sort of thing in my opinion is not shared, it’s personal to that person ... if I heard that, I would say ‘why,

why would you do that sort of thing?” When probed further about why this might be happening, Leonie (S2, F, S, Anglicare) suggested it might be because volunteers are “not educated in how to question a client” or because [the client] thinks “that person’s a Christian and you can’t tell Christians that sort of stuff, that’s what clients would think [of] those volunteers”.

There was also an element of ‘self-talk’ and blame expressed by S1 participants that potentially reinforced the discourses surrounding food insecurity and poverty and their acceptance of this continued oppression. S1 participants described themselves quite negatively and with resignation about their situation, with comments about accepting that food insecurity and poverty “is just the way it’s gonna be” and “we’ve got to learn to live with it”, that “beggars can’t be choosers”, that they are “not entitled” to food, and “that’s all we’re worthy of”. One participant said she “started believing the narrative that I couldn’t manage my money, that I was useless, that I was this, that I was that, that something’s wrong with me because I can’t make ends meet” (Claudia, S1, F, 55 Disability Support Pension).

Despite this negative self-talk, references to resignation and “survival” also featured in both S1 and S2 interviews. Sophie (S1, F, 47, JobSeeker) expressed this sentiment: “I was just like ‘this is just the way it’s gonna be’ so and I’ve just accepted it and get on with it”. Other S1 participants also expressed their “acceptance” of just barely surviving, of how this was “part of life now” and their “reality”. Feelings of absolute exhaustion from being so strong and resilient was expressed by Elaina (S1, F, 61, Disability Support Pension): “I’ve coped alright ... you pick yourself up, move on and start again ... I’ve just always got on with it, nothing really fazes me ... you do what you have to do.” A few EFR workers (S2) also spoke of how “incredibly capable and resilient”, “smart”, “savvy”, “absolutely amazing” and “blessed” they get to meet these people who “know how to deal with hard times”.

Conversely, having lived experience of food insecurity and poverty did not necessarily mean food insecure adults were compassionate towards others in the same position. Some of the S1 participants also referred to other food insecure people as those “who abuse the system”, some were taking advantage of the EFR agencies, food insecure adults were perceived as snobby and demanding food, and some of them were living “beyond their means”. This negativity and judgement of others in the same position is further demonstrated by the following comments:

I've seen them counting their change on the train on the way home or making their sign on the way into the city 'homeless please [give food or money]', these people have houses ... in the poverty circles there's more of a, a greed factor of 'well I've been in poverty all my life and I want it and therefore I'm gonna have it, and if I have to steal from Woolies [supermarket] to get it then, I have to steal from Woolies [supermarket] to get it'. (Peta, S1, F, 50, JobSeeker)

I don't know what a lot of people do with their money, there's a number of times I see someone who's got four or five kids, not working, got their Family Tax Benefit ... and now they're out of money again ... well I know for a fact you would've got, with four kids it would be around \$3,500 that you would've got as a lump sum and now four weeks later you've got nothing [laughs] makes you question. (Cherie, S1, F, 46, Carers Payment & Allowance)

Further exemplifying this view of other food insecure adults, one S1 participant was "shocked at the level of intelligence of people accessing emergency food relief", reinforcing the construct that only uneducated people are food insecure and impoverished. Another S1 participant specifically called people accessing food relief as "not the sort of people you'd wanna be friends with, ex-jail birds, drug addicts, all that sort of thing" (Judy, S1, F, 51, JobSeeker), further contributing to the negativity and discourses surrounding food insecurity and poverty. One S2 EFR worker also cited the interplay between substance abuse, gambling, and food insecurity, intensifying the negative portrayal of adults experiencing food insecurity.

5.6.3 A brief glimmer of hope – the Coronavirus Supplement and Economic Support Payments

The third sub-theme focused on the COVID-19 pandemic and the CS and ES payments (Glossary) that were given by the Morrison Liberal government from March 2020 to April 2021. During the interviews, S1 participants expressed how they could live "like a normal person" and needed less food relief during this time. The S1 interviews also captured participants' shock when they were forced back into poverty when the financial assistance ended in April 2021 (see Figure 1 – Coronavirus Supplement and Economic Support payments provided by the Australian Government during the COVID-19 pandemic, March 2020 to April 2021 on page 15).

5.6.3.1 *I could afford to buy an avocado!:* More money = less food relief

Participants openly and consistently discussed the difference the CS and ES payments made to their lives. Almost all S1 participants shared that they could afford to buy food from supermarkets and pay their outstanding bills when they received either the JobSeeker increase or the one-off

COVID Supplement payments (see Figure 1 on page 15). In particular, Helen's comments struck a chord, and demonstrated the associated joy and relief she experienced:

It was just this amazing thing when we got that extra money ... I remember the first money I got, and I went shopping and I grabbed an avocado ... I cried, I was crying coz I could afford this fucking avocado, you know, it's like, it's an avocado! (Helen, S1, F, 57, JobSeeker)

This comment from Helen raised personal feelings of privilege, shame and being cavalier with food for the researcher, as evidenced by the memo after this interview:

When Helen was talking about the extra payments and she could actually eat avocados, I immediately had this vision of me just randomly, wantonly, picking an avocado [at the supermarket] and thinking about one of the times that I'd not got around to eating this avo and it rotted in the fruit bowl (it did get composted so not truly wasted) but just that frivolous food attitude when Helen was so joyous to be able to afford to buy an avocado with that extra money. My privilege again, very much aware of it. (Memo, 3 February 2022)

Almost all S1 participants shared that they were able to pay their rent, settle outstanding bills, pay their car registration and afford petrol. One participant commented that she was able to "pay off some of these bills and get some of them in credit" (Cherie, S1, F, 46, Carers Payment & Allowance). Two S1 participants specifically mentioned this extra money meant they could afford a bond for a better rental and move to a new house. Others used the money to buy new furniture, get a haircut, buy medications they previously could not afford or save some of it "for a rainy day". Some S1 participants commented that having savings meant they felt a "sense of security" and being "comfortable" with their finances, therefore not having to stress about their money running out before pay day. Some S1 participants expressed their happiness that they could do simple things like buy a loved one a gift, go to the movies, or go out to lunch with family, even if it was a "2-dollar bucket of chips or something ... and we could just sit there and talk ..." (Helen, S1, F, 57, JobSeeker). This comment by Helen is suggestive that she and others like her are living on the poverty line, which was also affecting their ability to socialise with friends and family and live like a normal person.

S1 participants also expressed their happiness and pleasure from being able to choose certain foods, in particular fresh fruit and vegetables, but also other foods that are not usually available through EFR agencies. Some examples included, "we can have chicken", they could "afford better food", or "buy meat", and "bananas and strawberries", or even being able to "buy my food from

the shops!” and not from an EFR agency. These S1 participant comments demonstrate how little variety and choice they have when accessing EFR agencies and how the extra money temporarily lifted them out of poverty and into the ‘real world’. A couple of S1 participants also spoke of being able to use Uber Eats for food delivery, something they could not previously afford; however, most S1 participants used this rare financial opportunity to stock up on food, highlighting how they had been living from payment to payment. Echoing this were comments from all S2 participants that they “weren’t seeing as many clients” at the EFR agencies, how their clients now had money and were going elsewhere for food, and the surprise at the low numbers of clients during this time. One S2 participant, who runs the ADRA food pantry by herself, commented how “there’d be times where I would be sitting here and no one’s coming through” (Aimee, S2, F, V, ADRA) highlighting the impact lifting people out of poverty can have.

5.6.3.2 *Living like a normal person and then “they chucked us back into poverty!”*

Participants then discussed what happened after these payments ended. One S1 participant summed this up thus: “And then all of a sudden ... they chucked us back into poverty, just like that!” (Helen, S1, F, 57, JobSeeker).

In September 2020, the Morrison Liberal government slowly reduced the ‘doubled’ Coronavirus Supplement payment of \$550 per week for JobSeeker recipients (see Figure 1 on page 15) back to the pre-pandemic level of \$285 per week. The government then announced an increase of \$25 per week, bringing the JobSeeker payment to \$305 per week. One-third of S1 participants were on JobSeeker, and in response to this withdrawal of the Coronavirus Supplement, they expressed how “disheartening” it was, how it felt like “a kick in the gut”, and now they were “back to budgeting and Foodbank”, “wondering where I’ll go [to get food]” and living on a social assistance payment that was “unmanageable, untenable, you just can’t do it, you just cannot make ends meet”. Being pushed back into poverty angered S1 participants, with Peta (S1, F, 50, JobSeeker) expressing that those on JobSeeker were being used as the “recession busters” during COVID-19 and now they had served their purpose they were pushed back into poverty again. Judy, (S1, F, 51, JobSeeker) was devastated when this happened as she wished “I had kept a lot of it or held onto it, but you just do what you have to do during the time”. Only one S2 participant spoke of the extra money, but from the perspective of a client sharing that “the government’s taken my money away!”, to which she responded, “well no, they gave you some extra during these difficult times ... and people then got accustomed to it” (Leonie, S2, F, S, Anglicare), again highlighting the lack of insight into food insecurity and living in poverty.

5.7 Theme 3: Self-managing the situation

The third and final theme captures how S1 participants coped with adversity and oppression by self-managing their food insecurity and poverty through the use of orthodox and unorthodox food acquisition strategies. This theme maps to research objective 2 (understand the experiences of food insecure adults who access food using orthodox and unorthodox food acquisition practices) and research objective 4 (document the perspectives of EFR staff on the orthodox and unorthodox food acquisition practices being utilised by food insecure adults). There are two sub-themes as shown in Table 7.

Table 7 - Theme 3: Self-managing the situation

Theme	Theme 1: Life's not gone according to plan – stories of adversity	Theme 2: Down the well without a ladder – stories of oppression and a brief glimmer of hope	Theme 3: Self-managing the situation
Sub-theme	Relationship breakdown & divorce	Flaws in the system (no help from anyone)	Orthodox coping strategies
	Trauma & loss	Continual oppression – the narratives and discourses that keep food insecure adults 'down the well'	Unorthodox coping strategies
	Health issues	A brief glimmer of hope – the Coronavirus Supplement and Economic Support Payments	

5.7.1 Orthodox coping strategies

Orthodox coping strategies are those that are considered socially acceptable ways of acquiring food, and that are also used by others who are not food insecure. In this section, a variety of orthodox food acquisition strategies were shared by S1 and S2 participants, and these have been grouped into three sub-sections – financial strategies, social and referral networks, and strategies to get more food or make it stretch further. These strategies demonstrate the resourcefulness and capability of participants as they navigate food insecurity and poverty.

5.7.1.1 Financial strategies

Financial strategies were incredibly varied as S1 participants used many ways to get more money to buy food, ranging from the use of pawnbrokers and BNPL (Glossary) services to other miscellaneous financial strategies and accessing not-for-profit loans and grants.

Pawnbroking services

The most popular strategy used by S1 participants was selling or loaning household items to a pawnbroker; nearly all S1 participants had used this method to get more money for food. These pawnbroking organisations, such as Cash Converters³¹ (Glossary), offers people the option of selling their item or taking out a loan on the item. Helen's (S1, F, 57, JobSeeker) experiences with Cash Converters emphasised the popularity of this pawnbroking service:

So pretty much you sell everything ... you can go to Cashies [Cash Converters] any time of the week ... you'll be lining up, people with all their household goods ... yeah so you do that ... I had to sell my car for food, ironically, I sold my fridge for food, yeah, I laugh about it now! (Helen, S1, F, 57, JobSeeker)

Furthermore, Tasha commented:

I've said this before, I would love to meet the marketing team at Cash Converters because if I said to most people 'would you go into a pawn shop?', they would go 'no, not on your life' but they will take their children into Cash Converters which is basically a pawn shop, but they've marketed it in such a good way. (Tasha, S2, F, S, Uniting Communities)

Unfortunately, pawnbrokers tend to be geared towards making a profit rather than helping someone who is in financial difficulties, with some S1 participants identifying the traps involved in using them, even for short-term loans. The amount of money a pawnbroker offers for items that are sold to them is also negligible, perhaps because they prefer to loan money on an item. Two S1 participants shared stories of personal items being undervalued by pawn brokers: Tom (S1, M, 73, Age Pension) tried to pawn an older phone, but "the pawn shop only offered me nine bucks for it which according to the internet is worth about 300 [dollars]". Similarly, Peta (S1, F, 50, JobSeeker) spoke of a friend's experience: "She had a ring with diamonds, three clear cut diamonds in it, the ring was valued at over three and a half thousand dollars, and they [pawn broker] offered her 50 dollars for it, they wouldn't give her any more than 50 dollars for it."

Michael (S1, M, 38, Parenting Payment) called them a "necessary evil" and talked about the high interest rate they charged (35% of the loan), which means "if they give you 100 dollars, it's 135 dollars to get out [the item the money is loaned on]" and how this keeps going up each month the item is being held by the pawn broker. Further exemplifying this, the word 'hate' was used by

³¹ Cash Converters Australia (www.cashconverters.com.au) is a pawnbroking business that provide cash for household items either through outright sale of the item or as a short-term loan on an item of value.

several S1 participants when describing their feelings about pawnbrokers. Unfortunately, Peta got stuck when she needed some quick money and loaned her car to them:

I haven't been able to keep up the payments on the loan, that's what happened with my car, I paid it for a year and then just ended up not being able to keep up the payments and lost my car. (Peta, S1, F, 50, JobSeeker)

She went on to explain that she had sold almost everything she owned:

Pretty much everything ... what's the point of having a fridge if you've got no food to put in it? What's the point of having a car when I can't eat? ... I've pawned my computer at Cashies coz what's the point when you can't eat, I'd rather have food in the fridge, but yeah, I've got to the point where I've pawned the fridge coz we've got no food anyway, we can't eat, we might as well go get some damn food, my furniture ... I have taken that to Cashies, jewellery, pretty much anything that I've ever had of value has gone through Cash Converters. (Peta, S1, F, 50, JobSeeker)

A few S1 participants continually loaned and repurchased their household items on a continual basis: "My poor little mandolin goes in and out, and in and out, in and out, and she's in at the moment [with the pawnbroker]" (Claudia, S1, F, 55, Disability Support Pension). For Carmel (S1, F, 40, Parenting Payment) using a pawnbroker was a last resort once she had used up all her visits with EFR agencies:

You've got to feed your kids at the end of the day, yeah ... I'll go to Cashies [Cash Converters] if there's no other way ... I've got no other option, you've gotta feed your kids ... I'm not gonna steal, I'm gonna go to Cashies ... [laughs]. (Carmel, S1, F, 40, Parenting Payment)

In addition to selling or pawning items through a pawnbroker, two S1 participants used online selling platforms such as Facebook Marketplace, Gumtree, or eBay to sell household items. One S1 participant sold items her daughter made on Facebook Marketplace to generate extra income. However, another S1 participant said that the money she got from selling random household items through these platforms was "only just pocket money, a pittance" (Judy, S1, F, 51, JobSeeker).

When asked whether they knew about any other means their clients used to get money for food, Mark (S2, M, V, CBBC) commented emphatically, "One chap sold something at Cash Converters to get something ... but [that] don't go on the [client's interview] sheet, it don't go on the sheet, that's not the thing that goes on the sheet [thumping his finger on the table as he speaks]". What goes on 'the sheet' during an interview with EFR staff and volunteers is quite interesting because

using a pawnbroker could be considered a demonstration of food insecure clients being proactive in remedying their situation. It could also be indicative of how only four EFR agency visits per year is woefully inadequate in addressing food insecurity. However, both Leonie (S2, F, S, Anglicare) and (Tasha, S2, F, S, Uniting Communities) shared their knowledge of clients pawning anything of value. Leonie (S2, F, S, Anglicare) also said pawnbrokers and pawning items were once popular, but now she saw clients who had borrowed money instead, rather than pawning actual items of value, and this was because “people don’t have assets nowadays”. Leonie (S2, F, S, Anglicare) also went on to state that Cash Converters was “really good to deal with from a hardship perspective”, suggesting that she has had to help clients extricate themselves from these pawnbroker loans. In opposition to this, the other financial counsellor interviewed, Tasha (S2, F, S, Uniting Communities), said that she has heard of clients who have sold “jewellery, furniture, whatever they’ve got”.

Buy Now Pay Later services

BNPL (Glossary) services were the next most frequently cited orthodox strategy. Services such as Afterpay were viewed with mixed feelings by S1 participants; they ranged from “the best that ever happened” to “I know that it’s a really bad idea”. Michael (S1, M, 38, Parenting Payment), even though he feels they are “disgusting” and “they hurt [and] contribute towards food insecurity in a major way”, shared his reasons for his using BNPL schemes: “I can’t get credit, I have bad credit, Afterpay let me have credit”. However, he also cautioned about the misuse of the service, stating:

It is open to abuse ... which makes me hesitant to talk about Afterpay [and] being able to use it like that because ... then will they change the regulation coz there is some people that just cannot help themselves and abuse it. (Michael, S1, M, 38, Parenting Payment)

Further, Michael spoke of other traps of the service:

Now there is a horror story, if you don’t make your payments and you got 10 payments on there, each payment is 10 to 40 dollars for a missed payment ... my next [social assistance] payment actually is 760 dollars and 729 of it will go onto Afterpay. (Michael, S1, M, 38, Parenting Payment)

Likewise, Carmel (S1, F, 40, Parenting Payment) found herself in a mountain of debt after her partner used her BNPL account, destroying her credit rating to the point that the BNPL service will no longer allow her any line of credit. A few S1 participants were also aware of the financial traps of BNPL services, viewing them as something to “stay away from”, “I just don’t have enough money to do that”, or “I’ve never used it and I refuse to use it”.

The BNPL services do not allow people to purchase food; however, there are ways of getting around this restriction by purchasing supermarket gift cards. Other S1 participants tended to use BNPL services for miscellaneous non-food items such as toiletries, white goods, clothes, or to pay a utility bill. Supporting this, Britt (S2, F, S, CBBC) said the use of these services to purchase non-food items allowed food insecure adults to free up money for food; however, she also cautioned that this can also put them in “financial difficulties” suggesting she has seen some food insecure clients in this situation.

Miscellaneous fiscal strategies

All S1 participants used a variety of fiscal strategies to manage their money and food insecurity. For example, the use of budgets to organise their social assistance payments and bills was used by most participants. This budgeting strategy took many forms, but it was commonly used to ensure they had enough money to cover their bills each fortnight. One S1 participant used a system of dividing money up for different things, and for another it was choosing what bill to pay or not pay each fortnight. Another S1 participant transferred money from an easy-to-access account to one that required more effort as a way of ensuring she did not go on a spending spree during her bipolar mania. However, it was also acknowledged by most S1 participants that receiving free food from EFR agencies also helped their ability to budget, giving them more money to pay bills or go to the supermarket for things they cannot get at agencies. One S2 participant said that people on a low income “could teach the rest of us how to budget, do you know what I mean like, a lot of people are very organised, very scrutinous” (Tasha, S2, F, S, Uniting Communities).

Other financial strategies included using cash to avoid bank fees or being familiar with the Centrelink (Glossary) system eligibility criteria and income thresholds to maximise their benefits and entitlements. Other orthodox financial strategies included buying food on credit, recycling glass bottles and aluminium cans for the 10 cents container deposit³² (Glossary), participating in research for financial remuneration, and using Flybuys points³³ (Glossary) accumulated from shopping at partner retailers to reduce the cost of a grocery shop. One S1 participant also shared a novel financial strategy called a ‘floating 50’:

³² The Container Deposit Scheme was introduced in South Australia in 1977 to reduce landfill and increase recycling of eligible beverage containers; <https://www.australianbeverages.org/initiatives-advocacy-information/container-deposit-schemes/south-australia/>

³³ Flybuys is a rewards points system, where shoppers accumulate points when purchasing goods from a ‘partner’ retailer; <https://experience.flybuys.com.au/how-it-works/>

[A friend] borrows 50 dollars off me on pay day and I borrow 50 dollars off her on pay day, essentially we always just pay each other back but we have this 50 dollars that is floating between us [laughs] that helps her on pay day and helps me on pay day. (Peta, S1, F, 50, JobSeeker)

Another strategy shared was to use PayPal³⁴ to pay for Uber Eats; one S1 participant found a loophole where even if there was no money in their bank account, they were able to purchase food and catch the payment up later.

Not-for-profit loans, grants, and rebates

Two EFR workers (S2) spoke of loans and grants that were available to people on a low income. For example, Britt (S2, F, S, CBBC) referred EFR clients to the No Interest Loans Scheme³⁵ (Glossary) run by the Good Shepherd organisation, which loans up to \$3,000 with no fees, no interest on the loan, and no other hidden charges. There are also grants and rebates available such as the Emergency Electricity Payments Scheme³⁶ (Glossary) and the Energy Bill Relief rebate³⁷ (Glossary) from the South Australian government, which provides up to \$500 a year to eligible households. Additionally, Leonie (S2, F, S, Anglicare) spoke about pay day loans³⁸ (Glossary) such as Before Pay and My Pay Now, which allow people to access their pay or social assistance payments before pay day. Of interest, none of the S1 participants spoke of these loans and grants as something they engage with to manage their food insecurity, and this might be due to them not knowing these services are available to them; this is captured in the next sub-theme.

5.7.1.2 Social and referral networks

Nearly two-thirds of S1 participants stated they did not have family to rely on in times of need. Therefore, other social networks, such as friends, or even a community group, became an integral part of their lives and were often sources of food, money to buy food, or even a place to stay. EFR

³⁴ PayPal is a digital payment platform that can be connected to a credit card or bank account; <https://www.paypal.com/au/webapps/mpp/about>

³⁵ No Interest Loans Scheme; the Good Shepherd Organisation offers small loans of up to \$3000 for the purchase of household items, education expenses, car repairs and registration, and medical and dental costs; <https://goodshep.org.au/services/nils/>

³⁶ Emergency Electricity Payments Scheme <https://www.sa.gov.au/topics/care-and-support/concessions/household-concessions/energy-bill-concessions>

³⁷ Energy Bill Relief rebate – South Australia; a rebate to reduce the cost of energy bills, available to people on eligible concessions; <https://www.energy.gov.au/rebates/energy-bill-relief-households-south-australia>

³⁸ Pay day loans are a service where applicants can access a portion of their wages or social assistance payments, before the pay date; Before Pay and My Pay Now are examples of these organisations

agencies were also reliable sources of information on other EFR agencies, low-cost meals, or other supportive services.

Unsurprisingly, nearly all S1 participants shared how much these social networks had helped them in times of need. Stories were shared of people generously going through their own pantries, or even members of a community group putting a call out to members for food to help someone in need. For example, Helen (S1, F, 57, JobSeeker) expressed her thankfulness for the Anti-Poverty Network (Glossary):

I joined APN [Anti-Poverty Network], and they became my family ... I remember the first time ... I didn't have any food and I was fucking hungry ... I put out the word, I said 'look you know, what are we supposed to do if we can't even get food from the agencies?', and everybody just took up a collection and brought me some food, and that's what we do now. (Helen, S1, F, 57, JobSeeker)

Another member of the Anti-Poverty Network also praised the support provided by this community group, even going as far as stating they were more helpful than any government agency worker:

The Anti-Poverty Network group out there [northern suburbs] ... we support each other more than any government agency's ever actually going to do because we understand what each other's going through more than any government agency worker. (Peta, S1, F, 50, JobSeeker)

Similarly, nearly all S1 participants spoke of how they helped others who were in a similar situation. For example, when one S1 participant found out a member of their community was "starving to death" she suggested they "do a ring around, we get this woman's pantry filled, and then at least ... she won't starve right" (Claudia, S1, F, 55, Disability Support Pension). Another S1 participant spoke of how she would share food with her ex-partner if he was struggling, and vice versa, while others shared how they would buy groceries for a friend, or swap food grown in their own garden, demonstrating the generosity from people who themselves are struggling to afford food. Bonnie (S2, F, S, Hope's Café) said she witnessed food swapping, where food insecure people would swap or trade food they have received from the regular Foodbank van with others. Additionally, Tasha (S2, F, S, Uniting Communities) captured this sharing nature of food insecure people:

I've found that all the way through my career, low-income people will share, so if I've got money this week, but you haven't, I'll either give you a loan or I'll buy you some food' and then that'll be repaid ... I've always found low-income people or homeless people even are very generous. (Tasha, S2, F, S, Uniting Communities)

Stories of running out of petrol or not having enough money for a grocery shop were also shared by S1 participants, with some commenting that the money was given freely with no expectation of it being paid back. Within the S2 interviews, the only mention of EFR clients borrowing money was from Brianna (S2, F, V, CBBC) because the client mentioned having to pay it back during the food relief interview. Often friends were also a source of transportation to a supermarket or an EFR agency. One S1 participant shared a story of a friend who started taking her shopping every fortnight at a bulk store, which she said was helpful as she could get a few extra items and "not have to lug everything around". This was also mentioned by other S1 participants whose friends took them shopping or to get a free meal at the local food relief organisation.

A few S1 participants also shared how they volunteered in their community because they wanted "to give back" to the services that had been helping them in times of need. Often, volunteering for an organisation also gave them access to free food without having to go through the demonstration of need that is often required. Reflectively, Judy spoke of her late mother's altruism and how that drove her to help others:

I often think of my late mother, that's what keeps me going, is how she used to feed the homeless at Christmas and that gives me inspiration to do something, I'd like to do something, get back into this in a small way, I've got an idea, it's just finding the courage to do it. (Judy, S1, F, 51, JobSeeker)

In addition to sharing food, a few S1 participants also shared their knowledge by suggesting EFR agencies where people can get food and other services which might be of help. Helen captured this eloquently:

Now I tell everybody ... if I see anybody who's poor, if they say something on Facebook you know, 'where can I get food?' whatever, I'll tell them about Heart & Soul alright ... 12 dollars ... that gives me a month's supply [of food], sometimes I even share it [the food] with my neighbours, that's what we do. (Helen, S1, F, 57, JobSeeker)

Bonnie (S2, F, S, Hope's Café) similarly cited a story where someone was unsure where to get help on the weekends, and others stepped in and wrote a list of places they can go; she asked them "would you mind writing me a list that we can give out here?" and commented further that "the amount of knowledge they have is remarkable". Similarly, Tasha (S2, F, S, Uniting Communities)

also spoke of people who are on social assistance payments sharing their knowledge, but commented that for someone who is new to Centrelink (Glossary) or new to poverty, they might not know where to get help.

EFR agencies were also cited by the majority of S1 participants as a valuable network and source of information and referrals on free or low-cost meals, or other supportive services. Several S1 participants who live in the City of Onkaparinga council region also spoke of a list of places that offer free or low-cost food and meals, their opening times and days that was given to them by either Centrelink or an EFR agency. However, one S1 participant, who does not reside in the Onkaparinga council region, shared her frustration at not being able to access information on what services were available to her:

It has taken me this long of being on JobSeeker ... to learn where to get food, nobody tells you at the beginning, Centrelink don't tell you, your job agencies don't tell you, nobody tells you, if I had known what there is now available back then I wouldn't have been starving. (Helen, S1, F, 57, JobSeeker)

Similarly, all S2 participants spoke of their agency's referral system, where they suggested other places food insecure adults could get food, small loans, grants, or financial assistance. Conversely, Tasha (S2, F, S, Uniting Communities), who looks after clients in the eastern region, acknowledged that someone who is new to Centrelink and new to poverty might struggle to access information. Indeed, four S2 participants stated this was a significant issue for people; that finding out where to get food or financial assistance was considered difficult, potentially because their services are not publicised, or that EFR agencies are viewed as something for 'poor people'. In one S2 interview, Centrelink was also cited as a barrier to seeking food relief because it would not hand out brochures, nor allow them to be placed on their noticeboard.

During the times when an EFR agency was not taking appointments for food relief, such as Christmas or school holidays, the agency would refer clients onto somewhere that was open, such as Fred's Van, MarionLIFE, or Anglicare. However, being a source of information also has its down side, as shared by Brianna (S2, F, V, CBBC), who said clients were walking into church during Sunday prayer service and how "it's caused a problem with separation for some volunteers here who need that time ... to be worshipping".

Conversely, a few S1 participants spoke about how they have a hard time accepting help from others. When prompted further, Joan (S1, F, 54, Disability Support Pension) said she was "not

good at asking for stuff, so I don't, I'm sure if I was starving I would, but there's other ways [of getting food]". She also commented how her sister provided a meal after Joan had done some garden work: "She would feed me ... if I've done something to help her, then that's fine with me you know [crying]" suggesting food as payment was more acceptable to her. Tony's experience is another example of not wanting to take food unless it was being earned:

I really couldn't within myself handle coming and taking this food ... like Friday when I was there, [agency volunteer] said, 'Please stop feeling like you're taking', she said 'you're doing the work', she said 'so you're not allowed to feel its charity anymore, it's not charity its payment'. (Tony, S1, M, 61, Disability Support Pension)

This reluctance to ask for help was reiterated by Tasha (S2, F, S, Uniting Communities), who said that some clients would not ask for help as it was "not how they were raised" and how they would "prefer to go without or they'll live on pasta and rice and whatever's cheap".

5.7.1.3 Strategies to get more food or to make it last

Nearly all S1 participants shared the strategies they used to make food last until the next pay day or the next visit to food relief agencies, or to get more food for less money. Living frugally was one strategy used by most S1 participants, which consisted of them living on pasta, rice and tinned foods, supplemented with free fruit and vegetables from food relief organisations, or living on leftovers to ensure food was not going to waste. One S1 participant spoke of only eating one meal a day, and another was rationing her two-minute noodles in order to stretch them further. S1 participants were also quite resourceful and shared the creative ways they used to make the most of limited food options, with one sharing her vegetable and curry stew recipe during the interview.

Another strategy involved participants 'shopping around' at several EFR agencies. Around half of the S1 participants obtained their food in this manner out of need to ensure they had enough food to "made a decent meal out of" or as a way of combining pantry items with free or low-cost meals. S1 participants were also very aware of what each agency provided in terms of either free fruit, vegetables and bread, or low-cost items, which enabled them to achieve as much variety as practically possible. For example, Sophie said:

Every single bit helps and then just going for the meals two nights a week and then ADRA always has fresh fruit and veg and then on that Thursday night they have the meal, the two meals or whatever it is and then sometimes they have takeaways, so we'll take a takeaway salad, or a takeaway veg and that'll be next Friday night's meal. (Sophie, S1, F, 47, JobSeeker)

Some of the EFR workers (S2) were aware their clients were attending several agencies for food, and in fact encouraged it by providing lists of other resources available. In acknowledgement of this practice, Brianna (S2, F, V, CBBC) stated they were “quite savvy people, they often know the networks”, and Bonnie (S2, F, S, Hope’s Café) commented that this practice was often used to “top up ... whatever meals they wanna make”.

Buying food in bulk was also a strategy used to get more food for less money, with most S1 participants putting this extra food into a chest freezer. Michael (S1, M, 38, Parenting Payment) shared that the first thing he purchased was a chest freezer:

I got like 20 loaves of bread in my chest freezer, I got like 20 packs of six sausages in there, mince split up into little 100 [gram] packs and that’s stocked, and my other cupboards are stocked, you know, I bulk shop. (Michael, S1, M, 38, Parenting Payment)

Bulk food and discount grocery stores such as Costco, Not Quite Right, Gaganis Bros, Campbell’s Warehouse, and Price Rite were frequented by S1 participants. One shared that she regularly shopped at several different places and ticked them off her fingers as she recounted her strategy: “I’d go to Foodbank first, what I couldn’t get at Foodbank then I’d go to NQR [Not Quite Right] and what I couldn’t get at NQR, I’d get at Aldi, and what I couldn’t get there I’d go to Coles” (Claudia, S1, F, 55, Disability Support Pension).

Alongside shopping at bulk food stores, S1 participants also utilised supermarket discounts, and this strategy helped them get food for less money, or to buy more for the same price. This involved browsing through the different supermarket catalogues, shopping at the end of the day “when they [the supermarket] are discounting things they would only toss out”, or even being canny enough to spot the difference in price between a small sized item compared to its larger one. One S1 participant said she did not buy anything from a supermarket unless it was on special. Ashley (S1, F, 53, JobSeeker) shared an example of how she shopped supermarket discounts:

I find that it’s also a rhythm that you get yourself into, so you might have to just go without for a couple of shopping cycles, don’t buy what you might normally buy, if you can do without it, but then start buying in bulk the stuff you do [use] when it’s on special. (Ashley, S1, F, 53, JobSeeker)

Some S1 participants spoke of growing their own food and they used their homegrown produce to supplement the food they received from EFR agencies. Other strategies that were shared by S1 participants included attending free events for the “fancy” food, buying food at a farmer’s market,

or from the local service station. Ella (S1, F, 27, Disability Support Pension) spoke of her preference of buying food at the “servo” as being less shameful or embarrassing, and often did this instead of having dinner at her parent’s place or going to a food relief agency. Interestingly, community-based and roadside food stalls were not mentioned by the S1 participants; however, they were shared by Leonie (S2, F, S, Anglicare) who said they were “around the place, popping up”.

Only one EFR worker (Bonnie, S2, F, S, Hope’s Café) shared her knowledge of the orthodox strategies food insecure adults used to get more food or their money stretch further. The other S2 participants were unaware of their clients using any of these orthodox food acquisition strategies to mitigate their food insecurity.

5.7.2 Unorthodox coping strategies

Unorthodox food acquisition strategies are socially unacceptable ways of procuring food or money to buy food. Framing this sub-theme are the comments from two S2 participants who shared that clients only tend to resort to these practices once they have “exhausted our services, I guess that’s when they resort to the risky behaviour” (Brianna, S2, F, V, CBBC). In response to disclosure of these activities, Leonie (S2, F, S, Anglicare) tended to ask them if this was what they would like to continue doing or did they want to change, sharing that “some people enjoy doing it and so it’s a job”, while Bonnie (S2, F, S, Hope’s Café) steered them towards the food pantry where a third of their food is free and the rest is low cost.

Surprisingly, the EFR workers (S2) who were volunteers at a faith-based agency had no stories to share about their client’s unorthodox food acquisition practices, apart from them accessing EFR. This is an important aspect to note, considering the paid staff in other agencies were aware of their client’s unorthodox practices. From the S1 interviews, however, participants shared their engagement in unorthodox food acquisition practices freely and were utilising these practices in addition to EFR. The data from the S1 interviews also reveals that these unorthodox practices were not specific to any type of social assistance payment.

5.7.2.1 Emergency food relief agencies – “poverty is a business”

EFR agencies also appear under unorthodox food acquisition strategies because they are not the usual place someone would go to for food. In addition, the food insecure adult has to justify their need before receiving food, and even then they are being given leftover food – a process that is vastly different from the autonomy of shopping at a supermarket. Participants discussed the

procedure of obtaining food relief from agencies and one specifically commented on how she believed “poverty is a business” and how the associated checks and balances to obtain food impacted negatively on food insecure people.

Supporting the concept that EFR agencies are unorthodox sources of food is the strict requirement for food insecure adults to ring and make an appointment to be assessed for food relief. This process was identified as a hurdle for participants. Often, there was only a small window of opportunity to call the EFR agency and make an appointment, something that necessitates access to a phone or mobile phone credit. One participant described it as “all these hoops you have to jump through to access the service which for a lot of people in poverty is near impossible for them to do” (Ashley, S1, F, 53, JobSeeker).

Transport to the EFR agency is also a consideration because there are fewer agencies across the city in comparison to the availability of supermarkets. For example, to receive food relief, participants have to make two trips – one to the referral organisation for their Foodbank voucher, and then to the Foodbank Food Hub³⁹ (Glossary), of which there are only four in the Adelaide metropolitan area. Some S1 participants did not own a car and were reliant on someone else to drive them to the EFR agency or were having to catch one or more buses to get there. One participant identified living in an affluent suburb as a barrier to her seeking food relief:

I understand why there’s not a Foodbank in Unley but the closest is Edwardstown, or Woodville’s a little bit further and I don’t drive so it’s like ‘well, do you expect me to get an Uber that costs me 20 dollars each way to pick up free food?’, I’m just not going to do that! (Ella, S1, F, 27, Disability Support Pension)

Similarly, Judy (S1, F, 51, JobSeeker) had the same experience where there were no EFR agencies in her suburb, as the post-interview memo describes:

Judy also talks about living in an affluent suburb, not a lot of EFR agencies because it’s a wealthy suburb and she’s got to travel down to Pt Adelaide via bus most times because she can’t afford to put petrol in her car. This is also a hidden side to food insecurity where it’s not talked about in these affluent suburbs coz it supposedly doesn’t happen (although research highlights more middle-class houses are experiencing FI [food insecurity] on a more regular basis). (Memo, 29 September 2021)

³⁹ Foodbank Food Hubs are located at Christies Beach, Davoren Park, Edwardstown and Woodville in metropolitan Adelaide; <https://www.foodbank.org.au/homepage/who-we-help/individuals/?state=sa>

Mark (S2, M, V, CBBC) commented that the church he volunteered at was aware that transport was a barrier to receiving food relief, but home delivery was not an option for EFR agencies that were mostly funded by their church community. Similarly, Leonie (S2, F, S, Anglicare) commented that one of the major barriers to seeking help was a lack of transport options.

Once at the agency, food insecure adults are also required to demonstrate their need for food relief by providing their Centrelink (Glossary) card as proof they are receiving social assistance payments. This form of checking was considered by almost all of S1's participants as "demeaning", "condescending or belittling", and they felt like they were being interrogated by staff and volunteers at the EFR agencies. One S2 participant reinforced this process by commenting that "the [client's] story has to resonate as one of need" (Brianna, S2, F, V, CBBC). Other S1 participant experiences included the staff at the EFR agency being unconvinced of their need for food relief, with one participant being asked "why are you so broke?" or having to show their unpaid bills so they could get some support, or being told they required a "permit [voucher] to come in here [Foodbank Food Hub]" to access food. Claudia spoke of the lengthy process she went through to get food:

First of all, you have to ring, then you have to go in, then they [laughs] then they give you a 'why haven't you got any money?' and you have to tell them ... and by the end of it you're just making shit up right because you don't have money! (Claudia, S1, F, 55, Disability Support Pension)

Similarly, Ella spoke of the frustration she felt from having to constantly prove her need and how she would not be there if she did not need help:

I think it's demeaning, I don't like having to prove my need, I think the fact that someone's turned up to a service demonstrates need ... I think having to demonstrate need is very demoralising and then to be told 'oh you've done this too many times' and that's only like what three or four times and then now you need financial counselling and it's like you try to live on my income, I don't need financial counselling. (Ella, S1, F, 27, Disability Support Pension)

Experiences like this have led to several participants seeking out other ways of acquiring food or money to buy food, as summed up by Joan (S1, F, 54, Disability Support Pension): "It's bad enough not being able to afford to fucking eat without listening to their shit so I just went 'nah I'm not gonna do that, I'd rather dumpster dive'".

Nearly all EFR workers (S2) said they could not provide food assistance without identification and proof of Centrelink benefits. Only two S2 participants said their agencies did not require any demonstration of need; their food pantry was structured like a social supermarket (SSM)⁴⁰ (Glossary) where anyone could come in and take the free food on offer or purchase low-cost items without having to show a Centrelink card. Only one EFR worker voiced her awareness the impact of proving need could have on someone seeking food relief, stating that the questions asked by EFR agencies are “really irrelevant”, “demeaning”, “disgusting ... and quite offensive to get a can of baked beans and some stale bread ...” and how this was “really adding salt to the wound” (Bonnie, S2, F, S, Hope’s Café). Furthermore, Bonnie stated that being treated as “nothing but data and being a file [number] was a form of trauma” because there was “no autonomy or privacy or dignity in the whole process”.

There are also restrictions on how many times a food insecure adult can visit an EFR agency. Two-thirds of S1 participants shared their experiences of these restrictions and how it made them feel like “a production line”, of being forced to accept the food they were given even if it was inappropriate for their needs or dietary preferences. Tara (S1, F, 30, Austudy) shared her experiences of seeking more food from an EFR agency and being told by “a very snobby middle-class white person ... ‘oh no, you don’t deserve other stuff’”. Unfortunately, one EFR agency would suggest a financial or budget counsellor on a food insecure adult’s fourth visit and would only provide them “two days’ worth” of meals. Bonnie (S2, F, S, Hope’s Café) summed up the process as:

No one overuses food pantries, we don’t need to police them, we don’t need to say four carrots, three of these, no one’s ever overused, never, because what are you doing with it? (Bonnie, S2, F, S, Hope’s Café)

The dehumanised and stigmatising process of accessing food relief was also mentioned by S1 and S2 participants, but from different perspectives. For example, Claudia (S1, F, 55, Disability Support Pension) felt this was because of the high use of volunteers in these agencies, whereas Britt (S2, F, S, CBBC) believed it was linked to government funding and having to meet key performance indicators, which meant the organisation had to “see this many people per day” thereby treating people as numbers. Another EFR worker (S2) also talked about having to be “dispassionate” in

⁴⁰ A social supermarket is a community-based, not-for-profit charity organisation that provides affordable groceries to people on a low income; they do not require a demonstration of need, and are considered universal as anyone can access the supermarket; see Glossary for examples of social supermarkets in Adelaide, South Australia.

order to separate the client from their financial issues and not get too emotionally involved as a means of self-protection.

Highlighting the differences between shopping at a supermarket versus obtaining food relief from an agency, a few S1 participants also cited that Foodbank (Glossary) was often more expensive than a supermarket; Darren (S1, M, 73, Age Pension) thought they were “chasing the dollar”, and Sophie (S1, F, 47, JobSeeker) similarly voiced concerns over the price of food at Foodbank in comparison to supermarkets or other agencies that she frequented. One S1 participant’s comment reinforced the idea of food insecurity being a business, stating:

I thought hang on ... they’re still profiting, from the coffee, a jar of Moccona coffee, a small 100 grams, they want three dollars, so they’re still making money so how on earth is that, you know, benevolent? ... It just doesn’t make sense. (Judy, S1, F, 51, JobSeeker)

Food insecure adults also showed a preference when being remunerated for this study. During data collection for S1, the researcher noticed how many people chose the \$20 Coles supermarket voucher over the \$20 Foodbank voucher they were being given for their time contribution. Out of the 15 S1 participants, 12 chose the supermarket voucher reinforcing the idea that shopping at a supermarket is the preferred choice.

5.7.2.2 *Shoplifting or ‘paying a lower’ price for food in supermarkets*

Nearly all S1 participants had stolen food or deliberately paid a lower price for the food item, and most of this was done through supermarket self-serve checkouts. The data reveal those on JobSeeker and the Disability Support Pension were more likely to be engaged in this activity compared to other unorthodox food acquisition practices. Specifically, three S1 participants shared how they got around the scanning and weighing security process used by the self-serve checkouts by either hiding “something underneath [the] shopping cart, underneath other bags” or by selecting a lower price for an item. For example, Ella (S1, F, 27, Disability Support Pension) explained how she put through organic bananas as regular ones or “fancy fruits as potatoes” in order to pay less for these purchases. Most recently, Joan (S1, F, 54, Disability Support Pension) stole meat from the supermarket as “meat’s so fucking expensive” and had resorted to stealing a “few times this year” because her son was coming to stay, and she did not have any money. While crying, Joan (S1, F, 54, Disability Support Pension) shared that she was terrified of getting caught stating: “Why would you do it unless you were desperate enough and hungry enough!” Interestingly, Bonnie (S2, F, S, Hope’s Café) also shared that meat was the most stolen

supermarket item as well as from their café, citing the lack of meat available at food relief agencies was what drove food insecure people into this unorthodox practice.

Other S1 participants shared how they stole items from the supermarket; however, two specifically stated they would only steal from “a corporate [supermarket]” because they did not “like them”. In defence of her stealing food, Claudia (S1, F, 55 Disability Support Pension) was very expressive and angry:

I found out that he [ex-President Trump] had gone bankrupt five times and I was like ‘fucken, you prick you know, done it on purpose!’ and I thought ‘go fuck yourselves ... if Trump can go bankrupt five times, I can steal some fucking sausages!’ so I just thought fuck it I’m gonna do it! And then I started, and then I felt really guilty. (Claudia, S1, F, 55 Disability Support Pension)

Other S1 participants had not stolen food from a supermarket recently but had done so in the past. Michael (S1, M, 38, Parenting Payment) put this down to knowing “where to access food now”; however, he also admitted to “pocketing some stuff” during the COVID-19 restrictions and openly shared stealing medication from the pharmacy and the choices he makes to ensure his children are fed:

My kids need this medication, that’s 15 dollars ... do I give up the food to get that ointment or give up the ointment and make them [suffer] ... oh I’ll get the food and pocket the ointment ... I don’t like it, but it is what it is. (Michael, S1, M, 38, Parenting Payment)

Only one S1 participant shared that she had been caught stealing, and this put her off shoplifting in the future:

We’re just putting in the groceries in the trolley when these two guys came up and they’re like ‘are you sure you scanned everything?’, and they took me to the office and [I] said, ‘look I’m sorry, I won’t do it again’, so I haven’t. (Helen, S1, F, 57, JobSeeker)

Helen (S1, F, 57, JobSeeker) also went on to comment that if she saw someone else stealing food, she would turn her back, identifying her acceptance that sometimes stealing is necessary when impoverished and hungry. Similarly, Bonnie (S2, F, S, Hope’s Café) shared her perspective on stealing food: “You know that old saying, if you see someone steal food, no you didn’t! You pretend you don’t see.”

Only four S1 participants stated they would not steal, with one emphatically commenting that he “would rather go hungry” (Tony, S1, M, 61, Disability Support Pension), which was a similar

response he had to dumpster diving. A slightly different outlook was shared by Carmel (S1, F, 40, Parenting Payment), who had stolen when she was younger:

You've gotta feed your kids ... I'm not gonna go to court for, you know what I mean, I'd rather go to Cashies and just lose something ... stuff's only stuff at the end of the day, yeah, I'm not gonna go steal, it teaches your kids the wrong thing. (Carmel, S1, F, 40, Parenting Payment)

Four EFR workers (S2) had heard stories from clients about stealing food, while another said there was "certainly no discussion of theft" during the client's appointment. Leonie (S2, F, S, Anglicare) shared an enterprising story:

There was a lad that, he had a bit of a market going, he'd go and steal a couple of things of steak, and he knew where he could go and off-sell the steak for you know, you steal a 20-dollar steak and sell for 10 and he's got 10 bucks to go and buy other stuff. (Leonie, S2, F, S, Anglicare)

When asked why they think someone would resort to shoplifting, Bonnie (S2, F, S, Hope's Café) stated the limits on how much food relief you can access influences their decision to engage in this unorthodox food acquisition practice. Similarly, Britt (S2, F, S, CBBC) said she had heard from clients that they had stolen food from a supermarket, resulting in them being banned; she cited the reason a person might resort to this unorthodox practice as one of need, not just for the thrill of it. Furthermore, when asked why she thought people would steal, Britt (S2, F, S, CBBC) shared that food was an immediate need and the person might be "in the middle of a mental episode and they just need some food or some sugar" and the EFR agency may not have been open, the client did not know the extent of help available, or they might be embarrassed to seek help. Indeed, another EFR worker (S2) stated that some of her clients have stolen food because there are "a whole band of low-income earners that work but they're still on the poverty line, they don't know about these places, they don't know [where to go for food]" (Tasha, S2, F, S, Uniting Communities).

5.7.2.3 Dumpster diving

Dumpster diving into supermarket bins to retrieve food was another unorthodox strategy used by S1 participants. One-third of the S1 participants shared that they preferred to dumpster dive instead of utilising EFR agencies, with their reasons ranging from not having to spend so much money on food, the price of food had gone up, but their social assistance payments had stayed the same, they were desperate for food, or as a social activity done with other people. However, those

on JobSeeker and the Disability Support Pension were less likely to use a dumpster for food compared to those who were on other social assistance payments.

When asked how they started dumpster diving, most S1 participants had friends who were already engaged in this activity. Ashley's (S1, F, 53, JobSeeker) friends showed her the ropes in exchange for the use of her car. The positive aspects of dumpster diving with a group were also mentioned; they know all the "good spots", some had keys to the locks "until they got caught". Other S1 participants linked their dislike of having to demonstrate need at an EFR agency as a reason for engaging in dumpster diving. Two S1 participants specifically mentioned they dumpster dived because of the poor quality of food available at EFR agencies, which was similarly cited by one S2 participant who had heard from clients "that dumpster food is actually better than what you can get at Foodbank, it's fresher, more variety" (Tasha, S2, F, S, Uniting Communities).

The surprising amount of food thrown away was commonly mentioned by S1 participants who dumpster dived, especially at times like Christmas: "Christmas is the best [laughs] coz they buy all that you know, supermarkets overload with shit that people don't buy" (Joan, S1, F, 54, Disability Support Pension). However, relying on food from supermarket dumpsters was either a "lucky dip" or a "feast or famine at times" demonstrating the variability of food availability. One S1 participant was astonished how much good food there was in dumpsters, stating, "I don't know why they [supermarkets] don't give it to foodbanks and stuff, like OzHarvest but you know, they don't" (Joan, S1, F, 54, Disability Support Pension).

The sharing nature of the dumpster diving community was also evident in the S1 interviews. A few cited they shared produce that they had retrieved with others who were food insecure or reciprocated with family and friends: "If I've got something, I share it with them, if they've got something, they share it with me" to the point that "people start putting orders in" (Joan, S1, F, 54, Disability Support Pension). Other S1 participants mentioned they had received dumpster food from others. Ashley provided another example of the sharing nature of dumpster divers:

I don't just do this for myself, like I said I've got friends who are vegan, if I find some almond milk or stuff like that, I'll you know, message a friend and say, 'look I've got some almond milk here do you want it?' (Ashley, S1, F, 53, JobSeeker)

Another S1 participant shared a time when a community member brought an esky full of dumpster food along to a meeting, to share with anyone who wanted it. Interestingly, a few S1

participants spoke of sharing dumpster food with EFR agencies, with some rejecting the food due to their “rules and regulations” but others “quite happily” took the food.

When asked if he had gone dumpster diving, Michael, (S1, M, 38, Parenting Payment) stated that although he currently did not do this he would “be in there, no shame” and that “I’d teach my kids to do it, no fuss”, once he found a bin that “had good stuff” or a bin that was unlocked. Other barriers to dumpster diving cited by S1 participants included not knowing where to go, feeling unsafe going with strangers, plus the fear of being caught. However, possibly the biggest barriers to dumpster diving were the negative connotations or fear associated with eating discarded food, with half of S1 participants stating the food “doesn’t look good to me, yuck”, “it’s offensive because it’s come from a bin”, and even embarrassment at retrieving food from a bin. Other S1 participants stated they would rather “starve” or “go hungry” than dumpster dive or would not “feed it to her child”, and another participant said she would “try to borrow some money” before dumpster diving. One S1 participant eloquently summed up her feelings about dumpster diving by aligning the practice with the stereotype of being impoverished:

Because not everyone wants to have food that’s come out of a bin, no matter how good it looks ... coz it’s dirty, I’m so poor, I’m so dirt poor that I’m getting my food out of a bin, yeah. (Ashley, S1, F, 53, JobSeeker)

Other barriers to dumpster diving included the dumped produce being contaminated by bleach or detergent, or the packaging ripped open making it unsafe to consume. Another consideration was the potential cross-contamination of food. While it was not a direct question in the interviews, one S1 participant shared that she had become sick after consuming dumpster food, leading to her stopping the practice. Others shared anecdotal stories of food poisoning but had not been sick themselves, citing that you needed to be “careful” and “not eat something that’s rotten”. Only two EFR workers (S2) were aware of the practice of dumpster diving, with one citing she had seen it on television only.

5.7.2.4 Other unorthodox strategies used by food insecure adults

Stealing money, volunteering to get free food, eating expired food and sex work complete the unorthodox coping strategies mentioned by participants.

Stealing money

Only three S1 participants shared they had stolen money, with one stating he had done this in the past to buy food but had not recently because he was in a better financial position. Another S1

participant quite tearfully confessed to stealing money from her mum because she was “a bit desperate” (Helen, S1, F, 57, JobSeeker). Peta (S1, F, 50, JobSeeker) also shared that she had ‘found’ money in an ATM drawer and when queried on this find, she confessed that she kept the money instead of returning it to the bank. One EFR worker (S2) commented that clients did not state outright that they had stolen money, rather it was ‘found’, and this might be because the agency must report any illegal activity to the police (Britt, S2, F, S, CBBC). Another EFR worker (S2) shared a story of clients lying about their assets and bank accounts in order to access the financial counselling services. She also went on to share a story about the creativity of some clients:

They create pay slips, and they create bank statements, go through, get a loan and then they’ve got this money fraudulently. (Leonie, S2, F, S, Angicare)

However, four S1 participants stated they would not steal money for a variety of reasons: one said he would “rather go on a diet”, and another said she would not steal because the only people she could steal from were in a similar position. Another S1 participant said stealing was not worth it because she could lose her job.

Volunteering or working for food

This subtheme captures the ways participants use to get free food or extra money to buy food through unusual means. Two S1 participants specifically mentioned they were volunteering in exchange for food, with stating that this free food meant she did not have to dumpster dive. For Tony (S1, M, 61, Disability Support Pension), the thought of receiving food for free did not sit well, therefore he offered to help out one day a week in exchange for food. This working for free food option was also shared by an EFR worker (S2) through a personal story about her struggle as a single parent. She was volunteering at her children’s school and because it was an unpaid role, they provided a free lunch, “So that was my lunch which freed up food for the children and the hubby next time ... so that was a really good little strategy which I tell people about” (Britt, S2, F, S, CBBC).

Eating ‘alternative’ foods or expired food from the supermarket

Other unorthodox strategies shared by S1 participants included eating baby food because it was on special or buying food that was close to, or past, its expiry date. Judy shared an example of this practice:

I buy mark-downs ... I’ve a great Foodland near me and I always get mark-downs, they may be three days away, two to three days away from expiry but that’s what I live on. (Judy, S1, F, 51, JobSeeker)

One EFR worker (S2) shared she had heard from clients accessing the financial counselling services at her agency that they buy “out of date stuff or close to date stuff” (Tasha, S2, F, S, Uniting Communities).

Sex work

Sex work for money for food was only mentioned by two participants, one from an S1 participant who was involved in the sex industry on and off for approximately 20 years, and from Leonie (S2, F, S, Anglicare) who had heard stories of agency clients doing this. Tasha (S2, F, S, Uniting Communities) mentioned she had clients who were engaged in sex work; however, the money earned was not for food, but rather for drugs.

5.8 Chapter summary

Chapter 5 presented the results of S1 and S2 data collection as three main themes with sub-themes, and how these themes map to the research objectives. The next chapter discusses these results, with each section providing links to the relevant research questions and positioning and discussing the results in relation to the existing literature on the topic. Finally, the recommendations for practice, policy and further research are presented along with an analysis of the strengths and limitations of the study.

CHAPTER 6: DISCUSSION

6.1 Chapter overview

Chapter 5 presented the results of the data collection and the findings from the data analysis. The three main themes and their sub-themes were discussed, highlighting the tipping points into food insecurity and the use of orthodox and unorthodox food acquisition practices. These tipping points were the result of adverse childhood and adulthood experiences. This adversity was further compounded by continual oppression from inadequate assistance from the government and other organisations that are charged with providing help in times of need, and the constant narratives and discourses that surround people who are food insecure and impoverished.

Drawing on the existing literature, this chapter discusses and elaborates on the following key ideas that arose from the analysis: (a) the adverse events experienced during childhood and adulthood that tipped participants into food insecurity, (b) the use of orthodox and unorthodox food acquisition practices and the challenges involved, (c) the impact of the COVID-19 CS and ES (Glossary) payments and (d) how EFR agencies are inadvertently contributing to the re-traumatisation of food insecure adults, in particular the volunteer staff. Each section provides links to the relevant research questions and positions and discusses the findings in relation to the existing literature on the topic. Finally, the implications for policy and recommendations for further research are presented, along with an analysis of the strengths and limitations of the study.

6.2 “How did I get here?”: the tipping point of traumatic life experiences

Research Question 1: Who is engaging in orthodox and unorthodox food acquisition practices in metropolitan Adelaide and what life circumstances tipped them into food insecurity?

6.2.1 Adverse childhood events

All S1 participants had experienced significant adversity in life, either in childhood, adulthood or both, and these extrinsic events potentially led to a life of food insecurity and poverty. Early childhood, a critical period for neural and neuroendocrine development, can be negatively influenced by adverse events, impacting individuals throughout their lives (Anda et al., 2006;

Chilton, Knowles, & Bloom, 2017; McCain, Mustard, & Shanker, 2007; Shonkoff & Garner, 2012). Early childhood has also been acknowledged as one of the crucial periods of life and a social determinant of health, whereby those who experience poverty, food insecurity and adversity during childhood experience higher health inequities (Wilkinson & Marmot, 2003).

Several S1 participants in this study shared events that occurred during their childhood, such as exposure to poverty and food insecurity, abandonment, childhood and adolescent sexual abuse, violence in the home and living in the foster care system. These experiences could be considered precursors to their circumstances of poverty and food insecurity in adulthood and are indeed classed as adverse childhood events (ACEs). ACEs occur without a nurturing parent or caregiver, which can lead to a toxic, or altered stress response in children, in turn leading to health problems, poor growth, poor immune function, learning difficulties and behavioural issues (Center for Youth Wellness, 2017). ACEs should not be ignored as there is abundant literature demonstrating the ways in which they shape and influence children, and continue to exert a negative effect into adulthood (Anda et al., 2006; Chilton, Knowles, Rabinowich, & Arnold, 2015; Liu et al., 2013; McCain et al., 2007; Sun et al., 2016).

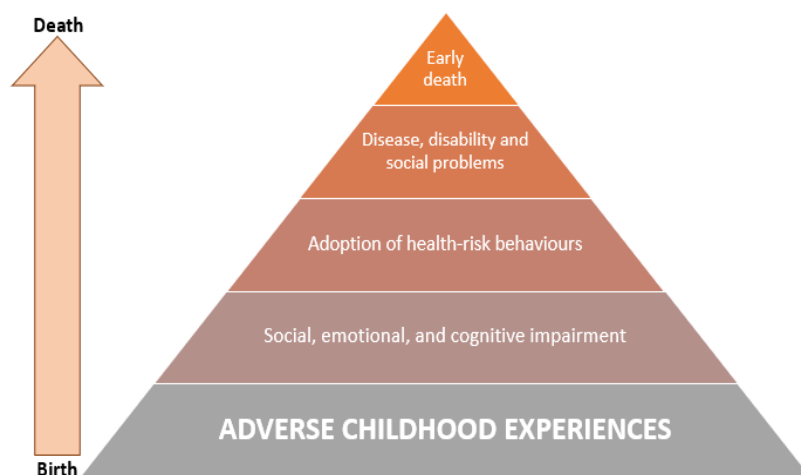


Figure 11 - Potential influences throughout the lifespan of adverse childhood experiences

Adapted from: Felitti et al. (1998, p. 256) and reprinted with permission from American Journal of Preventative Medicine

In 1998, a comprehensive US study involving more than 9,000 adults investigated their childhood exposure to psychological, physical and sexual abuse (Felitti et al., 1998). The focus was to examine the correlation between childhood adversity and the risk factors contributing to adverse health outcomes in adulthood (Boullier & Blair, 2018; Felitti et al., 1998). The results of this

groundbreaking public health study generated 10 categories of ACEs that included abuse, neglect and household dysfunction (Boullier & Blair, 2018; Center for Youth Wellness, 2017; Centers for Disease Control and Prevention, n.d.; Felitti et al., 1998). The study also led to the development of a theoretical pathway (see Figure 11) that describes the journey from childhood to adulthood and the continuing impact of adverse events, leading to impairment, an increase in risky behaviours and chronic disease throughout the life course (Felitti et al., 1998).

Aside from the study by Felitti et al. (1998), other studies suggest ACEs affect mental health, both as an adolescent and into adulthood, with several reporting increased depression and anxiety (Anda et al., 2006; McCain et al., 2007; McIntyre, Williams, Lavorato, & Patten, 2013), adult psychiatric disorders (Nothling, Malan-Muller, Abrahams, Hemmings, & Seedat, 2020), emotional dysregulation (McCain et al., 2007), higher incidences of schizophrenia/schizoaffective disorder (Quide et al., 2018), and impaired social cognitive abilities (McCain et al., 2007; Quide et al., 2018). Another study reported ACEs led to poor physical health and emotional problems in adolescence and adulthood, and this increased with each cumulative ACE experienced (Balistreri & Alvira-Hammond, 2016). Similarly, ACEs, especially emotional abuse, increased the incidence of adult food insecurity (Larson et al., 2023). Chilton et al. (2017) documented the effects of childhood adversity and exposure to violence, neglect, abuse and material deprivation led to the persistence of food insecurity throughout several generations. More recently, a scoping review of the literature on the link between food insecurity and ACEs revealed a connection between experiencing these events and food insecurity in adulthood (Royer et al., 2022). These findings are similar to the landmark study by Felitti et al. (1998).

Two studies investigated why the effects of ACEs persist throughout adolescence and into adulthood, linking the experience with altered gene expression that causes an impaired stress response (Nothling et al., 2020; Shonkoff & Garner, 2012). In particular, Shonkoff and Garner (2012) found ACEs, especially pre- and postnatal exposure to stressors and parental abuse or neglect, resulted in the absence of the buffering and protective mechanism that a nurturing parent or caregiver provides that helps the child cope with the stress. Similarly, Shonkoff and Garner (2012, p. e236), Chilton et al. (2017) and Ke and Ford-Jones (2015, p. 90) state that ‘toxic stress’ – strong, frequent or prolonged stress that stems from child abuse, poverty or neglect – causes “irrevocable damage” to the child’s developing brain and its ability to function. In adults, this toxic stress experience can also lead to increased risk of chronic disease, increased risk-taking behaviour, disrupted social networks, poor school performance, unemployment, poverty, and

homelessness (Shonkoff & Garner, 2012), with another study citing poor academic outcomes (McCain et al., 2007). Similarly, Liu et al. (2013) documented ACEs were a significant indicator for unemployment in adulthood and this did not change if there were single or multiple adverse experiences. Liu et al. (2013) also commented that this is possibly due to lower educational attainment and social isolation, and this is supported by McCain et al. (2007) who also noted academic performance was affected by ACEs. Similarly, Shonkoff and Garner (2012) and Chilton et al. (2015) report that ACEs also contribute to disrupted social networks in adulthood, leading to an inability to connect with others in times of need. Furthermore, adults who experienced toxic stress as a child are unable to provide stable and supportive relationships with their own children, causing an “intergenerational cycle of significant adversity” (Shonkoff & Garner, 2012, p. e237).

In addition to the epigenetic changes from ACEs, early life has been acknowledged as an important social determinant of health, where the influence of social and economic inequities throughout the life course exert a powerful influence on the health of an individual (Wilkinson & Marmot, 2003). This interplay between social inequities and health are focused specifically on the complexities of social, economic, political and environmental determinants, and their impact on an individual’s health (Liamputtong, 2019). In particular, children living in low socio-economic households where there is poor nutrition, poor housing, and a lack of parental emotional support have poorer educational outcomes, and experience behavioural issues and social isolation in adulthood (Wilkinson & Marmot, 2003). Similarly, individuals who are socially disadvantaged by poverty and poor health are often marginalised by these health inequities, which further impacts their mental and physical health (Liamputtong, 2019).

6.2.1.1 *The impact of food insecurity in childhood*

Apart from ACEs, there is also the impact of household food insecurity on a child that may carry into adulthood. A systematic review and meta-analysis conducted by de Oliveira et al. (2020) reported household food insecurity resulted in poor early childhood development, in particular poor cognition and educational attainment, psycho-emotional stress and behavioural problems. Other effects of household food insecurity on children include reduced learning and productivity through poor nutrition, poor mental health and increased incidence of chronic disease in adulthood (Ke & Ford-Jones, 2015).

At an early age, children who experience household food insecurity exhibit adult emotions such as distress, anxiety and worry about not having enough food, as well as concern their parents may be

skipping meals or reducing their portion sizes (Leung et al., 2020; Velardo et al., 2021). Additionally, children feel embarrassment and sadness from their experiences of food insecurity, and these emotions are magnified depending upon the level of disadvantage in the household (Leung et al., 2020; Velardo et al., 2021; Velardo et al., 2024). In particular, Leung et al. (2020) also report that these strong emotions and psychological distress have a direct influence on a child's development and health. Velardo et al. (2021, p. 13) also correlate their own study findings with other research on children who experience food insecurity, suggesting the "adultization and mature forms of stress might impact on children's opportunities ... thereby widening inequalities". Furthermore, Bessell (2019) reports that children were aware of financial pressures, the high cost of living, and the effect a lack of money had on their lives and their ability to afford food. A recent narrative review of children's experiences of food insecurity also found that children were very aware of food stress in the home and of the financial problems faced by their parents (Velardo et al., 2024). Children's awareness of food insecurity also has an emotional impact, with studies reporting that food insecure children experience worry, anger, sadness, and stigma and embarrassment because of its link to poverty (Velardo et al., 2024). Finally, the review demonstrated that children were utilising their own formal and informal networks to manage household food insecurity and were also engaging in the informal economy in order to contribute to the family's household income (Velardo et al., 2024).

Demonstrating the impact childhood food insecurity has in adulthood, a study on adults and their experiences of food insecurity as children, Rosa, Ortolano, and Dickin (2018) found participants had strong and specific memories of embarrassment and shame, and these emotions followed them into adulthood. A recent literature review by Royer et al. (2022, p. 2096) links ACEs to food insecurity in adulthood and suggest that treating the trauma that arises is "crucial" as both are interrelated. Martin (2021, p. 60) also considers the experiences of childhood and adulthood adverse events and being food insecure are "a chicken and egg scenario ... a vicious cycle [as] trauma can be both a cause and effect of food insecurity".

6.2.2 Adverse events in adulthood – the allostatic load of stressful life events and food insecurity

In addition to ACEs, stressful adult life events such as divorce or relationship breakdown, DV, death of a loved one and job loss were also shared by the majority of S1 participants. To understand why high levels of stress impacts on physical and mental health, the fight and flight response to stress and the resulting allostatic load must be discussed to provide context. This

primitive survival instinct involves activation of the endocrine system and the secretion of the hormone cortisol in response to the stressful event, which in turn causes reduced cognitive, metabolic and immune function (Guidi, Lucente, Sonino, & Fava, 2021; Russell & Lightman, 2019). Continual elevation of cortisol has other effects on the body, potentially causing metabolic disease (e.g. type 2 diabetes), obesity, cancer, mental health disorders, cardiovascular disease and impaired immunity (Guidi et al., 2021; Russell & Lightman, 2019). It is the cumulative effects of daily life events, major challenges, low socio-economic status and poverty that contribute to a person's allostatic load (Guidi et al., 2021). Childhood experiences of abuse, maltreatment and a lack of family support also contribute to high allostatic loads in adulthood (Guidi et al., 2021). Similarly, this current study's results confirm research by Pollard, Booth, Louth, Mackenzie, and Goodwin-Smith (2020) where participants cited stressful life events as the reason they were experiencing food insecurity and poverty.

It is also understood that ongoing stress has an impact on a person's mental and physical health, with Wilkinson and Marmot (2003) referring to it as a one of the social determinants of health. Even the stress of living in poverty and being food insecure has an ongoing impact on a person's mental and physical wellbeing (Temple, 2018), with a more recent study highlighting increased psychological distress from managing household food insecurity (Leung et al., 2022). This study reports that parents were experiencing frustration, sadness and guilt from being unable to provide for their family, coupled with stigma and shame when accessing EFR agencies (Leung et al., 2022). Similarly, being continually in a 'liminal state', which is a feeling of uncertainty and transition created by significant life changes, adds stress when transitioning from being food secure and shopping at regular supermarkets to being food insecure and sourcing food from EFR agencies (Moraes, McEachern, Gibbons, & Scullion, 2021). Moraes et al. (2021) also acknowledge the pursuit of nutritious food from EFR agencies further exacerbates this feeling of liminality because food insecure adults are continually forced to consider alternative food sources.

An Australian study on the experiences of stress by food insecure adults reported they were more likely to be affected by stress, compared to those who are food secure (Temple, 2018). Furthermore, and supporting the findings of this current study, over one-third of participants in the study by Temple (2018) experienced stress from unemployment, death of a family member, mental illness and serious illness. Being food insecure is also a major source of stress for an individual, creating a never-ending cycle between food insecurity, stress, and poor mental and physical health (Leung et al., 2022; Loibl, Bruine de Bruin, Summers, McNair, & Verhallen, 2021;

Pourmotabbed et al., 2020). These cyclical events have an impact on a person's ability to seek employment or stay employed, pushing them back into poverty and food insecurity (Fitzpatrick & Willis, 2020). Similarly, Pourmotabbed et al. (2020) report a relationship between food insecurity and depression and stress in adults. A more recent longitudinal study also correlated high UPF consumption with a higher level of psychological distress, thereby suggesting a direct association between the foods often available through food relief and depressive symptoms (Lane et al., 2023).

6.2.2.1 *Poor mental and physical health*

In addition to the stress of adverse events and from being food insecure, participants were often dealing with poor health, which could be linked to their experience of high allostatic load and resulting physical symptoms (Guidi et al., 2021). Examples of physical symptoms include anxiety, irritability, insomnia, and restless sleep (Guidi et al., 2021).

S1 participants reported they were struggling to afford medications and specialist visits required to maintain good health and manage their conditions. Mental health issues were described by every S1 participant, with one specifically stating that all food insecure people will experience poor mental health. This current study also found that some food insecure adults were having to choose between buying food or their medications, despite the substantial discounts provided by the PBS (Glossary). One study on the relationship between food insecurity and coping strategies reported over a third of participants were forgoing medical care for their diabetes due to the cost (Mayer et al., 2016). Similarly, a recent survey of people on social assistance payments by ACOSS (2023) (Glossary) reported two-thirds of respondents could not afford their medications, with nearly all surveyed stating that living with food insecurity and poverty was affecting their mental and physical health. There are also the detrimental effects of suddenly stopping some medications, and this was exemplified by one S1 participant who, after rationing her diabetes medication, experienced a stroke and was hospitalised. Abruptly ceasing insulin therapy for type 2 diabetes is reported to cause severe hyperglycaemia (high blood sugar levels) (Chan et al., 2021). Other prescription medications can have similar side effects when abruptly ceasing treatment, for example, suddenly stopping antidepressants can cause a resurgence of psychological symptoms such as anxiety, mania, cognitive impairment and insomnia (Bangert & Aisenberg, 2020).

6.2.2.2 Domestic and family violence

The majority of S1 participants shared their experiences of domestic and family violence and this finding was supported by S2 participants as one of the reasons people sought food relief and financial counselling. Recent figures from the WHO (Glossary) state around one in three women aged 15 to 49 years have experienced DV (WHO, 2024). DV is “behaviour by an intimate partner or ex-partner that causes physical, sexual or psychological harm, including physical aggression, sexual coercion, psychological abuse and controlling behaviours” (WHO, 2024). In Australia, domestic and family violence affects an estimated 3.8 million adults (approximately 20% of the population), with 2.2 million experiencing violence from a current or ex-partner (Australian Institute of Health and Welfare [AIHW], 2024)⁴¹ (Glossary). In November 2023, four women were killed by their intimate partner, with Embolden⁴² (Glossary) calling for a royal commission into the complexity of this systemic issue (Shepherd, 2023).

In the current study, many women had escaped violent relationships, leaving them food insecure and homeless, and this has been reported in other literature. Waterman et al. (2023, p. 1) found DV and food insecurity are linked and that there is a “meaningful connection” between the two issues. The authors of this study recommend policy changes that focus on the perpetrators rather than the victim/survivors of DV to avoid re-traumatisation (Waterman et al., 2023). Another recent systematic review also found being food insecure resulted in “an increased likelihood of experiencing” DV (Frank et al., 2024, p. 834), suggesting the economic stress of being food insecure leads to violence in the home. The authors of this study emphasised the importance of trauma-informed approaches in EFR agencies to acknowledge adversity and stressors being experienced by their clients to avoid re-traumatising, stigmatising, and shaming them (Frank et al., 2024). Adding to the discussion about causality and the relationship between DV and food insecurity, a systematic review by McKay and Bennett (2023) reports an inability to establish a directional relationship between DV and food insecurity and suggests there is evidence of a bi-directional relationship. For example, for some women who are economically trapped, a lack of financial resources and inability to purchase food might lead to food insecurity, which might lead to violence in the home from the resulting stress and relationship conflict (McKay & Bennett,

⁴¹ The Australian Institute of Health and Welfare is an Australian Government agency responsible for information and statistics on health and welfare data; <https://www.aihw.gov.au/about-us/what-we-do>

⁴² Embolden, formerly the Coalition of Women’s Domestic Violence Services SA, is South Australia’s peak body of domestic, family and sexual violence services; <https://embolden.org.au/about>

2023). Often women leaving violent relationships experience food insecurity from withdrawal of financial support provided by the perpetrator (McKay & Bennett, 2023) and this was also reported by S1 participants.

6.2.2.3 *Navigating Centrelink and mutual obligation requirements*

In addition to the stressful and traumatic life events food insecure adults experience, another stressor is navigating Centrelink (Glossary) to receive social assistance payments. Figures from the Australian Institute of Health and Welfare (AIHW) show that around 5 million Australians are receiving social assistance payments; of that 5 million, the majority are receiving the Age Pension (52%), with 32% receiving JobSeeker, Youth Allowance or the Disability Support Pension (AIHW, 2023). During COVID-19, the number of people accessing social assistance payments increased due to the government-imposed social restrictions, with JobSeeker access doubling from 886,200 people to 1.6 million people between March and June 2020 (AIHW, 2023).

A recent study into the Australian welfare system has shown that recipients face a multitude of challenges when navigating the Centrelink system to receive their social assistance payments, with many aspects of the system not complementing each other, ambiguities around payments and a lack of help from staff, leaving the responsibility to the individual seeking help (Lindberg, McKenzie, Haines, & McKay, 2021; McKenzie, Lindberg, & McKay, 2023). Often social assistance recipients have their payments halted or reduced due to these systemic failures (McKenzie et al., 2023). Even moving from one social assistance payment to another, for example moving from JobSeeker to the Disability Support Pension, is time consuming, requiring “significant document and evidence ... and a nightmare”, sometimes taking over a year, with multiple specialist and doctor visits (McKenzie et al., 2023, p. 5) or applicants being “inadequately recognised by the scheme” (Zorbas et al., 2023, p. 162). These experiences were also shared by focus group participants in Pollard et al. (2020), who described accessing Centrelink and other services as frustrating, unhelpful and uncaring.

In this study, over half of S1 participants were receiving either JobSeeker, Parenting Payment, or Youth Allowance, which are subject to mutual obligation requirements. Mutual obligation requirements “are tasks and activities you agree to do while getting certain payments from us” and “penalties may apply if you don’t meet them” (Services Australia, 2023a). For example, those on JobSeeker and Youth Allowance agree to a Job Plan and attend appointments with their employment services provider, they must look for work, go to all job interviews, and accept any

offer of suitable paid work (Services Australia, 2023a); this offer of paid work is often unsuitable, and recipients are under threat of having their payments suspended (Considine, 2022). These mutual obligation requirements have been considered the “strictest and most punitive in the world” (Azize, 2022, p. 16; Klein, Cook, Maury, & Bowey, 2022) and a “potentially humiliating experience” (Considine, 2022, p. 38), often compounded by poverty and food insecurity.

Furthermore, in the current study, all S1 participants were experiencing mental and physical health challenges, which means those on JobSeeker, who should possibly be receiving the Disability Support Pension, are continually subjected to “being ritually humiliated by welfare officers” and the demoralising process of mutual obligation requirements (Kurita, 2022, p. 180). This is made worse when their mental and physical health challenges mean they are potentially unable to engage in paid work but cannot navigate the necessary paperwork to move from JobSeeker to the Disability Support Pension (McKenzie et al., 2023).

6.3 The use of orthodox and unorthodox food acquisition practices

Research Question 2: What orthodox and unorthodox food acquisition practices are being utilised by food insecure people to mitigate the effects of food insecurity?

6.3.1 A bland diet with limited food choices – the long-term effects of poor nutrition

This study found food insecure adults were utilising a variety of orthodox and unorthodox food acquisition practices to supplement their food intake; however, they were still consuming an often repetitive and bland diet based around the available food. This finding has also been documented by Pollard et al. (2018), who cited poor nutrition knowledge of the EFR staff and volunteers, a lack of healthy food options being donated to the EFR agency, and the unreliability of food supply as contributors to a poor diet. Similarly, Wingrove, Barbour, and Palermo (2016) found the availability of nutritious food for food insecure adults is dependent on the types of food being donated. Other studies have also reported the impact food insecurity has on physical and mental health, which is partly due to the poor quality of food available to people on a low income (Bigand, Dietz, Gubitz, & Wilson, 2021; Moubarac et al., 2013; Papan & Clow, 2015; Pollard et al., 2018; Pourmotabbed et al., 2020; Stinson et al., 2018). Foodbanks and EFR agencies are often given food donations that have a long shelf-life; however, these tend to be UPFs (Wingrove et al., 2016). UPFs are high in sugars and saturated fats and low in protein and fibre, and have been shown to be

linked with an increase in chronic diseases such as type 2 diabetes, obesity and cardiovascular disease (Guo et al., 2023; Lindberg et al., 2022; Machado et al., 2020; Moubarac et al., 2013). A more recent longitudinal study also aligned high UPF consumption with a higher level of psychological distress, suggesting an association with poor mental health (Lane et al., 2023) and a systematic review found UPF foods increased cardio-cerebrovascular disease (Guo et al., 2023). Another study in the Netherlands identified that food bank parcels did not meet nutritional guidelines for a healthy diet as they were low in fruits and vegetables, dairy and meat products (Neter, Dijkstra, Visser, & Brouwer, 2016), and a study conducted in Texas, US, reports similar results where food donations were lacking in macro- and micro-nutrients (Mousa & Freeland-Graves, 2019).

However, these findings are not new. A study in 2008 by Tse and Tarasuk (2008) identified that meals served to homeless people in Toronto, Canada did not meet nutritional needs. The authors of this study also commented that this was not unique to Canada, but also affected Australia, Europe and the US (Tse & Tarasuk, 2008), suggesting the emergency food response in these countries compromises the health and physical wellbeing of food insecure adults. This 2008 study and other more recently published literature suggest that the foods provided to food insecure adults by EFR agencies and food banks is contributing to and exacerbating their poor health, which could be considered re-traumatising, and another spiral of oppression that they cannot escape (Bigand et al., 2021; Caraher & Davison, 2019; Food & Research Action Centre, 2017; Kaur, Lamb, & Ogden, 2015; Mousa & Freeland-Graves, 2019; Neter et al., 2016; Pourmotabbed et al., 2020; Tse & Tarasuk, 2008; Turnbull & Bhakta, 2016; Wingrove et al., 2016).

Other studies have assessed the nutritional quality of the diets of food insecure households, with one study reporting only a third of their participants met the Australian Dietary Guidelines to Healthy Eating⁴³ (Glossary) for vegetable and meat consumption, and none met the requirements for fruit intake (Lawlis, Bowden, Lo, & Devine, 2022). Furthermore, Lawlis et al. (2022) found the impoverished women in their study were consuming a diet high in white bread, pasta and energy-dense nutrient-poor foods. Another study from the US reports the diets of low-income adults changed depending on their finances, and when money was tight, they were consuming a carbohydrate-rich diet of canned and packaged foods because they were a cheaper option (Darko,

⁴³ The Australian Guidelines for Healthy Eating have been developed to promote health and wellbeing by providing information about the types and amounts of foods, food groups and dietary patterns needed for a healthy life; <https://www.eatforhealth.gov.au/guidelines/about-australian-dietary-guidelines>

Eggett, & Richards, 2013). One recent study reported similar findings to national and international research. After assessing the diets of food insecure households, the authors reported that participants had lower fruit, vegetable and whole grain cereal intake compared to food secure households, and lower overall intakes of energy, protein, fibre and monounsaturated fat (Lindberg et al., 2022).

In addition to consuming a bland diet with limited variety, S1 participants often skipped meals or ate one meal a day, and this was also reported in the recent survey by ACOSS (2023) (Glossary) where respondents were eating less, skipping meals, and cutting back on foods essential for good health. Similarly, Lawlis et al. (2022) report that the women in their study consumed inadequate amounts of food, with 27% of participants only eating one meal a day, and this was despite their creativeness and resourcefulness when seeking food. One reason given for only eating one meal a day might be because the participants were shielding their children from household food insecurity, a practice where the parent hides or conceals food insecurity by skipping meals to ensure their children have adequate food intake (Lawlis et al., 2022; Velardo et al., 2021). Other literature also identifies this practice, noting that the unintended consequences of skipping meals often resulted in disordered eating behaviours, including binge eating when food became available (Stinson et al., 2018; Watson, Booth, Velardo, & Coveney, 2022). Another recent meta-analysis of the literature supports this relationship between food insecurity and a higher incidence of binge eating, identifying a link between the experience of childhood food insecurity and this practice (Abene et al., 2023).

6.3.2 Social capital and social networks

Social networks were an integral part of S1 participants' lives and a necessary survival mechanism. Stories were shared about the generosity of these social networks, where help was given to them during times of need. S1 participants spoke of how financial counsellors, people in their community, friends and family helped them out with food, money to buy food, transport to shopping and food relief agencies, and even a place to stay. There was also a level of reciprocity from the food insecure adults as well, sharing what little they had with others in similar circumstances.

Social capital is one of the forms of capital described by Bourdieu (1986) as having access to a network of people who rely on each other to provide support through material exchanges. This network can comprise family, friends, community groups or other people in similar circumstances

(Bourdieu, 1986). This ability to access and utilise social networks is an important factor to consider with regard to food security. Baum (2008) states that social capital is often higher in those who are in a better economic position as it provides them with more opportunities and potential to seek out and receive help when needed, whereas low social capital can result in social exclusion, leading to poorer health outcomes, less resistance to diseases, and a reduced ability to cope (resilience). Additionally, Nosratabadi et al. (2020) found that social capital improved food security in two ways – knowledge sharing and food sharing – through the social networks of family, friends and the community. This practice was true of S1 participants, who were utilising their social networks in a reciprocal manner, sharing their own resources and information with others as well as accessing food and knowledge themselves. This is a similar finding to Leddy et al. (2020) who highlight the importance of these social networks, in particular assistance with transport, shopping, cooking and sharing food. Information sharing on where to access financial assistance and food relief was also reported by Leddy et al. (2020) and Nosratabadi et al. (2020), and this activity was also mentioned by both S1 and S2 participants.

However, the utilisation of social networks can be disrupted by ACEs, with Chilton et al. (2015) suggesting these events affect the development of valuable social skills, resulting in an inability to access and utilise support from others. This may be true for the current study, with several S1 participants stating they did not feel comfortable asking for help from friends and family, yet the reasons they were uncomfortable could not be linked with childhood adverse events and may have been due to the stigma and shame of being food insecure. Leddy et al. (2020) similarly report that food insecure women in their study were not accessing their social networks, citing shame and embarrassment, and because of this, they often went hungry. The authors of this study also commented that social capital was not reliable and often was limited by feelings of embarrassment and shame (Leddy et al., 2020).

The impact of not having a social network to rely on was mentioned by several S1 and S2 participants, and this left participants without any options of where to access food, or the money to purchase food. Two S1 participants specifically mentioned the loss of a parent who provided support and helped mitigate the effects of poverty and food insecurity and the impact of losing this valuable social network. No conclusions can be drawn from this, and perhaps warrants further research on the impacts of having/not having a social network to draw on when experiencing poverty and food insecurity.

6.3.3 The debt spiral and long-term financial implications of using for-profit organisations

A variety of organisations provide quick financial assistance to people who may not have access to other loan services due to a bad credit rating (Bos, Carter, & Skiba, 2012; Eisenberg-Guyot, Firth, Klawitter, & Hajat, 2018; Prager, 2014). These include for-profit organisations such as pawnbrokers and BNPL services (Glossary), which are heavily advertised, easy to use, and provide quick cash and credit options without extensive credit checks (Pollard et al., 2020). Utilising these for-profit organisations often leaves food insecure people in a worse financial position than before, due to the high interest rates and penalties for late payments (Financial Counselling Australia, 2023; National Debt Helpline⁴⁴, 2020 (Glossary); Treasury, 2022).

6.3.3.1 Selling or loaning items to a pawnbroker for money

In the current study, Cash Converters (Glossary) was the most popular organisation used by all participants. Common items accepted for pawning were electronic goods, including phones and gaming equipment, and jewellery (Cash Converters, 2023a, 2023b); however, S1 participants also spoke of pawning their household whitegoods and even their cars. Cash Converters allows an individual to get on-the-spot cash by 'loaning' them money on an item of value, and once the loan plus interest is paid off, the item will be returned. Nowhere on their website is information about how much interest is paid on these loans (Cash Converters, 2023a); however, Pollard et al. (2020) state it is around 35% per month. The use of these for-profit organisations is often due to the lack of awareness of other non-profit loan options that are available, for example from organisations such as Good Shepherd, which provide no-interest loans (Good Shepherd, 2023; Pollard et al., 2020). There is further evidence that this for-profit industry is exploiting low-income adults, supported by the 23% increase in Cash Converter's revenue for 2023 (Cash Converters International Ltd, 2023).

A recent scoping review on the various coping strategies used by food insecure adults documented the practice of this financial strategy and highlighted the lack of consumer protection and danger their use poses to people on low incomes (Watson et al., 2022). The lack of existing literature suggests this is an under-researched area and one that needs to be investigated (Bos et al., 2012). Bos et al. (2012) suggest this might be due to loans through a pawnbroker not having an impact on an individual's credit score, and therefore would not be reported.

⁴⁴ The National Debt Helpline is a free service that offers non-judgemental and confidential financial counselling services to help people with their debts; <https://ndh.org.au>

6.3.3.2 Using Buy Now Pay Later services – another debt trap

BNPL services were the next most commonly cited financial strategy. Almost all S1 participants had used BNPL to help pay their bills and make other non-food related purchases. BNPL became popular in the 2010s as a way to bypass the financial burden and high fees of credit cards and bypass credit checks, and to make purchases that could not be afforded outright (Big Commerce, 2023; Insider Intelligence, 2023). The service allows people to purchase items and pay in a pre-determined number of instalments over time and has been cited as a more affordable way to finance purchases (Big Commerce, 2023; Economics Reference Committee, 2019). BNPL services do not charge interest on the purchases; however, some charge a small account-keeping fee (Economics Reference Committee, 2019). There is a variety of BNPL services such as Klarna and Afterpay, and their use has steadily grown since 2016 with the number of transactions in each month increasing from over 50,000 transactions in April 2016 to 4.8 million in June 2020 (Australian Securities & Investments Commission [ASIC⁴⁵] (Glossary), 2018, 2020). More recently, the Australian family-owned supermarket chain, Drakes, announced it was partnering with Afterpay to allow the use of BNPL services to purchase groceries (Megelus, 2023). Afterpay is now offering a \$10 per month subscription to activate BNPL services anywhere that accepts mobile payments such as Apple Pay, Google Pay and Samsung Pay (Blakkarly, 2023).

While there is a lack of academic literature on the topic of BNPL service use by food insecure adults, there are some concerns about how BNPL creates a debt trap for consumers, by enabling them to make purchases they cannot afford, and on impulse (ASIC, 2018; Economics Reference Committee, 2019; Raj, Jasrotia, & Rai, 2023). There is also some concern over the BNPL industry being unregulated, unlike the credit and financial industry (ASIC, 2018; Economics Reference Committee, 2019; National Debt Helpline, 2020; Powell, Do, Gengatharen, Yong, & Gengatharen, 2023) because they do not fall under the *National Consumer Credit Protection Act 2009* (Treasury, 2022). This means individuals with a poor credit rating or on a low income can still be approved for the purchase without having to demonstrate their ability to make repayments (ASIC, 2018; National Debt Helpline, 2020; Powell et al., 2023; Treasury, 2022). However, missed repayments can result in suspension of further use of the service (ASIC, 2018) potentially placing an individual in further financial difficulties if they had been relying on the service to pay their regular bills. Indeed, these missed payment fees totalled \$43 million in the 2018–19 financial year (ASIC, 2020)

⁴⁵ The Australian Securities & Investments Commission is a government organisation that focuses on providing a fair, strong, efficient financial system for all Australians by acting against misconduct; <https://asic.gov.au/>

suggesting BNPL services are a debt-trap. The National Debt Helpline (2020) also cites the high risks of using BNPL because of the difficulty in tracking spending leading to unaffordable debt, late payment fees can add up quickly, and a person's credit rating can be affected if defaulted. Furthermore, research conducted by ASIC reports that 20% of BNPL users had to cut back or go without food, and one in five missed or were late paying other bills because of the BNPL debt (ASIC, 2020). A recent survey by Financial Counselling Australia (2023) reports that 62% of clients utilising financial counselling services have BNPL debts, with the majority having three or more accounts, leading to a "vicious cycle where they cannot afford food because they are paying off the BNPL debt" (Financial Counselling Australia, 2023, p. 8). The financial counsellors surveyed by Financial Counselling Australia also stated that BNPL providers lacked empathy when clients are experiencing hardship. In addition to these concerns, Australia's consumer watchdog, CHOICE⁴⁶ (Glossary), every year nominates a variety of business and services a 'shonky' award where they "name and shame the products and services that have added distress ... to our lives" (CHOICE, 2023a). In 2021, they nominated the BNPL service provider *hum* the Shonky Award for "unaffordable debt", its exploitation of the National Credit Code loophole by not assessing their customer's ability to repay the debt, lending amounts over \$15,000 and the high monthly fees charged (CHOICE, 2023b).

6.3.4 Shoplifting and dumpster diving for food

Participant interviews in the current study revealed an interesting aspect of unorthodox food acquisition practices – those on JobSeeker and the Disability Support Pension were more likely to shoplift food, with almost half of S1 participants sharing their use of this practice. The sample size in this study is too small to make a definitive correlation; however, this would be a unique opportunity for further research.

When asked how they shoplifted food, S1 participants shared the strategies they used to circumvent the self-serve checkouts in major supermarkets, which included hiding the item underneath shopping bags or selecting a lower price for the item. The installation of self-serve checkouts, which rely on consumer honesty, has created a new type of shoplifter, where the checkout is being used to facilitate theft by selecting an item that is cheaper by weight (Taylor,

⁴⁶ CHOICE is Australia's leading consumer advocacy group; it tests, researches and conducts investigations to bring the latest advice on what to buy, and what to avoid; <https://www.choice.com.au/>

2016, 2018). The Australian comparison website Finder,⁴⁷ (Glossary) reported from its nationally representative survey that almost one in five people admitted to stealing food from the supermarket, similarly using the self-serve checkouts and selecting a lower priced item (Kwiet-Evans, 2022).

In the current study, it was not always ascertained what type of food was being stolen; however, one S1 participant shared that she was stealing meat because her son was coming to stay. Theft of meat from a supermarket was also mentioned by a S2 participant; she cited the lack of meat available at EFR agencies was what drove food insecure people into this unorthodox practice. In opposition to the current study's findings, Watson et al. (2022) in their scoping review of orthodox and unorthodox food acquisition practices identified only a small number of reviewed articles that mentioned shoplifting food, and the number of people participating in this practice was quite low. Similarly, there is a lack of academic literature on food insecurity driving the need to shoplift; however, some newspapers are reporting an increase in supermarket theft and linking it with the recent cost-of-living increases and increasing food prices (Barrett & Taylor, 2023; Luu, 2023). This recent increase in shoplifting has resulted in supermarkets implementing security measures such as double entry gates, trolley locking systems, surveillance cameras and scan technology at self-serve checkouts (Barrett & Taylor, 2023; Luu, 2023). Similarly, Crime Stoppers South Australia⁴⁸ (Glossary) and major Australian supermarket Coles have recently joined forces to address the recent increase in shoplifting and retail crime (Crime Stoppers South Australia, 2023). Its media release cites South Australia Police data, reporting a 29% increase in retail crime in the last 12 months to May 2023 (Crime Stoppers South Australia, 2023). The purpose of this collaboration is to upskill staff on how to handle incidents of retail crime, and also how to deal with physical and verbal abuse from shoplifters (Crime Stoppers South Australia, 2023). Coles supermarket's annual report for 2023 also showed a 20% increase in total 'stock loss'; however, these losses also included waste and mark-downs, so it is difficult to identify how much was from shoplifting (Coles Group Limited, 2023). Similarly, Woolworths, in its latest annual report, mentioned higher rates of theft due to rising cost-of-living pressures but did not stipulate how much this was costing the supermarket (Woolworths Group Limited, 2023). South Australian crime statistics for the financial

⁴⁷ Finder is Australia's financial comparison site; they provide clear and simple comparisons for a wide range of products and services; <https://www.finder.com.au/>

⁴⁸ Crime Stoppers South Australia is an independent community organisation that works with police, government, media, corporate partners and the community to help solve and reduce crime; <https://crimestopperssa.com.au/>

year 2022–23 show around 11,000 people engaged in “theft from shop” (Government of South Australia, 2023); however, this dataset does not identify what was actually stolen, or whether it was from a major supermarket, department store or speciality store.

While nearly half of S1 participants shared their practices of shoplifting food from supermarkets, the opposite was true for dumpster diving. Indeed, Jobseeker and Disability Support Pension recipients were less likely to dumpster dive in comparison to shoplifting, with the majority of S1 participants stating they did not, and would not, engage in this practice. Similarly, a recently published scoping review also found that dumpster diving was more likely being done by ‘waste warriors’ and by ‘freegans’ in a way to minimise the impact on the environment by reducing food waste, rather than to alleviate food insecurity (Watson, Booth, Velardo, & Coveney, 2023). However, despite the lack of recent literature linking food insecurity with the practice of dumpster diving, several media reports have focused on the cost-of-living increases and how dumpster diving has allowed people to save money and survive (Lang, 2022a, 2022b; Myers, 2022).

S1 participants also shared the strategies used by supermarkets to reduce theft of food from their dumpsters, for example, locking them at night, pouring bleach or other noxious substances over the food, and the use of security guards who regularly patrol the property. Similarly, the use of bleach to render food inedible and unsafe was reported by Boyle (2010), Delman (2015), Fernandez, Brittain, and Bennett (2011), and Jenke (2018), forcing divers to decontaminate their food before consumption. There are also other public health implications of dumpster diving, including physical harm associated with climbing into the dumpster and the consumption of food that may have perished (Anater et al., 2011; Munoz, Wagner, Pauli, Christ, & Reese, 2021). Food storage advice from SA Health (2019b) states all food should be stored at 5° Celsius (41° Fahrenheit) or colder to prevent the growth of harmful bacteria. Correct storage of raw meats is also important to avoid any juices dripping on other foods (SA Health, 2019c); this is something that is unavoidable when food is randomly thrown into a dumpster, increasing a diver’s risk of food poisoning. Food safety recalls are also problematic for dumpster divers. Supermarkets are typically advised to throw any affected product out, potentially increasing the food-borne contaminant risks for dumpster divers who might not be aware of the recall. It is also important to note that contaminated food may not look, smell or taste any different (SA Health, 2019a), therefore dumpster divers may have no indication of how long the food has been in the dumpster, what temperature it has reached, and whether it is safe to consume. Also of concern is that dumpster divers are unlikely to report any occurrences of food poisoning due to the illegal nature

of the activity (Anater et al., 2011). Symptoms of food poisoning include nausea, vomiting, diarrhoea and stomach cramps; it is a notifiable condition in Australia, therefore legally any cases of food poisoning must be reported to SA Health (SA Health, 2019a). Food poisoning can be serious and may cause illness and death in the elderly, people with compromised immune systems or pregnant women (SA Health, 2019a).

6.4 The COVID-19 economic payments and their impact on food insecurity

Research Question 3: What did the COVID payments and cost-of-living payments mean for food insecure people?

*Let's be clear, food insecurity is not caused by a lack of food **but a lack of political will by policy makers and decision-makers.** It is caused by systemic injustices, structural racism, and unequal privilege.*

Katie S. Martin (2021)

Co-incidentally, during the period of this study, the Morrison Liberal government's financial response to the COVID-19 pandemic in March 2020 provided a unique 'natural experiment' on how easy it was to lift thousands of people out of poverty. When food insecure adults were given an increase to their social assistance payments, accessing food using orthodox and unorthodox practices diminished, and participants were temporarily able to shop at a regular supermarket, as well as pay bills, and seek previously unaffordable medical and personal care. Then in April 2021, the Australian Government progressively dropped the payments back to pre-pandemic levels (see Figure 1 on page 15 for detailed information on these payments and when they were implemented/withdrawn); since then, there have been small increases but not enough to lift food insecure people out of poverty.

S1 participants openly shared the difference the CS and ES payments (Glossary) made to their lives. The impact of being temporarily lifted out of poverty was unexpected and resulted in them being able to afford to shop at regular supermarkets, pay bills, seek medical care and not stress about money. This finding was also reported by ACOSS (2020b) (Glossary) and Klein et al. (2022), with participants in both studies stating they were able to meet their basic nutritional needs, such

as being able to purchase fresh fruit and vegetables and, more importantly, purchase meat. Another recent study also highlighted how social assistance payments were “inadequate for surviving” and how the COVID-19 increase allowed them to stock up on food and purchase better quality food (Zorbas et al., 2023, p. 159). This natural experiment provided us with a clear understanding that food insecurity is not a lack of food, rather it is a lack of money to afford this basic human right that necessitates food insecure adults utilising orthodox and unorthodox food acquisition practices.

As mentioned in earlier chapters, the Australian Government is responsible for ensuring all Australians have sufficient income, access to shelter, food and other basic necessities, without necessarily having employment (Keleher, 2016). However, social assistance payments were not designed with food security in mind, rather they were originally implemented to provide “a basic safety net to alleviate poverty” (Richards et al., 2016, p. 65) and yet despite this, most people on these payments are still impoverished (Davidson et al., 2023). Recent Australian figures have revealed more than 3 million people are living below the poverty line, and those who are affected most are barely existing on inadequate social assistance payments such as JobSeeker and Youth Allowance (Davidson et al., 2023). Similarly, ACOSS (2023) surveyed people who receive social assistance payments and reported they were inadequate, and people were struggling to pay for rent, food, medications and utilities. The poverty gap, which is the difference between the poverty line and how far under that line the social assistance payments fall, has been increasing steadily, from \$168 per week in 1999, to \$323 per week in 2020 before the COVID-19 supplement was provided (McKail, 2023).

6.4.1 Requests to ‘Raise the Rate’ of social assistance payments

Major welfare groups in Australia have been advocating for an increase to social assistance payments for the past two decades (Mendes, 2020). In 2018, there was a ‘Raise the Rate’ campaign asking the Morrison Liberal government to provide people on social assistance payments with a decent standard of living. This campaign, championed by ACOSS (Glossary) and supported by other organisations and some MPs, was seeking an increase to all social assistance payments (ACOSS, n.d.; Skattebol, 2011), citing an increase would help move people above the poverty line and provide the income they need to live a healthy life (Davidson et al., 2018; Raise the Rate, 2019). More recently, ACOSS has asked for an increase to all social assistance payments of at least \$76 per day, to bring it in line with the Age Pension (ACOSS, 2023).

Similarly, Anglicare (Glossary) in a recent report recommends social assistance payments be increased to above the poverty line (McKail, 2023). Despite this agitation for change, both the previous Morrison Liberal government and the current Albanese Labor government refuse to provide a substantial increase to the rate of social assistance payments. In particular, the Morrison Liberal government believed that a more “generous [JobSeeker] payment” would discourage people to look for work (Mendes, 2020, p. 44). Yet in spite of this refusal, during the COVID-19 pandemic the Morrison Liberal government very easily and quickly provided the CS and ES payments (Glossary) to everyone on a social assistance payment (refer to Figure 1 on page 15). This COVID-19 increase, specifically to JobSeeker, brought recipients in line with the Henderson poverty line⁴⁹ of just under \$600 per week (see Figure 12) (Johnson, 1996).

Demonstrating the positive effect the CS and ES payments had for social assistance recipients, a recent report titled *Poverty in Australia* highlighted the sudden and dramatic reduction in the number of people affected by poverty. This report documented the number of people experiencing poverty decreased by 49% in the period March to June 2020 when the payments were introduced, equating to a drop from 323,000 people to 61,000 people Australia-wide who were experiencing poverty (Davidson et al., 2023). Furthermore, during this period (March to June 2020), the average poverty gap for JobSeeker recipients reduced from \$269 per week, to being \$49.10 per week above the Henderson poverty line (Davidson et al., 2023). Figure 12, produced by the Grattan Institute, demonstrates how suddenly JobSeeker payments were increased and decreased in relation to the Henderson poverty line and relative poverty line.

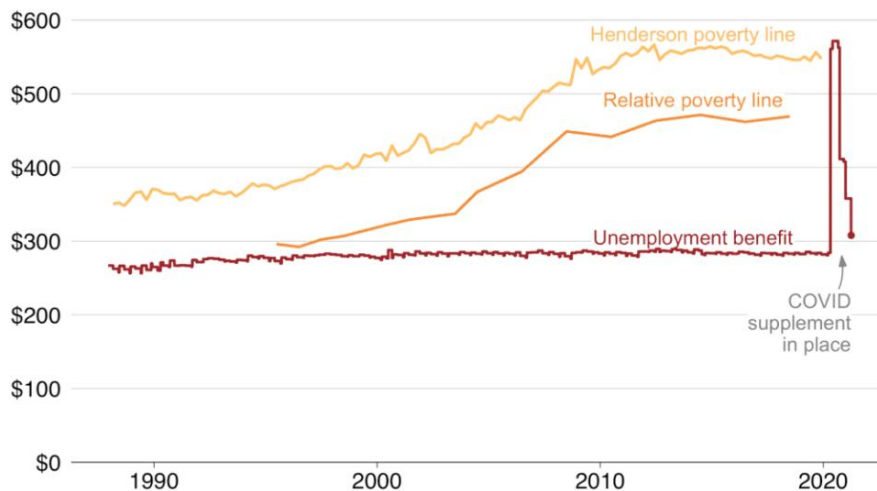
The CS and ES payments were only temporary, and the Morrison Liberal government progressively reduced the JobSeeker payment, until in April 2021 it was back to pre-pandemic levels (see Figure 1 on page 15). In April 2021, the Morrison Liberal government ceased the CS and ES payments, and then increased JobSeeker by \$25 per week. Since then, there have been subsequent increases to all social assistance payments, but still not enough to lift people out of poverty (Commonwealth of Australia, 2023b).

⁴⁹ The Henderson poverty line is the most widely used scale in Australia and stems from the Commission of Inquiry into Poverty in 1975 where Professor Henderson advocated for a reference or benchmark of poverty

An extra \$25 a week leaves the unemployment benefit a long way below the poverty line

GRATTAN
Institute

Poverty lines and unemployment benefits per week, inflation-adjusted 2020 dollars



Notes: Adjusted for inflation using the Consumer Price Index. Unemployment benefits have at various times been called unemployment benefit, Job Search Allowance, Newstart Allowance, and JobSeeker Payment. Unemployment benefit includes Energy Supplement where applicable.
Sources: Grattan analysis of Melbourne Institute 'Poverty Lines: Australia', ABS 6523.0, ABS 6401.0, ABS 5206.0, and DSS Social Security Guide.

Figure 12 – Demonstration of the impact the Coronavirus Supplement and Economic Support payments had on JobSeeker, the reduction of these payments, and the extra \$25 a week; in relation to the Henderson poverty line

Source: Coates & Cowgill (2021a) and the Grattan Institute

Apart from the CS and ES payments, there has not been a substantial and liveable increase to JobSeeker since 1994 (Booth & Pollard, 2020; Mendes, 2020; Morris & Wilson, 2014; Musolino et al., 2020). Furthermore, poverty and the relationship of JobSeeker to the Henderson poverty line is noteworthy because it is the only social assistance payment that is adjusted in line with the consumer price index, whereas the Disability Support Pension and Age Pension are all adjusted according to wage increases (Coates & Cowgill, 2021b). Additionally, Australia's JobSeeker payment is currently the second-lowest unemployment benefit in comparison to other OECD countries, equating to approximately 25% of the average Australian's wages (Coates & Cowgill, 2021b). By comparison, other countries such as Switzerland and The Netherlands support unemployed citizens with close to 75% of the average wage, an amount similar to the CS payment given by the previous Morrison Liberal government (Coates & Cowgill, 2021b). Furthermore, the Interim Economic Inclusion Advisory Committee report to the Australian Government (2023–2024) concluded that JobSeeker and other non-pension social assistance payments are “seriously inadequate” against existing benchmarks, and “people receiving these payments face the highest levels of financial stress in the Australian community” (Interim Economic Inclusion Advisory Committee, 2023, p. 15).

6.4.2 Universal basic income – an unconditional end to poverty and food insecurity

The idea of a government-provided basic income is not new. In the 1970s, and in addition to his work on establishing an Australian poverty line, Professor Ronald Henderson produced a report on poverty that proposed a “guaranteed minimum income scheme” (Büchs, 2021; Howe, 2018). In Australia, the COVID-19 CS and ES payments (Glossary) are possibly the best example of a basic income, that provided people with an unconditional and liveable income, effectively lifting them above the poverty line and providing them the opportunity to afford basic necessities such as food (Klein et al., 2022). Henderson believed that income support was a basic human right, and not a favour bestowed by the Australian Government (Howe, 2018).

Endo and Choi (2023) believe the implementation of a universal basic income would increase people’s autonomy and ability to participate in the economy without dependence on social assistance payments. Klein et al. (2022) also mention this autonomy, whereby the participants of their study identified that the COVID-19 economic payments freed up their time for more important activities such as further education. This finding aligns with the current study where participants were engaging in a time consuming, ritualistic and systematic approach to acquiring adequate food, effectively reducing their time for activities such as job hunting or updating their skills for future employment. One participant in the study by Klein et al. (2022) referred to this as “busywork ticking off boxes” and identified that this mutual obligation requirement had affected her ability to study. These barriers to work and study can affect physical and mental health, increasing an individual’s allostatic load, and “reducing [their] capacity to focus on anything other than survival” (Klein et al., 2022, p. 6).

6.5 Emergency food relief agencies inadvertently contributing to the re-traumatisation of food insecure adults

Research Question 4: How do food relief workers perceive emergency food distribution?

*Societies can choose to address the structural causes of poverty and commit to providing all of their members with a decent rights-affirming existence. Or they can **blame the poor for their own plight**, take steps to **further marginalise and stigmatize them**, and **make it ever more difficult** for them to enjoy their right to social security. Australia appears to be in the process of opting for the second of these alternatives.*

Philip Alston, the Special Rapporteur on extreme poverty and human rights (2017)

Food relief was originally implemented as an emergency response to immediate needs and a short-term solution for hunger (Wills, 2017); however, EFR agencies have become normalised and mainstream as a solution to poverty and hunger (Booth, 2014). This normalisation has led to foodbanks becoming a “long-term industry”, with Booth and Whelan (2014, p. 1396) suggesting their establishment as emergency food relief has become commonplace and normalised as an accepted way of dealing with food insecurity and poverty in Australia. Silvasti (2015, p. 478) states that because the EFR sector is now a business, food insecure individuals become “consumers” and the basic human right to food becomes one of monetary transactions, rules, and regulations before the receipt of food, and of profit-making rather than aiding those in desperate need. These “efficient systems ... overlook the costs in human dignity” creating a toxic relationship between the EFR agency and the food insecure adult (Lupton, 2011, p. 54). There have been suggestions that the direct and indirect organisations involved with food relief are more aligned with a charity economy, one which profits through the distribution and sale of surplus, overproduced and unwanted goods to the poor or needy (Kessl, Oechler, & Schroder, 2019). These organisations target food insecure and impoverished people who cannot purchase food and other material items through the usual channels, for example, a supermarket, therefore ensuring their own perpetuity without addressing the actual drivers of food insecurity and poverty (Kessl et al., 2019).

There is also the consideration of surplus food being diverted to EFR agencies. Currently in Australia, the focus is on diverting this food from landfill, coupled with the immediate need of feeding those who are hungry. However, the channelling of food waste and rejected product into

the EFR sector continually reinforces the belief that waste and surplus food is only fit for those who are the most impoverished in our community, contributing further to their stigmatisation, marginalisation and oppression (Styklunas, 2023). Furthermore, it does little to address the social issue of food insecurity through the provision of what has been termed “leftover food for leftover people” (Dowler, n.d., as cited in Caraher & Furey, 2018, p. 34). Supporting Dowler’s view, Andriessen and van der Velde (2023) state the idea of being given surplus food, food that would otherwise have been fed to animals or composted, impacts negatively on a food insecure adult’s dignity and self-worth. Additionally, recent research has discovered that 4% of donated food is either unsuitable (safe to eat but damaged, deteriorated or perished), potentially unsafe (foods that are close to becoming unsafe for consumption) or unsafe (food that is likely to cause significant harm to a person consuming it) (Mossenson et al., 2024). Although this is a low percentage, the authors estimate it equates to around 170,000kg of food donated annually, posing a risk to vulnerable clients (Mossenson et al., 2024), further contributing to the negative impacts of accessing food relief.

Likewise, food relief agencies do not foster the human right to food, which in turn contributes to humiliation, indignity and shame for those who access food relief (Andriessen & van der Velde, 2023; Caraher & Furey, 2017; McIntyre, Tougas, Rondeau, & Mah, 2015; Silvasti, 2015) as well as providing a platform for “unequal power relations” between the EFR agency and the client (Styklunas, 2023, p. 165). The increasing number of these businesslike, profit-driven organisations could also be viewed as a direct result of government policy failure in not addressing poverty and the resultant food insecurity (Booth & Whelan, 2014; McIntyre et al., 2015; Silvasti, 2015). Indeed, there is further evidence these agencies are not addressing the issue of poverty and food insecurity through their struggle to meet the ever-increasing demand for their services (Bourke, 2022; Caraher & Furey, 2017; Foodbank Australia, 2023; Miller & Li, 2022; Riches, 2018).

Martin (2021) states that because EFR agencies were conceived as ‘emergency food relief’, and a short-term solution and immediate response to a ‘crisis’, the provision of food relief tends to focus on the compassionate service being provided for ‘poor people’ (the perspectives of the service provider) rather than the perspectives of the user. This is clearly demonstrated by the annual *Foodbank Hunger Report*, which continually documents an increase in people accessing its services and how it is struggling to keep up with demand (Foodbank Australia, 2023). Food relief is measured by how much food is given out, which is “quick and easy to quantify and report”; however, this leads to a belief that the sector is successful in addressing food insecurity, whereas

the focus should be on the people who receive the food and whether their lives have improved, otherwise they are just perpetuating the social issue (Martin, 2021, p. 153). Focusing on the short-term provision of food, not the long-term social issue of poverty and food insecurity provides quick gains; however, this is contributing to the food relief clients' experience of shame, stigma and indignity of utilising food relief repeatedly (Martin, 2021). Robert Lupton in his book *Toxic Charity* also states that when we are focused on meeting a need (food insecurity), "we often ignore the basics: mutuality, reciprocity, accountability" (Lupton, 2011, p. 57) creating a toxic relationship that re-traumatises the food insecure adult even further.

Furthermore, Silvasti (2015, p. 478) states EFR agencies do not constitute "socially acceptable ways of acquiring food" as they contribute to humiliation and demotivation of people who are seeking a humanitarian response to their hunger and poverty. Similarly, Pineau, Williams, Brady, Waddington, and Frank (2021, p. 114) identify that stigma often leads to food insecure adults utilising "socially unacceptable" coping strategies to avoid relying on foodbanks, which has also been reported by others (Middleton, Mehta, McNaughton, & Booth, 2017; Purdam, Garratt, & Esmail, 2016; Rosa et al., 2018; Tarasuk et al., 2019) and in this current study. McIntyre et al. (2015, p. 856) go further to identify five "ins" (invisibility, invalidation of entitlements, inequality, institutionalization, and ineffectiveness) that could be considered barriers to food relief, thereby questioning whether EFR agencies are actually helping food insecure people or making the problem worse. This dominant response to food insecurity feeds into the neoliberal stance of pushing the responsibility of the 'problem' onto the individual and the community rather than addressing structural causes of food insecurity and poverty (Booth, 2014), creating 'neoliberal stigma'.

6.5.1 Neoliberal stigma

To understand the concept of neoliberal stigma (De Souza, 2019), neoliberalism should first be explained. The term was coined by von Mises and Hayek in 1938 as a response to the growing concerns that social democracy was linked to collectivism, Nazism and Communism (Monbiot, 2016). In Australia, neoliberalism became more prevalent in the 1980s, with an emphasis on individual independence and freedom, and a private market economy that reduced the role of government and the welfare state (Ife, 2016; Musolino et al., 2020; Watts & Hodgson, 2019). This reduction of the government's responsibility and welfare spending led to the rise of community-based services and charitable organisations to meet the increasing demand for services that were

no longer being provided by the government (Ife, 2016; Musolino et al., 2020). More specifically, neoliberalism has contributed to increased disadvantage and unfairness, through policy changes that remove or reduce social protection measures and safety nets that were designed to help people in times of need, and with robust economies valued more highly over social justice and human rights (Jamrozik, 2009; Morris & Wilson, 2014; Musolino et al., 2020; Watts & Hodgson, 2019). In turn, neoliberalism fosters inequality through the concentration of individual wealth, power and privilege; some people are advantaged by this, others are not (Baum, 2008; Musolino et al., 2020; Watts & Hodgson, 2019).

De Souza (2019, p. 21) states that neoliberal stigma is the “stigmatizing narratives” that surround food insecurity and poverty, and attributes blame to the individual for their circumstances. It forces food insecure and impoverished people into being classified as ‘deserving’ or ‘undeserving poor’ and subtly influences the responses of people working within the EFR agency (De Souza, 2019; Turkkan, 2021). Furthermore, because food insecure people tend to be unemployed, their value to society is judged, not because they are unemployed, but because they are not producing value in the marketplace or contributing to the economy (De Souza, 2019). Similarly, Andriessen and van der Velde (2023, Access to food aid section) suggest the process of determining need and the eligibility criteria in order to access food relief creates a “social hierarchy of ‘deservingness’, by reinforcing moral judgements, and by violating recipient’s integrity”. This finding was also documented by Turkkan (2021, p. 11), who found that the process of establishing a food insecure adult’s need for food relief identified those who were “deserving” and those who were “undeserving”. Moral judgements from the staff and volunteers in EFR agencies is also mentioned by McNaughton et al. (2021, p. 6) through their assessment of food relief clients as “deserving and undeserving poor”, further perpetuating the discourse and feeding into the neoliberal stigma of food relief.

6.5.2 Discourses, blame and learned helplessness

In addition to adverse and stressful childhood and adulthood events, and the continual stress from being food insecure and impoverished, there are discourses and narratives that surround food insecurity and poverty that continually impact the lived experience of food insecure adults. Interestingly, during the period of interviewing S1 participants, the current Labor Prime Minister, Anthony Albanese, in response to a question on budget reform, referred to those on social assistance payments as “a burden on the welfare system” (Albanese, 2022). This serves as an

example of the ways in which language can continue to marginalise, stigmatise and oppress people further, effectively keeping them ‘down the well without a ladder’. Bacchi (2009) states discursive language, when used in reference to a social issue, nullifies the options and effectiveness of social interventions. In this instance, the language used by the Prime Minister, and some media outlets, creates a division between those who are employed and those who are on social assistance payments, effectively stigmatising and oppressing them further (McKail, 2023). One study also highlights that the discursive language surrounding people on social assistance payments contributes to the stigma of being food insecure and impoverished (Zorbas et al., 2023).

The language used by some staff within the EFR agencies could be considered a form of structural violence as it constantly demeans the food insecure adult when seeking food, potentially leading to further stigmatisation and oppression, and feeding the narrative that they are unworthy. Structural violence occurs when policies and procedures legislated by governments suppress options and choices for people (Galtung, 1969, p. 168; Garver, 1970). It is also a form of social injustice because these ‘acts’ of violence are being committed by the system, government policies or procedures, rather than by an actual person, resulting in unequal power, life chances and resource distribution (Booth & Pollard, 2020; Farmer, 2004; Galtung, 1969; Johnson, Drew, & Auerswald, 2019). Structural violence is invisible and silent, and is fast becoming normalised within society (Booth & Pollard, 2020; Rylko-Bauer & Farmer, 2016). Furthermore, these acts of structural violence contribute to the traumatic experience of food insecurity, for both the food insecure adult and the staff and volunteers at the EFR agencies (Hecht et al., 2018). Although the EFR agencies have altruistic intentions, the demonstration of need required before being given second-hand food, is undignified and stigmatising, feeding into neoliberalism and structural violence by placing the responsibility for sourcing enough food onto the individual (Booth, 2014).

There is also the assumption that with an abundance of wealth and prosperity in Australia, everyone should have enough food to eat (Pollard et al., 2016). These notions often lead to judgements and stereotyping of individuals who are unable to afford food (McNaughton et al., 2021) as they are viewed as “no hopers” and people who “mismanage their money” or have “tastes beyond their means” (Economics Reference Committee, 2019, p. 2; Wahlqvist, 2011, p. 61). Such beliefs contribute to the lack of recognition of how prevalent poverty and food insecurity is in society (Wahlqvist, 2011), without addressing the structural inequities (Mendes, 2020), and further oppressing food insecure people. In addition, the Australian Government could be seen to be blaming the individual and punishing them for the extrinsic life events that led them

into poverty, causing them to be continually oppressed (Alston, 2018; Mendes, 2020). In addition, if the food insecure adult is not seen to be accepting of the food, the response is often that “beggars can’t be choosers” or similar phrases (Andriessen & van der Velde, 2023; McKay, McKenzie, & Lindberg, 2022; McNaughton et al., 2021, p. 7). This exchange between the staff and volunteers of the EFR agency and the food insecure adult can reinforce feelings of stigma and shame (Andriessen & van der Velde, 2023; Bruckner, Westbrook, Loberg, Teig, & Schaeffbauer, 2021; McKay et al., 2022; McNaughton et al., 2021; Pineau et al., 2021; Purdam et al., 2016).

In the current study, interviews with EFR agency staff and volunteers revealed that their discursive language and intrusive questioning of food insecure adults could also be contributing to the use of orthodox and unorthodox coping strategies. According to Koc (2013, p. 4), the discourses around food insecurity reflect the “conditions of food provisioning in modern society”, the price paid to receive food. Additionally, EFR agency staff and volunteers could be contributing to a food insecure adult’s learned helplessness through their demeaning interview process and demonstration of need requirements. Similarly, the unrealistic expectations their client will perform ‘budget’ and ‘financial counselling’ tasks in return for food relief, and from not acknowledging other coping strategies their clients utilise, indicates a need to consider the impact of this on food insecure adults and the re-traumatising effect it may have.

Confirming previous research, the majority of S1 participants spoke of experiencing judgement and stigmatisation from staff and volunteers at EFR agencies and how these experiences discouraged them from seeking food relief and forced them to seek food in other ways. Although these experiences have been previously documented by many authors, including Bruckner et al. (2021); Hill and Guittar (2022); McKay et al. (2022); McNaughton et al. (2021); Parsell and Clarke (2022); Purdam et al. (2016), the examination of S1 participant experiences demonstrates the ways in which people are continually oppressed over a sustained period and are ‘down the well without a ladder’.

In this study, S1 participants also expressed ‘self-talk’ and blame, which potentially reinforces the discourses surrounding food insecurity and poverty, creating a cycle of learned helplessness. Maier and Seligman (1976) explored the concept of learned helplessness through experiments on animals and humans. What they found was when people were faced with an inescapable, traumatic situation, they are not motivated to respond, rather they passively accept the situation, and this passivity is based on previous experiences of failure (Maier & Seligman, 1976). Learned

helplessness could be considered “passive acceptance of suffering” where no matter what the individual does, the situation will not improve, which leads to an inability to identify coping strategies (Barber, 1991, p. 33). Abramson and Seligman (1978) critiqued this hypothesis, stating it did not distinguish between which people were unable to cope with uncontrollable situations. Furthermore, Bandura (1977, p. 204) states the theory developed by Maier and Seligman (1976) focused solely on the “response-outcome expectations”, rather than a lack of self-efficacy being the cause of adverse outcomes. Bandura also recommends consideration of the two different sources of futility – efficacy-based and outcome-based – to identify whether there is a requirement for competency development (self-efficacy) or changes to the environment and structures enabling people to access them using the competencies they already possess (outcome-based). Additionally, Dixon and Frolova (2011, p. 1 & 12) explain that poverty, material deprivation, marginalisation, and disadvantage are “life-disempowering”, resulting in learned helplessness and a lack of “psychological capital”, which is the inability to develop self-efficacy and resilience. The authors link this lack of psychological capital and learned helplessness with long-term social assistance dependence which “intensifies [recipients’] sense of the futility and pointlessness of setting themselves any aspirations and goals, and the taking of any instrumental action toward them” (Dixon & Frolova, 2011, p. 12). Furthermore, this sense of futility may be reinforced through stereotyping, stigmatising, or even penalising an individual (Dixon & Frolova, 2011).

6.5.3 Do volunteers perpetuate the stigma and marginalisation?

There is a large reliance on volunteers in charitable and not-for-profit organisations, with more than half operating without any paid staff (Volunteering Australia, 2022). In 2020, over 5 million people were engaged in volunteering, and they were more likely to be women, aged between 40 and 54 years (ABS, 2020; Volunteering Australia, 2022). In South Australia, 26.2% of the population were volunteering in 2020 and this number was down slightly from 2019 (27.1%), possibly due to the COVID-19 restrictions (Volunteering Australia, 2022). Foodbank SA reported receiving over 100,000 volunteer hours in the 2021–22 financial year, provided to their warehouse operations, Food Hub, transport, events and fundraising, and office administration (Foodbank Australia, 2024). The most commonly cited reason for volunteering was to help others in the community and for personal satisfaction/to do something worthwhile (Volunteering Australia, 2022). Similarly, a Canadian study reports altruism as the most important personal motivation to volunteer, stating this finding was similar to other studies (Rondeau, Stricker, Kozachenko, & Parizeau, 2020).

Andriessen and van der Velde (2023) found the interactions between food insecure adults and the volunteers at EFR agencies contributed to stigma and the indignity of food relief, and this was through the social hierarchy that existed between them. The authors of this systematic review also report this social hierarchy was upheld through volunteers making food choices on behalf of the food insecure adult, removing any dignity, autonomy and self-identity (Andriessen & van der Velde, 2023). Parsell and Clarke (2022, p. 443) found that EFR agency volunteers believed their role as “one of thorough assessment” of the client’s needs before food relief could be provided, echoing a comment in this current study from one agency volunteer that “the [client’s] story has to resonate as one of need” (Brianna, S2, F, V, CBBC). Furthermore, Parsell and Clarke (2022) report that volunteers believed food relief clients were picky, not desperate enough and were trying to exploit the system, and this was based on the volunteer’s perception that food relief clients were lying to them about their circumstances.

Even EFR agencies suggesting their client attend a financial counsellor in exchange for food relief suggests their clients are mismanaging their money. In a study on charity and shame, Parsell and Clarke (2022, p. 443) report that a volunteer at an EFR agency suggested to other volunteers that if the client does not attend financial counselling, they are encouraged to say, “no budget training [signals with his hands waving goodbye]”, further contributing to the experience of shame and indignity. This response is similar to those reported in the current study where an EFR agency volunteer checked the client’s records to ascertain if they had completed the required financial counselling and other tasks in order to receive a fifth food relief visit⁵⁰. As the current study demonstrates, food insecure people are very capable with their money; however, there is little money left over from their social assistance payments to meet the basic needs of housing, health and food. This current study also demonstrates that a lack of food is not the issue, rather it is a lack of money, so the suggestion of seeking financial help is again blaming the individual for their situation and not providing any remedy to their poverty.

In response to the interview questions about orthodox and unorthodox food acquisition strategies of their clients, staff and volunteers in the EFR agencies were not inquiring into where and how food insecure adults sourced their food. Similarly, clients arguably did not feel comfortable divulging this information. Indeed, one S2 volunteer emphatically stated the EFR agency did not ask their clients for this information as it was perceived as “personal and private”. This is despite

⁵⁰ Most EFR agencies only provide between three to five visits for food relief PER YEAR.

their continual questioning of clients about their need for food relief and asking them to provide information on their social assistance payments and their outstanding bills, which also could be considered personal and private information. However, it was evident that some EFR agency volunteers were aware of food insecure adults 'shopping around' other agencies, yet they did not enquire about any other food acquisition strategies being utilised. In comparison, the paid staff at EFR agencies knew more about orthodox and unorthodox food acquisition practices, and this may be that more grant funding meant they had more time to spend with a food insecure client. The importance of spending more time with food insecure adults and listening to their stories cannot be emphasised enough. The Centre for Public Impact (2022, p. 11) identifies that listening helped build relationships, allowing the food insecure adult to confide in the EFR agency worker, and enabling them to be "heard and valued". Further research into why the food relief client refrains from sharing information about their orthodox and unorthodox food acquisition practices could reveal insights into the reasons behind this occurrence. Similarly, this information might highlight the EFR agency operating outside a trauma-informed care framework.

The larger agencies, such as Foodbank Australia, Anglicare Australia, Uniting Communities and the Salvation Army, are beneficiaries of large grants from the Australian Government, whereas the smaller, community and faith-based EFR agencies receive little to no money to run their EFR provision. For example, Uniting Communities had a revenue stream of over \$88 million for the financial year ending June 2022, with \$55.3 million of that income from government subsidies (Uniting Communities, 2022). This revenue increased substantially for the financial year ending 30 June 2023, up to \$105.8 million, with government subsidies of \$61.2 million (Uniting Communities, 2023). Similarly, government grants and donations totalling nearly \$7 million were given to Foodbank Australia in 2022 who in turn, received just over \$13 million from food purchases by food insecure people (Foodbank Australia, 2022). In stark contrast, the smaller EFR agency located within the CBBC received only \$3,800 in government grants in the financial year ending 2022, with donations and bequests from the church community making up the larger portion of their operating revenue (\$156,690) (Australian Charities and Not-for-profits Commission, 2022). It is possible the differences in funding might contribute to the reliance on volunteers and therefore a lack of time with a food insecure client, which also means the EFR agency is missing vital information on the orthodox and unorthodox food acquisition practices of food insecure adults. The lack of funding could also mean that volunteers are not adequately trained in trauma-informed care, potentially re-traumatising the client further.

6.6 Implications for practice, policy, and further research

This chapter has discussed and elaborated on the results of the data collection and analysis. Increasingly, the lack of trauma-informed care has been raised as potential challenges that food insecure adults continually face. This section provides a definition of trauma-informed care and why it is so important, discusses the utilisation of a trauma-informed care framework, and outlines potential recommendations for practice, policy and further research.

6.6.1 Definition of trauma-informed care and intersectionality

Trauma-informed care recognises the impact and intersectionality of food insecurity, poverty and structural violence on an individual (Bowen & Murshid, 2016). Trauma-informed care changes the narrative from blaming the individual, to acknowledging the extrinsic life events that have occurred and “understanding, recognizing, and responding to the effects of different types of traumas” (Brase et al., 2019, p. 11). Bowen and Murshid (2016) recommend six core principles be utilised when applying a trauma-informed framework as detailed in Table 8.

Table 8 - Bowen and Murshid’s six core principles of trauma-informed social policy

PRINCIPLE	DEFINITION
1. SAFETY	Ensure physical and emotional safety; prevent further trauma from occurring
2. TRUSTWORTHINESS AND TRANSPARENCY	Maintain transparency in policies and procedures, with the objective of building trust among stakeholders
3. COLLABORATION	View policy’s target population as active partners in policy development and implementation and as experts in their own lives
4. EMPOWERMENT	Share power with policy’s target population, giving them a strong voice in decision-making
5. CHOICE	Preserve meaningful choices for policy’s target population to maintain a sense of control
6. INTERSECTIONALITY	Focus on awareness of identity characteristics and the privileges or oppression these characteristics can incur

Source: Adapted by Hecht et al. (2018)

6.6.1.1 Intersectionality

Of specific importance is the sixth principle identified by Bowen and Murshid (2016).

Intersectionality was first used to understand racism and sexism faced by Black women in the US,

but is now being used in academic and policymaking contexts to describe the complexities of social issues such as food insecurity (Browne & Misra, 2003; Scottish Government, 2022). In the context of this thesis, intersectionality is understood as structural, societal and power inequities, where the “intersection” of several social categories creates the inequality (Scottish Government, 2022, p. 11). Similarly, Styklunas (2023) states that food insecurity does not occur in isolation or as an insular issue, it is a multifaceted social issue of poverty, power imbalances, stigmatisation, discrimination and oppression. Styklunas (2023) also states the problem with viewing food insecurity as a stand-alone social issue means the complex intersectionality of these multiple issues are harder to address. Similarly, Bacchi (2016) and Marmot and Allen (2014) believe this reductionist view does not acknowledge the complexity of the social issue, nor does it address the intersectionality and the impact of the social determinants of health that create the inequity in the first place. For example, in this study S1 participants were not only food insecure; they had experienced trauma in both their childhood and adulthood, they were impoverished, experienced multiple health concerns, as well as marginalisation, stigma and shame from being food insecure. Additionally, the majority of S1 participants had experienced difficulties accessing services such as Centrelink (Glossary) and EFR agencies for food relief, and this is due to the intersectional problems and structural inequities they experience (Scottish Government, 2022). As Cho, Williams Crenshaw, and McCall (2013) state, intersectionality is the power and inequality that influences individual disadvantage, and this current study demonstrates the inequality and power differences facing food insecure adults every day.

6.6.2 Recommendations for practice and social policy – implementing a trauma-informed care framework

The *Emergency Relief Handbook* produced by ACOSS (Glossary) documents a “client’s right” to respect, non-judgemental service provision, one that encourages self-reliance, and the inclusion of the client in the decision-making process as “best practice service standards” (ACOSS, 2011, p. 53). Although this handbook is dated, there is abundant literature supporting the need for a dignified service provision to clients (Andriessen & van der Velde, 2023; Booth et al., 2018; Crawford et al., 2014; Hill & Guittar, 2022). More recently the Australian Institute of Family Studies reiterated these principles with a focus on a trauma-informed, welcoming and non-judgemental service (Kleve & Gallegos, 2022). Similarly, research by Pettman et al. (2022) refer to the *Guiding Principles for the SA Food Relief Charter*, which acknowledges dignity, equity, collaboration, respect and client choice as paramount principles and a shared vision for the food relief sector.

Given the findings of the current study, it appears the EFR agencies are taking a 'business as usual' approach to food relief that is not supporting their food relief clients; rather it is re-traumatising them and creating an oppressive and continuous cycle they cannot escape. This current study identifies that food insecure adults are continually experiencing trauma when accessing EFR, through the constant demonstration of need, invasive questions, judgement from staff and volunteers, and a lack of dignity, autonomy and choice in the food they receive. This is in addition to the childhood and adulthood adverse events that have been identified, further contributing to their stress and allostatic load when seeking help. Taking a trauma-informed care approach ensures the individual is not being re-traumatised in the process of obtaining food and other assistance (Bowen & Murshid, 2016).

Recommendation 1: Service delivery changes to improve accessibility and universality – (a) removal of the demonstration of need, and (b) increase choice and autonomy for the client

It has been well documented in the literature that the demonstration of need, limited food options and poor food quality, and the limits on how many times a person can access food relief, are barriers continually facing food insecure adults (Booth, 2014; Booth, Pollard, Coveney, & Goodwin-Smith, 2018; Enns, Rizvi, Quinn, & Kristjansson, 2020; Kleve et al., 2023; Lindberg et al., 2015; Martin, 2021; McNaughton et al., 2021; Middleton et al., 2017; Pollard et al., 2018; Rizvi, Enns, Gergyek, & Kristjansson, 2022; Turkkan, 2021, 2023). To improve the accessibility and universality of food relief provision, existing models must be addressed to avoid re-traumatisation of people accessing services and to provide them with a dignified experience.

There are several examples of successful trauma-informed service delivery at the EFR agency/food relief charity level. The Center of United Methodist Aid to the Community Ecumenically Concerned with Helping Others (CUMAC/ECHO) in the US is one example where the focus is not on providing food relief but 'helping people heal' through acknowledging the traumas people have experienced (Food Bank News, 2024). CUMAC/ECHO was initially providing food relief for students who were coming to school hungry but recognised the social issue was far greater than food (CUMAC/ECHO, n.d.). The organisation has grown to provide accessible food relief that gives food insecure adults a choice, their dignity, and acknowledges that trauma is the root cause of hunger and injustice (CUMAC/ECHO, n.d.). Another US-based organisation is Leah's Pantry, which approaches food relief through the lens of trauma and resilience and also offers training programs on trauma-informed care for like-minded community organisations (Leah's Pantry, 2024). Bowen and

Murshid (2016) suggest that by being more trauma-informed and offering alternatives to the existing dominant EFR agency models, any barriers to food relief will be reduced.

Another option is to change the service delivery model to improve accessibility and provide universality by establishing an SSM (Glossary) of food provision – an operational model that allows anyone access, without needing an interview to determine need, and can be accessed as often as required. SSMs are a “blended food relief service model” which provides referral services and employment pathways (Pettman, Dent, Goodwin-Smith, & Bogomolova, 2022, p. 4) plus a supermarket where consumers can make their own food choices and pay with “conventional currency” (Wills, 2017, p. 64); they are non-profit, social enterprises that operate as a community hub with different services included in the location, for example a café or an opportunity shop⁵¹ (Pettman et al., 2022; Pettman et al., 2023; Stettin, Pirie, & McKendrick, 2022). SSMs have also been identified as a means to address food insecurity by increasing social capital, social networks, empowerment, and community engagement through community development (Stettin et al., 2022).

In Adelaide, South Australia a pilot study was conducted on the feasibility of implementing the SSM model into existing EFR agencies and reported the model presented “promising solutions” to food provision (Pettman et al., 2022, p. 6). Other positive effects noticed in this SSM pilot study was the change in language of the staff and volunteers, who transformed their conceptualisation from one of “food relief” or “handout” to an “inclusive capacity building opportunity, with the emphasis on a pathway out of food insecurity” (Pettman et al., 2022, p. 11). However, this study identifies several challenges moving from the dominant food relief model to an SSM; staffing, funding, resources and moving from the existing model were cited as challenging by the EFR agencies as well as a difference in values and principles between the two (Pettman et al., 2022). Wills (2017, p. 67) also reports similar findings, identifying barriers to the SSM include “resistance from powerful [supermarket] donors” who do not support a social enterprise selling their donated food to clients as that would “undermine” the brand’s identity and associate it with a lower available price. Food banks also had similar concerns as it would affect their relationships with the large food donors (Wills, 2017). The Food Centre⁵² has overcome this issue with donated food by

⁵¹ Opportunity shops, or op shops, are volunteer run places where people can buy pre-loved clothing, homewares, bric-a-brac and collectables at a low price

⁵² The Food Centre at Gepps Cross in metropolitan Adelaide is an example of a social supermarket;
<https://thefoodcentre.com.au/>

sourcing wholesale and surplus manufactured produce (Pettman et al., 2023). The advantages of this is a consistent supply of food that meets consumer needs and preferences (Pettman et al., 2023), plus it negates the “Good Samaritan”⁵³ legislation in Australia that prohibits the sale of donated food as part of the protection from liability (Parliament of South Australia, 1936; Wills, 2017).

If changing to an SSM is not achievable and the preference is to continue with the agency’s existing operational model of food relief, another option would be to have a ‘co-shopper’, someone who still assists the client when they are in the food pantry, but does not bag the food on their behalf and without their input (Martin, 2021). Co-shopping and helping the client select their own food provides dignity for the client as well as interaction and conversation (Martin, 2021). Specifically, Bowen and Murshid (2016) suggest this collaboration between food insecure clients and EFR agency volunteers and staff is essential to allow empowerment, providing clients with a voice in the decision-making process, and giving them meaningful choices and options.

Recommendation 2: Implement staff and volunteer training on trauma-informed care and practice to deepen understanding of the social determinants of health

This current study establishes that the interactions between a food relief client and staff and volunteers at EFR agencies contributes to stigmatisation, marginalisation, indignity and an overall traumatic experience. A pilot study by Powers, Langhinrichsen-Rohling, Sonu, Haynes, and Lathan (2023) found that trauma-informed care training was effective at increasing knowledge and helped implement staff behavioural change when interacting with clients who have experienced trauma; however, they identified that ongoing support would be required to maintain trauma-informed care. Additionally, training would help EFR agency staff and volunteers identify the differences between empathy and sympathy, something Martin (2021) suggests enables them to listen to the client’s stories, reinforcing they are not alone, and the EFR agency is there to help. Bowen and Murshid (2016) suggest that adequate training of staff and volunteers establishes a level of trust between them and the food relief client, providing the opportunity for disclosure of any activities without judgement.

⁵³ *The Civil Liability Act 1936*, Division 11A – Food donors and distributors;
<https://www.legislation.sa.gov.au/lz/path=/c/a/civil%20liability%20act%201936>

Recommendation 3: *Acknowledge the impacts of vicarious trauma on staff and volunteers and implement policies to support*

*The expectation that we can be **immersed in suffering and loss daily and not be touched** by it is as unrealistic as expecting to be able to walk through water without getting wet.*

Naomi Rachel Remen (2010)

The experiences of trauma are not one-way; there is also documented evidence that vicarious trauma affects frontline workers when engaging with people in need (Ashley-Binge & Cousins, 2019; Compassion Fatigue Australia, 2024; Office for Victims of Crime Training and Technical Assistance Center, 2024; Roberts, Darroch, Giles, & van Bruggen, 2022). The term ‘vicarious trauma’ first appeared in the 1990s and has been expanded to include workers’ feelings of compassion, responsibility, helplessness and lack of control (Ashley-Binge & Cousins, 2019) and “negative personal repercussions” (Pearlman & Caringi, 2009, p. 202) such as compassion fatigue and burnout (Office for Victims of Crime Training and Technical Assistance Center, 2024). Vicarious trauma has been identified as a risk for people working in communities with high rates of trauma (Roberts et al., 2022). Also referred to as “compassion fatigue”, vicarious trauma is the “inevitable effect of compassionate engagement with others in distress” (Ashley-Binge & Cousins, 2019, p. 193). Symptoms of vicarious trauma are similar to post-traumatic stress disorder and include psychological, emotional and physical symptoms such as dissociation and depersonalisation, social isolation, and loss of meaning and hope (Office for Victims of Crime Training and Technical Assistance Center, 2024; Pearlman & Caringi, 2009). Vicarious trauma has been identified as part of expressing empathy to a person who is or has experienced traumas in their life (Pearlman & Caringi, 2009). Kragt and Holtrop (2020) found that some volunteers were experiencing mental health issues when they were not able to access the necessary supports. The authors identified that volunteers may resort to utilising ineffective coping strategies; however, it was not identified what these were and what impacts this had on their interactions with food relief clients and the service provided (Kragt & Holtrop, 2020). Since S1 participants in this study have experienced adverse childhood and adulthood events, there may be far-reaching implications for not only themselves, but also the staff and volunteers at the EFR agencies who support them.

Some individual strategies to manage the effects of vicarious trauma include supportive colleagues, social networks and family support, adequate supervision, a team environment, training around vicarious trauma and self-care, such as maintaining good health and participating in exercise (Ashley-Binge & Cousins, 2019; Pearlman & Caringi, 2009). Organisation-based strategies include debriefing meetings, ensuring balance or variety in caseload, ongoing professional development and a positive workplace culture (Ashley-Binge & Cousins, 2019; Roberts et al., 2022). Pearlman and Caringi (2009) also recommend spirituality as an essential part of addressing vicarious trauma as it allows for community support and connection to self through faith and belief.

However, it is important to note that there is limited evidence around the efficacy of these strategies (Ashley-Binge & Cousins, 2019), therefore it is recommended that this information be shared with EFR agencies so they can implement their own organisational and individual approach. Supervision of volunteers and training in what vicarious trauma is and how to manage it effectively is also highly recommended (Ashley-Binge & Cousins, 2019). However, the reliance on volunteers in the EFR agency sector might preclude intensive training, therefore a focus on effective supervision is warranted.

Recommendation 4: Include the trauma-informed care framework in social policy

Further to training for EFR staff and volunteers, Bowen and Murshid (2016) state that trauma-informed care can also be adopted as social policy change to recognise the intersectionality and traumas experienced by food insecure and impoverished people. Trauma-informed care should start upstream with policy changes to address poverty and the social determinants of health (Bowen & Murshid, 2016). As this current study demonstrates, food insecurity is not a lack of food, rather it is a lack of money, and in the past, the Australian Government has been reluctant to implement permanent increases to social assistance payments, therefore addressing the root cause of food insecurity may not be achievable. Considering this, it is recommended that both EFR agencies and government institutions implement policies that aim to understand and acknowledge the systemic and structural levels that contribute to an individual's traumatic experiences.

Recommendation 5: Implement routine and ongoing measurement and monitoring of food insecurity in Australia

There has been no formal assessment of the levels of food insecurity in Australia since the ABS reported on its single-question survey in 2015 (ABS, 2015b). This single-question assessment has been deemed insufficient to capture the temporality, severity and occurrence of food insecurity, and it is recommended that surveys be conducted more thoroughly and more regularly. This recommendation is also supported by the recent Parliamentary Inquiry into food insecurity where it is suggested this occurs every three years using the validated HFSSM (Glossary) (Standing Committee on Agriculture, 2023).

6.6.3 Recommendations for further research

Several recommendations for further research arise from this thesis. First, research on a larger sample of food insecure adults and the agencies and organisations that support them is warranted as the sample sizes of this study were small. Second, the inclusion of the voices of diverse populations, for example a wider age range, culturally diverse and equal gender representation, would be beneficial as they were under-represented in this study. Third, an Australia-wide study that includes regional and remote communities accessing EFR might shed light on the different experiences in these locations. Fourth, conduct and evaluate a trial intervention on what models of EFR work best to reduce trauma and improve the overall health of food insecure people, and identify the most effective trauma-informed care training model for staff and volunteers. This research could be done with the involvement and formal partnerships between academics, public health researchers, psychologists, trauma-informed specialists, nursing researchers, healthcare practitioners, the charitable food system (both large and small organisations) and policymakers. Additionally, further research is needed to document the underlying issues, not just poverty and food insecurity, to uncover the intersectionality of a food insecure adult's life. As this study shows, food insecurity is not only a lack of food, it is also poverty and other traumas in a person's life that creates this cycle of adversity and oppression they cannot escape.

This study has established that food relief clients do not willingly share their orthodox and unorthodox food acquisition practices with EFR agency staff and volunteers. Further research into their orthodox and unorthodox food acquisition practices and why they refrain from sharing this information could reveal insights into the reasons behind this occurrence. Similarly, this information might highlight the EFR agency operating outside a trauma-informed care framework.

This study has also found that food insecure adults rely on their social networks quite heavily to manage their food insecurity and poverty. Further research on this phenomenon is warranted to understand the impact of having/not having a social network to draw from when experiencing poverty and food insecurity. Finally, the differences between the use of unorthodox food acquisition practices such as shoplifting and dumpster diving, and the types of social assistance payments participants were receiving was also noteworthy; however, a correlation could not be made in this study, therefore it provides a potential area of further research.

6.7 Strengths and limitations of the study

There are several strengths to this thesis. This study is the first of its kind to examine the underpinning drivers of orthodox and unorthodox food acquisition practices and to identify the adverse childhood and adulthood events that lead to food insecurity, poverty, and the use of these practices. The identification of these events that altered the life course and trajectory of participants, and the need to access EFR, also uncovered food insecure adults are being re-traumatised by the narratives and discourses surrounding food insecurity and poverty, as well as having to meet the strict eligibility criteria to receive second-hand food. It has also identified an under-researched area of adverse life events and poverty and will enable further research on larger populations and across multiple EFR agencies to be conducted. This study has provided a unique and original contribution to research that paints a complex picture of intersectionality, adversity and trauma experienced by food insecure and impoverished adults.

Second, this study captured the events of COVID-19, the CS and ES payments (Glossary) and other cost-of-living increases, effectively documenting the food insecure adults' journey through these increases and decreases in payments, demonstrating how impoverishment and oppression affected them. Third, CGT guided the data collection and analysis and therefore did not influence theory development. Theory development occurred as part of the data collection and analysis stage, and also during writing the results and discussion. This contributes to a robust and well-developed theory to explain the lived experience of food insecurity and the resulting adversity, oppression and the strategies used to cope. The prolonged immersion of the researcher in the field contributes to the credibility of the study's results. Another strength to this study was the ability for the interview script to remain responsive to the changing economic climate in Australia and Adelaide. Finally, this study has highlighted an insight into the workings of social policy, clearly

demonstrating that food insecurity is not about food, rather it is the inadequacies of social assistance policy and the payments provided.

There were also several limitations to this study. The EFR agency gatekeeper role may have subtly influenced the study population, therefore the sample is not necessarily representative of the entire food insecure and impoverished population in Adelaide, South Australia. Recruitment of food insecure adults through the EFR agencies influenced the results of one outcome of orthodox and unorthodox food acquisition practices as all participants had experiences with the agencies. However, this also resulted in confirmation of previous research on the clients' perceptions and use of EFR agencies and foodbanks. Participant recruitment via Facebook community groups was limited by the researcher's own engagement with these groups, therefore potentially restricting participation from other community groups of food insecure and impoverished people. Similarly, most participants were women, therefore the voices of men were not emphasised to the same degree, making the sample unrepresentative of the lived experience of all food insecure adults.

6.8 Chapter summary

The chapter discussed the results of the data analysis, comparing the findings to existing literature, and reported how adverse childhood and adulthood adverse events tipped adults into food insecurity, necessitating the use of orthodox and unorthodox food acquisition practices and other coping strategies. The orthodox and unorthodox food acquisition practices of this study's participants was discussed, highlighting some potential drawbacks but also the benefits of these practices. The impact of the COVID-19 CS and ES payments and withdrawal were also discussed and a summary of previous requests to government to 'raise the rate' was included to provide context. The consequences of discourses and the narratives that surround food insecurity and poverty were also discussed and linked with EFR agency practices. Food relief as a business and the impact neoliberalism has on society was linked to the oppression of food insecure people. Finally, this chapter concluded with a summary of the implications for practice, social policy, and further research, and the strengths and limitations of the study. The next and final chapter provides some concluding statements.

CHAPTER 7: CONCLUSION

This study aimed to identify and understand the set of circumstances, or tipping points, into food insecurity, and ultimately into utilising orthodox and unorthodox food acquisition practices to cope. The scoping review identified a lack of literature on the tipping points into these food acquisition practices; however, data collection and analysis of S1 participant interviews uncovered adverse childhood and adulthood events that could be considered precursors to becoming food insecure and impoverished. These extrinsic life events created an environment of toxic stress, or an altered stress response, leading to physical and mental health issues, disrupting participants' ability to cope by increasing their allostatic stress load. The impact of this stress created deficits in the individual that followed them into adulthood and created a cycle of learned helplessness. The exploration of these extrinsic events, identification of adversity and oppression continually being experienced by food insecure adults, and the resulting orthodox and unorthodox food acquisition practices, provides an original contribution to the existing knowledge on food insecurity.

The results of the data collection were presented as three main themes, with sub-themes, which mapped to the four research objectives. Discussion of these themes, along with the presentation of existing literature on adverse childhood and adulthood events, the use of orthodox and unorthodox food acquisition practices, COVID-19 financial payments, and the impact of staff and volunteers in the EFR agencies was also presented and elaborated on using existing academic literature. Interviews with S1 and S2 participants revealed both orthodox and unorthodox food acquisition practices were being used to mitigate the effects of food insecurity and poverty. Some strategies posed risks to the individual, through poor nutrition and the resulting chronic diseases from consuming a diet high in UPFs. Some financial coping strategies adopted also exposed food insecure adults to short and long-term risks. For example, the unregulated BNPL (Glossary) services were regularly used by participants, which increased their financial dependence on the service, potentially placing them in further financial difficulties through missed payment fees and high interest rates. Other food acquisition practices that posed risks to the individual included shoplifting and the less-common practice of dumpster diving. There is a scarcity of literature on food insecure people utilising these unorthodox coping strategies, providing a need for further research on why and how often they are engaging in risky and illegal practices. Participants were also utilising their own social networks as sources of food, money to buy food, or information about where to source assistance. There was also reciprocity, with participants sharing their own

food and knowledge with others in a similar position, demonstrating the generosity of participants/food insecure adults, even when they were experiencing their own difficulties.

The significance of this study's findings is novel, with the events of COVID-19 providing a unique research opportunity to identify the impact on impoverished people when they were given a significant increase to their social assistance payments. The prolonged immersion in the field provided an opportunity to accurately capture Australia's changing economic climate, both through the COVID-19 pandemic and the resulting cost-of-living crisis. This study has identified that food insecurity is not a lack of food, rather it is driven by poverty, adversity, and the resulting discourses, blame and learned helplessness that keep someone food insecure. The Australian Government had been reluctant to provide an increase to social assistance payments, until the COVID-19 pandemic, suggesting it has the ability, just not the inclination, to lift people out of poverty permanently.

Additionally, the interviews with EFR staff and volunteers revealed a troubling aspect to emergency food provision – it is a normalised and a mainstream solution to hunger that is no longer serving its purpose effectively enough. The neoliberal stigma driving discursive language and blame contribute to the stigmatisation, marginalisation and oppression of food insecure adults seeking help. The process of seeking food relief has been identified as re-traumatising food insecure adults, creating an oppressive and continual cycle they cannot escape. Recommendations for practice changes have been identified that are inclusive, universal and acknowledge the trauma experienced, all of which facilitate healing instead of re-traumatising when receiving the basic human right of food. Changing the service delivery model to one of inclusion and universality will provide dignity, autonomy and choice for food insecure and impoverished people.

There were also social policy recommendations and recommendations for further research. First, regular measurement of food security using the validated USDA 18-item HFSSM might shed light on how prevalent this social issue has become. Further, Australia-wide research that involves a larger sample of food insecure adults and more EFR agencies was suggested, along with the inclusion of the voices of more diverse populations. Additionally, further research is needed to uncover the intersectionality of a food insecure adult's life. For example, the use of social networks was reported, and further research on this phenomenon is warranted to understand the impact of having/not having a social network to draw from when experiencing poverty and food insecurity. The differences between the use of unorthodox food acquisition practices such as

shoplifting and dumpster diving, and the types of social assistance payments participants were receiving was also noteworthy and a potential area for further research.

Finally, this study has provided an original contribution to knowledge by clearly identifying that food insecurity is not a singular social issue, it is a complex picture of intersectionality, adversity and trauma being experienced by food insecure and impoverished adults who are being re-traumatised in the process of seeking EFR. Similarly, this study has uncovered the inadequacies of social policy to address this social issue. In particular, their experiences of trauma and being re-traumatised is creating a cycle of adversity and oppression that food insecure adults cannot escape.

APPENDICES

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Appendix 1. The orthodox and unorthodox food acquisition practices and coping strategies used by food insecure adults: A scoping review (published in the *Journal of Hunger & Environmental Nutrition* January 2022)

Available online: <https://www.tandfonline.com/doi/full/10.1080/19320248.2021.2021121>

Appendix 2. Participant Pack (presented to EFR agencies for recruitment)

ARE YOU ON A LOW INCOME? DO YOU GO TO A FOOD RELIEF ORGANISATION OR CHURCH LIKE THIS ONE FOR FOOD?

We are looking for volunteers to take part in a study of other food sources and coping strategies used by people who also access emergency food relief.

As a participant of this study, you will be asked to attend an audio-recorded interview.

In appreciation of your time, you will receive either a \$20 Foodbank voucher or a \$20 Coles card.

To learn more or to participate in this study, please contact:

Principal Researcher: Michelle Watson

Email: michelle.watson@flinders.edu.au

Ph: 0412 370676

This study is supervised by: Professor John Coveney, Dr Sue Booth and Dr Stefania Velardo

This study has been approved by the Social and Behavioural Research Ethics Committee at Flinders University (project number 8641)

CRICOS No. 00119A

flinders.edu.au

LETTER OF INTRODUCTION
(for staff and clients of emergency food relief organisations)

Dear Sir/Madam

This letter is to introduce Michelle Watson who is a PhD student in The College of Nursing and Health Sciences at Flinders University. She will produce her student card, which carries a photograph, as proof of identity. She is undertaking research leading to the production of a thesis or other publications on the topic of unorthodox food acquisition practices of food insecure adults accessing emergency food relief in metropolitan Adelaide.

Michelle would like to invite you to assist with this project by agreeing to be involved in an interview which covers certain aspects of this topic. No more than about one hour on one occasion would be required.

Be assured that any information provided will be treated in the strictest confidence and none of the participants will be individually identifiable in the resulting thesis, report or other publications. However, due to the interview being conducted at an agency, your anonymity cannot be guaranteed. You are, of course, entirely free to discontinue your participation at any time or to decline to answer particular questions.

Since Michelle intends to make a tape recording of the interview, she will seek your consent, on the attached form, to record the interview, to use the recording or a transcription in preparing her thesis, report or other publications, on condition that your name or identity is not revealed, and to make the recording available to other researchers on the same conditions (or that the recording will not be made available to any other person).

It may be necessary to make the recording available to secretarial assistants (or a transcription service) for transcription, in which case you may be assured that such persons will be required to sign a confidentiality agreement which outlines the requirement that your name or identity not be revealed and that the confidentiality of the material is respected and maintained.

Any enquiries you may have concerning this project should be directed to me at the address given above or by telephone on (08) 7221 8419 or e-mail john.coveney@flinders.edu.au.

Thank you for your attention and assistance.

Yours sincerely

John Coveney
Professor
Health Sciences
College of Nursing and Health Sciences

This research project has been approved by the Flinders University Social and Behavioural Research Ethics Committee in South Australia (Project number 8641). For queries regarding the ethics approval of this project please contact the Executive Officer of the Committee via telephone on +61 8 8201 3116 or email human.researchethics@flinders.edu.au

INFORMATION SHEET

(for one-on-one interview with adults accessing emergency food relief)

Title: *'The unorthodox food acquisition practices of food insecure adults accessing emergency food relief in metropolitan Adelaide, South Australia'*

Researcher

Mrs Michelle Watson
College of Nursing & Health Sciences
Flinders University
Tel: 0412 370676

Supervisor(s)

Professor John Coveney
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Flinders University
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Dr Sue Booth
College of Medicine & Public Health
Flinders University
Tel: (08) 7221 8464

Dr Stefania Velardo
College of Education, Psychology & Social Work
Flinders University
Tel: (08) 7221 5737

Description of the study

This study is part of the project titled *'The unorthodox food acquisition practices of food insecure adults accessing emergency food relief in metropolitan Adelaide, South Australia'*. This project will investigate other sources of food that people who access food relief services also utilise. This project is supported by Flinders University, College of Nursing and Health Sciences.

Purpose of the study

This project aims to find out the set of circumstances that trigger food insecure adults to source food in an unorthodox manner; the experiences of people who access food in this way; and the perspectives of emergency food relief staff on the use of these unorthodox food acquisition practices.

What will I be asked to do?

You are invited to attend a one-on-one interview with a researcher who will ask you a few questions regarding your food sourcing practices, eg. where else you go to get food and other coping strategies you use to make sure you have enough food for yourself and your family. Participation is entirely voluntary. The interview will take no more than one hour. The interview will be audio recorded using a digital voice recorder to help with reviewing the results. Once recorded, the interview will be transcribed (typed-up) and stored as a computer file.

inspiring
achievement

What benefit will I gain from being involved in this study?

The sharing of your experiences will allow us to understand what other food sources food insecure adults access, how often, and why.

Will I be identifiable by being involved in this study?

We do not need your name, any identifying information will be removed, and your comments will not be linked directly to you. All information and results obtained in this study will be stored in a secure way, with access restricted to relevant researchers. However, the interviews are being held in a public location (at an emergency food relief agency) so your involvement in this research may not be anonymous.

Are there any risks or discomforts if I am involved?

The researcher anticipates few risks from your involvement in this study, however, given the nature of the project, some participants could experience emotional discomfort. If any emotional discomfort is experienced, please contact Lifeline on 13 1114 for support / counselling that may be accessed free of charge. If you have any concerns regarding anticipated or actual risks or discomforts, please raise them with the researcher.

Even though information provided will be treated with the strictest confidence, disclosure of illegal activities will not be safe from legal search and seizure and may need to be reported to authorities.

How do I agree to participate?

Participation is voluntary. You may answer 'no comment' or refuse to answer any questions, and you are free to withdraw from the interview at any time without consequences. A consent form accompanies this information sheet. If you agree to participate, please read and sign the consent form and return it back to Michelle Watson at the time of your interview.

Recognition of Contribution / Time / Travel costs

If you would like to participate, in recognition of your contribution and participation time, you will be provided with a \$20 Foodbank Community Food Hub voucher.

How will I receive feedback?

On project completion, outcomes of the project will be provided as a poster/infographic which will be placed on the noticeboard at the food relief agencies involved.

Thank you for taking the time to read this information sheet, and we hope that you will accept our invitation to be involved.

This research project has been approved by the Flinders University Social and Behavioural Research Ethics Committee in South Australia (Project number 8641). For queries regarding the ethics approval of this project please contact the Executive Officer of the Committee via telephone on +61 8 8201 3116 or email human.researchethics@flinders.edu.au



CONSENT FORM FOR PARTICIPATION IN RESEARCH
(Interview)

**Unorthodox food acquisition practices of food insecure
adults in metropolitan Adelaide, South Australia**

I
being over the age of 18 years hereby consent to participate as requested in the
audio-recorded interview for the research project with the title listed above.

1. I have read the information provided.
2. Details of procedures and any risks have been explained to my satisfaction.
3. I agree to audio recording of my information and participation.
4. I am aware that I should retain a copy of the Information Sheet and Consent Form for future reference.
5. I understand that:
 - I may not directly benefit from taking part in this research.
 - Participation is entirely voluntary, and I am free to withdraw from the project at any time; and can decline to answer particular questions.
 - While the information gained in this study will be published as explained, my participation will be confidential.
 - Due to the nature of participating in an interview at an agency, my anonymity cannot be guaranteed.
 - Whether I participate or not, or withdraw after participating, will have no effect on any current or future service being provided to me.
 - I may ask that the audio-recording be stopped at any time, and that I may withdraw at any time from the session or the research without disadvantage.
 - Even though information provided will be treated with the strictest confidence, disclosure of illegal activities will not be safe from legal search and seizure and may need to be reported to authorities.

6. I understand that only the researchers on this project will have access to my research data and raw results; unless I explicitly provide consent for it to be shared with other parties. If the need to seek consent to share your research data with other parties does arise, I will be contacted by the researchers via email.
7. I have had the opportunity to discuss taking part in this research with a family member or friend.

Participant's name.....

Participant's signature.....Date.....

I certify that I have explained the study to the volunteer and consider that she/he understands what is involved and freely consents to participation.

Researcher's name: Michelle Watson

Researcher's signature..... Date.....

NB: Two signed copies should be obtained (one for researcher; one for participant).

This research project has been approved by the Flinders University Social and Behavioural Research Ethics Committee in South Australia (Project number 8641). For queries regarding the ethics approval of this project please contact the Executive Officer of the Committee via telephone on +61 8 8201 3116 or email human.researchethics@flinders.edu.au

Appendix 3. Recruitment of staff at EFR agencies



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LETTER OF INTRODUCTION (for staff and clients of emergency food relief organisations)

Dear Sir/Madam

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Michelle would like to invite you to assist with this project by agreeing to be involved in an interview which covers certain aspects of this topic. No more than about one hour on one occasion would be required.

Be assured that any information provided will be treated in the strictest confidence and none of the participants will be individually identifiable in the resulting thesis, report or other publications. However, due to the interview being conducted in a public location, your anonymity cannot be guaranteed. You are, of course, entirely free to discontinue your participation at any time or to decline to answer particular questions.

Since Michelle intends to make a tape recording of the interview, she will seek your consent, on the attached form, to record the interview, to use the recording or a transcription in preparing her thesis, report or other publications, on condition that your name or identity is not revealed, and to make the recording available to other researchers on the same conditions (or that the recording will not be made available to any other person).

It may be necessary to make the recording available to secretarial assistants (or a transcription service) for transcription, in which case you may be assured that such persons will be required to sign a confidentiality agreement which outlines the requirement that your name or identity not be revealed and that the confidentiality of the material is respected and maintained.

Any enquiries you may have concerning this project should be directed to me at the address given above or by telephone on (08) 7221 8419 or e-mail john.coveney@flinders.edu.au.

Thank you for your attention and assistance.

Yours sincerely

John Coveney
Professor
Health Sciences
College of Nursing and Health Sciences

This research project has been approved by the Flinders University Social and Behavioural Research Ethics Committee in South Australia (Project number 8641). For queries regarding the ethics approval of this project please contact the Executive Officer of the Committee via telephone on +61 8 8201 3116 or email human.researchethics@flinders.edu.au

INFORMATION SHEET

(for one-on-one interview with staff at emergency food relief organisations)

Title: 'The unorthodox food acquisition practices of food insecure adults accessing emergency food relief in metropolitan Adelaide, South Australia'

Researcher

Mrs Michelle Watson
College of Nursing & Health Sciences
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Supervisor(s)

Professor John Coveney
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Flinders University
Tel: (08) 7221 8419

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College of Education, Psychology & Social Work
Flinders University
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Description of the study

This study is part of the project titled '*The unorthodox food acquisition practices of food insecure adults accessing emergency food relief in metropolitan Adelaide, South Australia*'. This project will investigate other sources of food that people who access food relief services also utilise. This project is supported by Flinders University, College of Nursing and Health Sciences.

Purpose of the study

This project aims to understand the set of circumstances that trigger food insecure adults to source food in an unorthodox manner; the experiences of people who access food in this way; and the perspectives of emergency food relief staff on the use of these unorthodox food acquisition practices.

What will I be asked to do?

You are invited to attend a one-on-one interview with a researcher who will ask you a few questions regarding your views about where clients of emergency food relief organisations source food. Participation is entirely voluntary. The interview will take no more than one hour. The interview will be audio recorded using a digital voice recorder to help with reviewing the results. Once recorded, the interview will be transcribed (typed-up) and stored as a computer file.

inspiring
achievement

What benefit will I gain from being involved in this study?

The sharing of your experiences will allow us to gain your perspectives on unorthodox food acquisition practices emergency food relief clients are using.

Will I be identifiable by being involved in this study?

We do not need your name, any identifying information will be removed, and your comments will not be linked directly to you. All information and results obtained in this study will be stored in a secure way, with access restricted to relevant researchers. However, the interviews are being held in a public location so your involvement in this research may not be anonymous.

Are there any risks or discomforts if I am involved?

The researcher anticipates few risks from your involvement in this study, however, given the nature of the project, some participants could experience emotional discomfort. If any emotional discomfort is experienced, please contact Lifeline on 13 11 14 for support / counselling that may be accessed free of charge by all participants. If you have any concerns regarding anticipated or actual risks or discomforts, please raise them with the researcher.

Even though information provided will be treated with the strictest confidence, disclosure of illegal activities will not be safe from legal search and seizure and may need to be reported to authorities.

How do I agree to participate?

Participation is voluntary. You may answer 'no comment' or refuse to answer any questions, and you are free to withdraw from the interview at any time without effect or consequences. A consent form accompanies this information sheet. If you agree to participate, please read and sign the form and return it back to Michelle Watson at the time of your interview.

How will I receive feedback?

On project completion, outcomes of the project will be provided as a poster/infographic which will be placed on the noticeboard at the food relief agencies involved.

Thank you for taking the time to read this information sheet, and we hope that you will accept our invitation to be involved.

This research project has been approved by the Flinders University Social and Behavioural Research Ethics Committee in South Australia (Project number 8641). For queries regarding the [ethics approval](#) of this project please contact the Executive Officer of the Committee via telephone on +61 8 8201 3116 or email human.researchethics@flinders.edu.au



CONSENT FORM FOR PARTICIPATION IN RESEARCH

(Interview)

Unorthodox food acquisition practices of food insecure adults in metropolitan Adelaide, South Australia

I
being over the age of 18 years hereby consent to participate as requested in the audio-recorded interview for the research project with the title listed above.

1. I have read the information provided.
2. Details of procedures and any risks have been explained to my satisfaction.
3. I agree to audio recording of my information and participation.
4. I am aware that I should retain a copy of the Information Sheet and Consent Form for future reference.
5. I understand that:
 - I may not directly benefit from taking part in this research.
 - Participation is entirely voluntary, and I am free to withdraw from the project at any time; and can decline to answer particular questions.
 - While the information gained in this study will be published as explained, my participation will be confidential.
 - Due to the nature of participating in an interview in a public location, my anonymity cannot be guaranteed.
 - I may ask that the audio-recording be stopped at any time, and that I may withdraw at any time from the session or the research without disadvantage.
 - Even though information provided will be treated with the strictest confidence, disclosure of illegal activities will not be safe from legal search and seizure and may need to be reported to authorities.

6. I understand that only the researchers on this project will have access to my research data and raw results; unless I explicitly provide consent for it to be shared with other parties. If the need to seek consent to share your research data with other parties does arise, I will be contacted by the researchers via email.
7. I have had the opportunity to discuss taking part in this research with a family member or friend.

Participant's name.....

Participant's signature.....Date.....

I certify that I have explained the study to the volunteer and consider that she/he understands what is involved and freely consents to participation.

Researcher's name: Michelle Watson

Researcher's signature..... Date.....

NB: Two signed copies should be obtained (one for researcher; one for participant).

This research project has been approved by the Flinders University Social and Behavioural Research Ethics Committee in South Australia (Project number 8641). For queries regarding the ethics approval of this project please contact the Executive Officer of the Committee via telephone on +61 8 8201 3116 or email human.researchethics@flinders.edu.au

Appendix 4. Survey Instrument [6-item US Household Food Security Survey Module] and demographics survey

What is your age?

What suburb do you live in?

Do you live alone or with someone?

What level of schooling have you completed? (please circle) Primary / High school / TAFE / University

Are you currently employed? YES / NO

Do you receive any Government payments? If so, which one?

.....

These questions will help me understand the level of food insecurity you're experiencing. There is no right or wrong answer, and you don't have to answer a question if you don't want to.

Below are some statements that people have made about their food situation:

"The food that I bought just didn't last, and I didn't have money to get more."

In the last 12 months, was that often, sometimes, or never true for you?

- ☐ Often true
- ☐ Sometimes true
- ☐ Never true
- ☐ Don't know

"I couldn't afford to eat balanced meals."

In the last 12 months, was that often, sometimes, or never true for you?

- ☐ Often true
- ☐ Sometimes true
- ☐ Never true
- ☐ Don't know

1. In the last 12 months, did you ever cut the size of your meals or skip meals because there wasn't enough money for food?

- ☐ Yes
- ☐ No (Skip and go to Question 2)
- ☐ Don't know (Skip and go to Question 2)

1a. How often did this happen?

- ☐ Almost every month
- ☐ Some months but not every month
- ☐ Only in the past 1 or 2 months
- ☐ Don't know

2. In the last 12 months, did you ever eat less than you felt you should because there wasn't enough money for food?

- ☐ Yes
- ☐ No
- ☐ Don't know

3. In the last 12 months, were you ever hungry but didn't eat because there wasn't enough money for food?

- ☐ Yes
- ☐ No
- ☐ Don't know

Appendix 5. Interview guide for Sample 1 (showing modifications made to the guide during data collection)

Interview questions used for pilot sample (February 2021)

Food Insecure Adults – Participant Sample 1

1. Can you tell me why you chose to come to [insert emergency food relief organisation's name here] for food?
 - a. Can you tell me what were the circumstances that led you here to get food assistance?
 - b. How did you find out about food assistance being available here?
 - c. What was the *process* you had to go through in order to get food assistance?
 - d. How long have you been coming here?
 - e. How often do you come here?
 - f. What does it mean to you to be able to get food from here?
 - g. How has COVID-19 impacted on your ability to access food generally (and in terms of emergency relief?
2. Thinking about the times you've received food from [insert organisation's name here], what have you done when you can't get food from here?
Prompt:
 - Where else might you go to get food?
 - Are there other sources of getting food that you have used? (borrowed, gone to extended family/friends/neighbours, pinched food from supermarket, servo or other retail outlet, church, taken food out of a bin or skip,
3. Some people describe using food assistance service as undignified and very confronting. There have been examples where people decide not to use food relief agencies but to seek food in other ways. Can you tell me of any times where you or someone you know have sourced food from a place that may have been illegal, risky or physically dangerous, or?
Follow-up questions:
 - a. What were the circumstances that led you/your friend to consider using this source?
 - b. Can you walk me through step by step of the process of how you got the food?
Prompt:
Did you go alone or with a group of other people?
What time of day/night did you go?
What happened next?
How did you get the food home?
 - a. How often do you / your friend use [insert food source here]?
 - b. How did you/ your friend etc find out about [insert food source here]?
 - c. What does it mean to you to be able to get food from [insert food source here]?
4. Thinking back to a time when you've needed food, what happened within the household or to you personally that made you decide to access [insert food source/s mentioned above here] for food?

Interview questions modified from pilot sample (highlighted areas show modifications made between this interview guide and the subsequent guide, to capture changes in economic landscape in Australia)

INTERVIEW QUESTIONS – FOOD INSECURE ADULTS

PREAMBLE

Thank you for taking time today to chat with me about your experiences. The aim of my study is to understand the strategies you use to get food and the circumstances in your life that led to the use of these strategies. I'm also very interested in where you go for food when you can't or don't want to go to a charity or agency. Talking to people such as yourself will provide valuable insight into the food relief sector and how people manage food insecurity.

Everything you say to me is **confidential** and there are **no right or wrong answers**. Please **answer as honestly** as you can and if there are any questions that you'd prefer not to answer, please let me know and I can move on. Similarly, if you don't want to continue with the interview, please let me know.

I thought I'd start the interview with a little bit about myself – I became interested in food insecurity at uni and from volunteering with OzHarvest; I also volunteer with the OFSC and have done research on school breakfast programs in SA. I couldn't believe in Australia there were people who struggled to afford food and that's why I'm here now interviewing people like yourself so I can gain your perspectives. I'm keen to find out what has happened in your life that led you to using these different strategies to source food. So, that's enough about me

ABOUT THEMSELVES AND POTENTIAL CIRCUMSTANCES

1. Can you tell me what happened in your life that led you to using food relief agencies?

USING FOOD ASSISTANCE AGENCIES

These next questions are to determine your use of food relief agencies, the process you go through to get food, and what they give you.

2. Have you ever gone to an agency to get food? For example, an agency can be a Foodbank, the Salvos, a church?

a. IF NO:

- i. Are there any particular reasons you don't use these services?
- ii. Using these picture cards, how did using these services make you feel?

iii. Then progress to Q9

b. IF YES, progress to Q3

3. How did you find out about the food assistance agencies in your area?
 - a. Probe – can you tell me what those agencies are?
4. How many times over the last six months have you needed to go to an organization that provides food?
5. Can you walk me through the process that you've got to go through to get food assistance?
(Pick a location if they mention one)
 - a. How do you get an appointment?
 - b. Prompts – waiting list, ring up times, weekends, opening times/days etc
 - c. How many times a year are you allowed to get food from here?
 - d. Is this different at other agencies? Can you tell me the process at the other agencies you go to?
 - e. What happens when you use up all your visits?
 - f. Who do you show your Health Care card to? Then what happens next?

6. Can you show me using these picture cards how it feels getting food assistance from these agencies/organisations?
 - a. Prompt: Can you explain to me why you feel [insert emotion chosen] about getting food assistance?
 - b. That's really interesting because many people find it awkward or embarrassing. How come you don't find it embarrassing?
7. What do you get from these organisations? (Prompt – food parcel, food voucher, shopping card, free bread, etc.)
 - a. How do they work out what you get?
 - b. Food parcel:
 - i. How many times do you get a food parcel?
 - ii. What's in a food parcel?
 - iii. Do you find this meets your needs? What would you prefer to get?
 - c. Food vouchers:
 - i. How much are the vouchers worth?
 - ii. Does the agency pay or do you?
 - iii. Are you able to walk me through your shopping experience at Foodbank? (Prompt – foods chosen; how do they feel using this service?)
 - d. Coles/Woolies vouchers:
 - i. Are you able to walk me through your shopping experience at the supermarket?
(Prompt – foods chosen; how does it feel shopping there versus shopping at Foodbank?)
8. What do you do when these agencies are closed? Eg. public holidays
9. Is there anything else you'd like to share with me about your experiences with food assistance agencies?

ACCESSING FOOD (both orthodox and unorthodox ways)

These next questions focus on the ways people survive in terms of getting food or money for food, outside of the food relief services.

10. What ways have you or people you know used to get food or money to buy food outside of the emergency food relief agencies?

- a. Prompt: eg. buying food in bulk, shopping discounts, sharing food with friends, pawning items, short term loans or the buy now pay later schemes, etc.
- b. expand on these eg. ask what items they pawned, did they get them back and how much extra did it cost them; have they ever been in trouble with debt collectors?

11. There's been some studies that have shown people also go to family or friends for food or money to buy food. Can you tell me about any occasions where you've done this?

- a. Can you share with me the circumstances that led to you going to family or friends?

12. Can you tell me about any times where you or someone you know have sourced food from a place that may have been unsafe, physically risky, or illegal? [show photos]

- a. eg. pinching food from a supermarket, servo, or other retail outlet, or taking food out of a skip or bin.

If they say no, go straight to question 13]⁵⁴

- b. Probe: What were the circumstances that led you/your friend to consider using this source?
- c. Is it your preference to access food in this way? Why/why not?

13. I hear you when you say this is something you'd never/not do, but others have done this.

Given that people are only allowed a limited number of visits to agencies, I can understand

⁵⁴ This highlighted section, and others that follow in these Appendices, are indicative of the changes in wording from earlier drafts of interview questions

people who are desperate turn to other means to get food. What sort of stories have you heard from people that have done this?

- a. (Probe – Who, what, when, where, why)

FOOD RELIEF DURING COVID

Now I'm going to ask you some questions about COVID and food.

14. We've spoken about the ways you get food from different places/sources; how much did this change during the COVID-19 pandemic (specifically in 2020/2021 when the tighter restrictions were in place?

- a. Prompt – were any agencies closed? What did you do then? Bring in their 'creative ways' too; did the amount of food change in the dumpsters?

15. What did you do for food during the last lockdown in Adelaide? (20-27th July 2021)

- a. Prompt – were the agencies closed? What did you do then?

16. The next questions are about the extra payments you got during COVID:

- a. What did this extra money mean for you?
- b. What did you use this money for?
 - i. if they paid bills, ask what bills they were; were they overdue or had debt collectors?
- c. Did you use less food assistance or use these other food sources when the COVID supplement was provided? Why?
- d. (for those on JobSeeker) What has happened since the supplement stopped in March 2021?

17. We've covered a lot of topics today, is there anything else you'd like to add?

Addition of the below questions in August 2022 to capture cost-of-living increases and other economic events in Australia

18. What did you use the most recent cost-of-living \$250 payment for (offered by the Federal

Govt in April 2022)? Or the SA Govt cost of living concession payment for?

19. Cost of living questions here*****

Appendix 6. Interview guide for Sample 2 (showing modifications made during the interview process)

Initial draft of interview questions

Emergency Food Relief Workers – Participant Sample 2

1. Can you tell me a little bit about your role here and how long you've been a part of [insert organisation's name]?
2. Are you aware of any anecdotal evidence of how clients may get obtain food – other than via emergency food relief services?
3. Prompts: extended family
4. [skip question if they are aware of no other food sources being used by clients] Are you aware of any anecdotal evidence of clients accessing food in unorthodox ways that might be illegal, risky or unsafe for example from supermarket bins, theft, sex for favours etc...
5. Prompts:
6. What might be some of the factors that drive people to access food in illegal, risky or unsafe ways?
Prompt – why do you think they don't use emergency food relief instead?
7. Does the organisation have a policy response when it comes to their attention that a known/previous client might be engaging in risky, unsafe, or illegal practices to get food?
8. What do you think are some of the barriers clients of XXX service face in accessing food via emergency relief?
9. How do you think COVID-19 may have impacted on client's ability to get food?

Interview guide used to for pilot (October 2022)

INTERVIEW QUESTIONS – EMERGENCY FOOD RELIEF SECTOR WORKERS/VOLUNTEERS

PREAMBLE

Hi [name] thank you for taking time today to chat with me about your experiences of working with clients who access the food relief services provided here. The aim of my study is to understand their use of these services, the circumstances in their lives that led to them coming here for food relief and where they go for food when they can't access it here.

There are 7 questions in this interview and it should only take around 30 minutes of your time. Everything you say to me is confidential and there are no right or wrong answers. Please answer as honestly as you can and if there are any questions that you'd prefer not to answer, please let me know and I can move on.

1. Can you tell me a little bit about your role here and how long you've been a part of this organization?
2. Can you step me through the process a client uses to get food relief?
 - a. What do clients do during the times you're not open for EFR?
 - b. What does your organisation do for clients who've got dietary restrictions or food allergies?
3. Can you share with me any stories you've heard from clients about other strategies they use to get food or money to buy food?
 - a. Prompt: other than via emergency food relief services, or practices that have come up in the interviews, eg AfterPay, pawning items for cash etc
4. Can you share with me any stories you've heard from clients about them accessing food in ways that might be illegal, physically risky, or unsafe? e.g., from supermarket bins, theft, sex for food etc?
 - a. Why do you think they might access food in this way rather than use emergency food relief?
5. What does this organisation do when they hear about people engaging in risky, unsafe, or illegal practices to get food?
6. From your perspective, what is some of the barriers or challenges clients might face when accessing emergency food relief?
7. What changes did you notice to the EFR service during COVID-19 and in particular the time when the government were offering support payments (eg. JobSeeker was increased during 2020)?
 - a. How do you think this might have impacted on a client's ability to access food via food relief, or in illegal ways?

Thank you etc.

Interview guide post-pilot with extra question included about funding, plus inclusion of cost-of-living specific questions, clarification of screening and eligibility criteria, and links to Sample One results (modifications highlighted)

Interview Questions – Emergency Food Relief Sector Workers/Volunteers

Preamble

Hi [name] thank you for taking time today to chat with me about your experiences of working with clients who access the food relief services provided here. The aim of my study is to understand their use of these services, the circumstances in their lives that led to them coming here for food relief and where they go for food when they can't access it here.

There are 10 questions in this interview and it should only take around 30 minutes of your time. Everything you say to me is confidential and there are no right or wrong answers. Please answer as honestly as you can and if there are any questions that you'd prefer not to answer, please let me know and I can move on.

1. Can you tell me a little bit about your role here and how long you've been a part of this agency?
2. Can you tell me a little bit about the agency?
 - a. Prompt: how the agency is funded?
 - b. In your opinion, what sort of impact would there be on people seeking emergency food relief services if the agency was having to meet KPIs (key performance indicators) and grant funding requirements?
3. Can you step me through the process a client uses to get food relief?
 - a. How does this agency screen clients and determine their eligibility?
 - b. What do clients do during the times you're not open for EFR?
 - c. What does your organisation do for clients who've got dietary restrictions or food allergies?
4. From my interviews with food insecure adults, I've uncovered stories where their life's not gone according to plan and this has left them food insecure and dependent upon agencies like this one. Can you tell me of any stories you've heard from clients about what's led them here to your agency?

5. Can you share with me any stories you've heard from clients about other strategies they've used to get food or money to buy food?
 - a. Prompt: other than via emergency food relief services, or practices that have come up in the interviews, eg AfterPay, pawning items for cash etc
6. Can you share with me any stories you've heard from clients about them accessing food in ways that might be illegal, physically risky, or unsafe? e.g., from supermarket bins, theft, sex for food etc?
 - a. Why do you think they might access food in this way rather than use emergency food relief?
7. What does this agency do when they hear about people engaging in risky, unsafe, or illegal practices to get food?
8. From your perspective, what are some of the barriers or challenges clients might face when accessing emergency food relief?
9. What changes did you notice to the EFR service during COVID-19 and in particular the time when the government were offering support payments (eg. JobSeeker was increased during 2020)?
 - a. How do you think this might have impacted on a client's ability to access food via food relief, or in illegal ways?
10. What changes have you noticed this year in relation to the rising cost of living, interest rate increases, petrol price and grocery price increases?
 - a. Has there been an increase in clientele here and what reason did they give for seeking out emergency food relief?

Appendix 7. Active recruitment via social media: examples of Facebook posts

Anti-Poverty Network SA Forum

Posts were made in September 2021, May 2022, and October 2022 (see screenshots below).



Michelle Watson

8 September 2021 · 🌐

...

Hi everyone 😊 I'm a researcher at Flinders Uni doing a study on food coping strategies used by people in metropolitan Adelaide who are on a low income (who also have used or are still using food relief services such as the Salvos, Anglicare or other organisations for food relief).

I'd be keen to hear from anyone in Adelaide/SA who is interested in having a face-to-face, audio-recorded chat with me about their strategies to get food or money to buy food. I'm giving participants either a \$20 Coles voucher or a \$20 Foodbank voucher for their time. You can either DM me or call me on 0412 370676. Cheers!



Michelle Watson

19 May · 🌐

...

Hi folks. For those of you who don't know me, I'm a researcher at Flinders University. I've been chatting with people in the Adelaide metro area who are on a low income about where they get their food from when they can't get it from a food charity. So, if you're interested in sharing your experiences, DM me or message me on 0412 370676 and we can set up a time and date. I'm offering either a \$20 foodbank voucher or Coles voucher as a token of my appreciation 😊
(I have ethics approval from Flinders Uni to conduct this research).



Michelle Watson

10 October at 10:25 · 🌐

...

Hi everyone 😊 Some of you know me and have seen me around the place; I'm a researcher at Flinders University and have been interviewing people who have or are experiencing food insecurity. I've been speaking to a few people who are part of APN and I'm thankful for their participation.

I'd now like to chat with people who have been homeless to find out how they managed food/food insecurity during this time. If you've had this experience, and are interested in participating in my research, and would like either a \$20 Coles voucher or a \$20 Foodbank voucher, DM me; I'd love to add your experiences to my research. Your participation is completely anonymous.

Thanks 😊

Current Members Only – Anti-Poverty Network SA

One post was made in May 2022.



Michelle Watson

2 May · 🌐



Hi folks. For those of you who don't know me, I'm a researcher at Flinders University.

I've been chatting with people in the Adelaide metro area who are on a low income about where they get their food from when they can't get it from a food charity.

So, if you're interested in sharing your experiences, DM me or message me on 0412 370676 and we can set up a time and date. I'm offering either a \$20 foodbank voucher or Coles voucher as a token of my appreciation 😊

(I have ethics approval from Flinders Uni to conduct this research).

Adelaide Dumpster Trading and Adelaide Dumpster Diving and urban Foraging Community

Posts were made in April 2019, June 2021, September 2021, and in May 2022.



Michelle Watson

26 April 2019 · 🌐



Hi everybody. I'm a PhD student at Flinders University and my thesis is on dumpster diving. I'm a passionate advocate for reducing food insecurity and was wondering if anyone on this page is diving because they cannot afford to buy food or are using the dumpster food to supplement their food. Please PM me if you are - I will be looking at interviewing people for my thesis at some stage but am gauging the numbers now. All communications will be kept confidential. Admin delete if my post is inappropriate 😊



Michelle Watson

22 June 2021 · 🌐



Admin please remove if not allowed 😊 I'm a researcher at Flinders University and I'm wanting to interview people who dumpster dive because they can't afford to buy food. If you're interested in participating in my study, please DM me and we can chat further. TIA 😊

(and yes, this is the same study I posted about a while ago - it's taken this long to get approval etc ... oh and covid threw the proverbial spanner in the works! If you DM'd me then, please do so again so I know you're still interested)



Michelle Watson

10 September 2021 · 🌐

...

Hello again. I've posted before but I thought I'd follow-up with another post - I'm a researcher at Flinders Uni who is wanting to interview people who have used or are still using food relief, as well as dumpster diving and other methods of getting food.

I do understand that most of you dive because you hate food waste and I'm with you on that score, I really would like to talk to people who dive for the reasons above.

I'm offering a \$20 supermarket voucher as a thank you to anyone who participates 😊 DM me if you're interested in attending an audio-recorded interview! Many thanks 😊



Michelle Watson

2 May · 🌐

...

Hi folks, I've put a call out before for willing participants in my research (I'm a researcher at Flinders University). I'm looking for more participants to take part in my study.

I've been chatting with people in the Adelaide metro area who are on a low income about where they get their food from when they can't get it from a food charity.

So, if you're interested in sharing your experiences, DM me or message me on 0412 370676 and we can set up a time and date. I'm offering either a \$20 foodbank voucher or Coles voucher as a token of my appreciation 😊

(I have ethics approval from Flinders Uni to conduct this research).

Appendix 8. Dean of Research and the College of Nursing & Health Sciences data collection requirement during COVID-19



SUGGESTIONS REGARDING DATA COLLECTION FOR CNHS STAFF AND RESEARCH STUDENTS IN VIEW OF COVID-19

19th March, 2020

Prepared by Professor Joanne Arciuli, Dean of Research, College of Nursing and Health Sciences (with thanks to Professor Gerry Redmond, Dean of Research in the College of Business, Government, and Law).

The safety of our staff, students, and research participants is paramount. In addition, we wish to contribute to broader efforts to protect vulnerable members of our society and contribute to containment of COVID-19. As such, CNHS recommends that staff and students carefully review data collection activities for the foreseeable future.

While we will be responding to updates from federal and state governments and Flinders University here are our suggestions for immediate implementation:

1. Vulnerable populations: Aboriginal and Torres Strait Islander people. Consult before entering Indigenous communities. Some communities have asked that visitors do not enter due to COVID-19 risks. Reconsider data collection with Aboriginal and Torres Strait Islander people on or off campus. Seek further information from Aboriginal Health Council of SA and Pro VC Indigenous at Flinders.
2. Vulnerable populations: older people and those with significant health conditions. Avoid entering hospitals, hospices, aged care facilities, rehabilitation facilities, medical centres etc. Reconsider data collection with older people and those with significant health conditions.
3. Vulnerable populations: people with disabilities. Reconsider contact with disabled people who may have compromised immunity.

In terms of 'reconsidering' data collection we suggest that face to face data collection activities with participants in the above mentioned groups should be temporarily halted. Consider whether some research can perhaps be moved to phone calls or online.

For all data collection activities on or off campus we recommend the following steps:

Consider whether your data collection activity can take place without in person contact.

You may wish to consider moving to online activities or phone calls. If so, it would be prudent to seek ethics approval for a modification to your protocol (consider privacy issues, data storage issues, implications for any costs incurred by participants).

Prepare the research space (be it on campus, or elsewhere)

1. Ensure you can provide social distancing of at least 1.5 meters for the entire data collection activity (including travel to and from the data collection activity).
2. Ensure hand sanitisers are available and used by all parties (including researcher, participant, carers, onlookers) frequently (i.e., at the very least they should be used before and after data collection activities).
3. Ensure any equipment used is able to be fully sanitised after use by each researcher and each participant.

Make contact with participants prior to data collection activity by phone or email

1. Call each participant and complete COVID-19 checklist (see below). Only proceed if checklist shows it is safe to do so.
2. Repeat checklist when the data collection activity takes place. Only proceed if the checklist shows it is safe to do so.
3. Keep records of all checklists.

Complete the COVID-19 checklist with each participant (we have been assured that ethics approval is not required to administer this checklist)

1. Have you recently returned to Australia after travel (to any country)? If yes, have you self-isolated for 14 days? No to Q1.1 and/or YES to Q1.2 required in order to proceed.
2. Do you live in a household with anyone who has recently returned to Australia after travel (to any countries)? If yes, have you self-isolated for 14 days? No to Q2.1 and/or YES to Q2.2 required in order to proceed.
3. Do you have any symptoms of COVID-19 (sore throat, headache, etc)? NO required to proceed.
4. Does anyone you live with have symptoms of COVID-19? NO required to proceed.
5. Do you live with any people that might be considered to be vulnerable in terms of COVID-19 (Aboriginal and Torres Strait Islander people, older people, people who have or have had serious health conditions that may compromise their immunity, disabled people who may have compromised immunity). NO required to proceed.
6. Are you comfortable taking part in this data collection activity in view of COVID-19 guidelines to enforce social distancing of 1.5 meters and frequent use of hand sanitisers? Please note that the social distancing guidelines should be considered in terms of any travel required for data collection activities (e.g., taking the bus to the Flinders University campuses). YES required to proceed.
7. For noting: please be aware that we may temporarily halt all data collection activities upon further advice from governments and Flinders University. Are you comfortable with short notice cancellation? YES required to proceed.

In general, please be advised that funding bodies (e.g., ARC, NHMRC), Flinders University, and other organisations are aware that COVID-19 may delay research projects. This will be taken into account in due course, including HDR annual reports and completion times for HDR students who are significantly affected (we are yet to decide any specifics). If you foresee major delays to your project you might like to register this with an email to our CNHS dedicated email address: cnhs.covid-19@flinders.edu.au

This advice may change at any minute given the current COVID-19 climate. We will try to keep you updated.

Additional information that may be helpful

Announcement from Australian Research Council

<https://www.arc.gov.au/news-publications/media/network-messages/arc-support-universities-and-researchers-affected-coronavirus-pandemic>

Associate Professor Di Chamberlain is holding an online discussion for HDR related research matters from CNHS on 24th March 12-130pm. Perhaps contact her for zoom details if you don't already know about this event.

Professor Tara Brabazon, Dean of Graduate Research, is very active on Twitter and in other ways to support HDR students during this difficult time.

Check out #virtualnotviral for HDR related matters during COVID-19 and @PhD-virtualnotviral

I am also trying to tweet research related matters during COVID-19, and animal videos that may be relaxing for some! @jarciuli

DVC-R at Flinders will also be issuing broader recommendations and keeping us updated.

Appendix 9. Sample codebook for Theme 1

Name	Description
1. Life's not gone according to plan	
1a. How did I get here	includes "brought up privileged"
Brought up privileged	
Cultural lens and expectations	
Things have gone wrong	
1b. Relationship breakdown and divorce	
Relationship breakdown	
Single parent	
Dad not paying child support	
Making sacrifices for their children	
1c. Trauma and loss	
i) Domestic violence	
ii) Childhood trauma	
Generational poverty and FI	
iii) Loss of loved one	
iv) Job loss & unemployment	
4 pay packets away from financial strife	
v) Homelessness	
Evicted or kicked out of home	
Living in my car	
Living with family or friends (couch surfing)	
Sleeping rough or squatting	
1d. Health issues	
Children	
Self	
Mental health	
Substance abuse	

REFERENCES

ABARES. See Australian Bureau of Agricultural & Resource Economics & Sciences.

Abene, J. A., Tong, J., Minuk, J., Lindenfeldar, G., Chen, Y., & Chao, A. M. (2023). Food insecurity and binge eating: A systematic review and meta-analysis. *International Journal of Eating Disorders*, 56(7), 1301-1322. doi:10.1002/eat.23956

Abramson, L. Y., & Seligman, M. E. P. (1978). Learned helplessness in humans: Critique and reformulation. *Journal of Abnormal Psychology*, 87(1), 49-74.

ABS. See Australian Bureau of Statistics.

ACOSS. See Australian Council of Social Service.

Ahluwalia, I. B., Dodds, J. M., & Baligh, M. (1998). Social support and coping behaviors of low-income families experiencing food insufficiency in North Carolina. *Health Education & Behavior*, 25(5), 599-612.

AIHW. See Australian Institute of Health and Welfare.

Albanese, A. (2022). Q&A, *National Press Club*. online: Prime Minister of Australia. Retrieved from <https://www.pm.gov.au/media/qa-national-press-club>

Alston, P. (2017). *Mandates of the Special Rapporteur on extreme poverty and human rights*. Paper presented at the Office of the High Commissioner for Human Rights, Geneva, Switzerland.

Alston, P. (2018). The right to social insecurity: A human rights perspective on the evolution of Australian welfare policy. *Australian Journal of Human Rights*, 24(3), 253-275. doi:10.1080/1323238x.2018.1469221

Anater, A., McWilliams, R., & Latkin, C. (2011). Food acquisition practices used by food-insecure individuals when they are concerned about having sufficient food for themselves and their households. *Journal of Hunger & Environmental Nutrition*, 6(1), 27-44. doi:10.1080/19320248.2011.549368

Anda, R. F., Felitti, V. J., Bremner, J. D., Walker, J. D., Whitfield, C., Perry, B. D., . . . Giles, W. H. (2006). The enduring effects of abuse and related adverse experiences in childhood. A convergence of evidence from neurobiology and epidemiology. *European Archives of Psychiatry and Clinical Neuroscience*, 256(3), 174-186. doi:10.1007/s00406-005-0624-4

- Andriessen, T., & van der Velde, L. A. (2023). How the social dignity of recipients is violated and protected across various forms of food aid in high-income countries: a scoping review. *Agriculture and Human Values*. doi:10.1007/s10460-023-10476-w
- Anema, A., Fielden, S. J., Shurgold, S., Ding, E., Messina, J., Jones, J. E., . . . Hogg, R. S. (2016). Association between food insecurity and procurement methods among people living with HIV in a high resource setting. *PLoS One*, 11(8), e0157630. doi:10.1371/journal.pone.0157630
- Anglicare SA. (n.d.). Christies Beach - Outer Southern Hub. Retrieved from <https://anglicaresa.com.au/support/emergency-assistance/christiesbeach/>
- Anti-Poverty Network. (2021). 'Back to struggle street': A survey of 282 people on JobSeeker and other payments after the April cuts. Retrieved from Adelaide, South Australia: <https://www.saunions.org.au/news/media-releases/back-to-struggle-street/>
- Arksey, H., & O'Malley, L. (2005). Scoping studies: Towards a methodological framework. *International Journal of Social Research Methodology*, 8(1), 19-32. doi:10.1080/1364557032000119616
- Ashley-Binge, S., & Cousins, C. (2019). Individual and organisational practices addressing social workers' experiences of vicarious trauma. *Practice*, 32(3), 191-207. doi:10.1080/09503153.2019.1620201
- ASIC. See Australian Securities & Investments Commission.
- Australian Bureau of Agricultural & Resource Economics & Sciences. (2020). *Australian Food Security and the Covid-19 Pandemic*. Retrieved from Canberra: <https://www.awe.gov.au/abares/products/insights/australian-food-security-and-COVID-19>
- Australian Bureau of Statistics. (2015a). *Australian Aboriginal & Torres Strait Islander Health Survey: Nutrition Results - Food & Nutrients, 2012-2013*. Retrieved from Canberra: <https://www.abs.gov.au/ausstats/abs@.nsf/Lookup/by%20Subject/4727.0.55.005~2012-13~Main%20Features~Food%20Security~36>
- Australian Bureau of Statistics. (2015b). *Australian Health Survey: Nutrition - State & Territory Results, 2011-2012*. Retrieved from Canberra: <https://www.abs.gov.au/ausstats/abs@.nsf/mf/4364.0.55.009?OpenDocument>

Australian Bureau of Statistics. (2020). *General Social Survey: Summary Results, Australia*.

Retrieved from <https://www.abs.gov.au/statistics/people/people-and-communities/general-social-survey-summary-results-australia/2020#voluntary-work-and-unpaid-work-support>

Australian Bureau of Statistics. (2023). 2033.0.55.01 - *Census of Population and Housing: Socio-Economic Indexes for Areas (SEIFA), Australia, 2016*. Retrieved from

<https://www.abs.gov.au/AUSSTATS/abs@.nsf/DetailsPage/2033.0.55.0012016?OpenDocument>

Australian Charities and Not-for-profits Commission. (2022). *Annual Information Statement 2022: Christies Beach Baptist Church*. Retrieved from online:

<https://www.acnc.gov.au/charity/charities/2c414983-39af-e811-a95e-000d3ad24c60/documents/9aa0bbb4-88ad-ed11-83ff-002248933dda>

Australian Council of Social Service. (2011). *The Emergency Relief Handbook: A guide for Emergency Relief Workers* (4th ed.). Retrieved from online: www.acoss.org.au

Australian Council of Social Service. (2020a). *'If it wasn't for the Supplement, I've no idea where I'd be': Survey of more than 600 people receiving the new rate of JobSeeker or related income support payments*. Retrieved from New South Wales, Australia:

<https://www.acoss.org.au/wp-content/uploads/2020/09/If-It-Wasnt-For-The-Supplement-I-Dont-Know-Where-Id-Be-August-2020-JobSeeker-Survey.pdf>

Australian Council of Social Service. (2020b). *'I can finally eat fresh fruit and vegetables': Survey of 955 people receiving the new rate of JobSeeker and other allowances*. Retrieved from

Sydney, Australia: <https://www.acoss.org.au/wp-content/uploads/2020/06/200624-I-Can-Finally-Eat-Fresh-Fruit-And-Vegetables-Results-Of-The-Coronaviru...pdf>

Australian Council of Social Service. (2023). *"It's hell": How inadequate income support is causing harm*. Retrieved from online: www.acoss.org.au

Australian Council of Social Service. (n.d.). FAQs. Retrieved from

<https://www.raisetherate.org.au/faqs>

Australian Government. (2020a). *Economic response to the Coronavirus*. Retrieved from Canberra:

<https://treasury.gov.au/coronavirus>

- Australian Government. (2020b). *Payments to support households*. Canberra, ACT: Australian Government Retrieved from <https://treasury.gov.au/coronavirus/households/extra-payments-pensioners>
- Australian Institute of Health and Welfare. (2023). *Australia's welfare: 2023 in brief*. Retrieved from online: <https://www.aihw.gov.au/reports/australias-welfare/australias-welfare-2023-in-brief/summary>
- Australian Institute of Health and Welfare. (2024). Family, domestic and sexual violence (FDSV) summary. Retrieved from <https://www.aihw.gov.au/family-domestic-and-sexual-violence/resources/fdsv-summary>
- Australian Public Service Commission. (2018). Tackling wicked problems: A public policy perspective. Retrieved from <https://www.apsc.gov.au/tackling-wicked-problems-public-policy-perspective>
- Australian Securities & Investments Commission. (2018). *Review of Buy Now Pay Later arrangements*. Retrieved from online: <https://asic.gov.au/regulatory-resources/find-a-document/reports/rep-600-review-of-buy-now-pay-later-arrangements/>
- Australian Securities & Investments Commission. (2020). *Buy Now Pay Later: An industry update*. Retrieved from online: <https://asic.gov.au/regulatory-resources/find-a-document/reports/rep-672-buy-now-pay-later-an-industry-update/>
- Azize, M. (2022). *Obligation without opportunity: The case against Workforce Australia*. Retrieved from Canberra, Australia: <https://www.anglicare.asn.au/publications/obligation-without-opportunity/#:~:text=Obligation%20Without%20Opportunity%20calls%20for,and%20have%20cost%20taxpayers%20billions>
- Bacchi, C. (2009). *Analysing policy: What's the problem represented to be?* Frenchs Forest, NSW: Pearson Australia.
- Bacchi, C. (2016). Problematizations in health policy. *SAGE Open*, 6(2).
doi:10.1177/2158244016653986
- Balistreri, K. S., & Alvira-Hammond, M. (2016). Adverse childhood experiences, family functioning and adolescent health and emotional well-being. *Public Health*, 132, 72-78.
doi:10.1016/j.puhe.2015.10.034

- Bandura, A. (1977). Self-efficacy: Toward a unifying theory of behavior change. *Psychological Review*, 84(2), 191-215.
- Bangert, M. K., & Aisenberg, G. M. (2020). Drug deprescription-withdrawal risk, prevention, and treatment. *Baylor University Medical Center Proceedings*, 33(2), 213-217.
doi:10.1080/08998280.2019.1695510
- Barber, J. G. (1991). *Beyond Casework*. London, UK: Macmillan Education Ltd.
- Barbour, L., Rose, N., Montegriffo, E., Wingrove, K., Clarke, B., Browne, J., & Rundle, M. (2016). *The human right to food*. Retrieved from Melbourne: <https://righttofood.org.au/>
- Barratt, M. J., Norman, J. S., & Fry, C. L. (2007). Positive and negative aspects of participation in illicit drug research: Implications for recruitment and ethical conduct. *International Journal of Drug Policy*, 18(3), 235-238. doi:10.1016/j.drugpo.2006.07.001
- Barrett, J., & Taylor, J. (2023, 10th September, 2023). A rise in shoplifting has Australian supermarkets ramping up surveillance. *The Guardian*. Retrieved from <https://www.theguardian.com/australia-news/2023/sep/10/coles-woolworths-theft-measures-security-self-checkout-camera-trackers>
- Bartos, S., Balmford, M., Karolis, A., Swansson, J., & Davey, A. (2012). *Resilience in the Australian food supply chain*. Retrieved from Canberra: <https://www.agriculture.gov.au/sites/default/files/sitecollectiondocuments/ag-food/food/national-food-plan/submissions-received/resilience-food-supply.pdf>
- Baum, F. (2008). *The new public health* (3rd ed.). Victoria, Australia: Oxford University Press.
- Belk, R. (2010). Sharing. *Journal of Consumer Research*, 36(5), 715-734. doi:10.1086/612649
- Belk, R., & Llamas, R. (2011). The nature and effects of sharing in consumer behavior. In D. G. Mick, S. Pettigrew, & C. Pechmann (Eds.), *Transformative consumer research for personal and collective well-being* (pp. 625-646). online: Taylor & Francis Group.
- Bessell, S. (2019). Money matters...but so do people: Children's views and experiences of living in a 'disadvantaged' community. *Children and Youth Services Review*, 97, 59-66.
doi:10.1016/j.childyouth.2017.06.010
- Big Commerce. (2023). How Buy Now, Pay Later is transforming online shopping. Retrieved from <https://www.bigcommerce.com.au/articles/ecommerce/buy-now-pay-later-ecommerce/>

- Bigand, T. L., Dietz, J., Gubitz, H. N., & Wilson, M. (2021). Barriers and facilitators to healthy eating among adult food bank users. *Western Journal of Nursing Research*, 43(7), 660-667. doi:10.1177/0193945920969689
- Birks, M., & Mills, J. (2011). *Grounded theory: A practical guide*. London, UK: SAGE Publications Ltd.
- Birks, M., & Mills, J. (2015). *Grounded theory: A practical guide* (2nd ed.). London, UK: SAGE Publications Ltd.
- Blackwood, F. (2020, 18th January 2020). Buy Now, Pay Later finance popularity for food purchases sparks debt fears. *ABC News*. Retrieved from <https://www.abc.net.au/news/2020-01-18/buy-now-pay-later-food-purchases-worry-consumer-advocates/11873572>
- Blakkarly, J. (2023). Financial counsellors sound the alarm about Afterpay Plus. Retrieved from https://www.choice.com.au/money/credit-cards-and-loans/personal-loans/articles/afterpay-plus?fbclid=IwAR2_D9GJhNFrNFsi7nuZYC0C9u67VQxC0JeiWiSNoJ9YygeF6dNqjm0DW2U
- Bloomberg, L. D., & Volpe, M. (2012). *Completing your qualitative dissertation: A roadmap from beginning to end* (2nd ed.). USA: SAGE Publications Inc.
- Blumberg, S. J., Bialostosky, K., Hamilton, W. L., & Briefel, R. R. (1999). The effectiveness of a short form of the Household Food Security Scale. *American Journal of Public Health*, 89(8), 1231-1234.
- Bonevski, B., Randell, M., Paul, C., Chapman, K., Twyman, L., Bryant, J. , . . . Hughes, C. (2014). Reaching the hard-to-reach: A systematic review of strategies for improving health and medical research with socially disadvantaged groups. *BMC Medical Research Methodology*, 14, 42. doi:10.1186/1471-2288-14-42
- Booth, S. (1999). Researching health and homelessness: Methodological challenges for researchers working with a vulnerable, hard to reach, transient population. *Australian Journal of Primary Health - Interchange*, 5(3), 76-81.
- Booth, S. (2014). Food banks in Australia: Discouraging the right to food. In G. Riches & T. Silvasti (Eds.), *First world hunger revisited* (pp. 15-28). Hampshire, UK: Palgrave Macmillan.

- Booth, S., Begley, A., Mackintosh, B., Kerr, D. A., Jancey, J., Caraher, M. , . . . Pollard, C. M. (2018). Gratitude, resignation and the desire for dignity: Lived experience of food charity recipients and their recommendations for improvement, Perth, Western Australia. *Public Health Nutrition*, 21(15), 2831-2841. doi:10.1017/S1368980018001428
- Booth, S., & Pollard, C. (2020). Food insecurity, food crimes and structural violence: An Australian perspective. *Australian and New Zealand Journal of Public Health*, online, 1-2. doi:10.1111/1753-6405.12977
- Booth, S., Pollard, C., Coveney, J., & Goodwin-Smith, I. (2018). 'Sustainable' rather than 'subsistence' food assistance solutions to food insecurity: South Australian recipients' perspectives on traditional and social enterprise models. *International Journal of Environmental Research & Public Health*, 15(10), 1-18. doi:10.3390/ijerph15102086
- Booth, S., & Whelan, J. (2014). Hungry for change: The food banking industry in Australia. *British Food Journal*, 116(9), 1392-1404. doi:10.1108/bfj-01-2014-0037
- Booth, T., & Booth, W. (1994). The use of depth interviewing with vulnerable subjects: Lessons from a research study of parents with learning difficulties. *Social Science & Medicine*, 39(3), 415-424.
- Borlaug, N. (1970). *The green revolution, peace, and humanity*. Nobel Lecture. Retrieved from <https://www.nobelprize.org/prizes/peace/1970/borlaug/lecture/>
- Bos, M., Carter, S., & Skiba, P. M. (2012). *The pawn industry and its customers: The United States and Europe*. Vanderbilt Law and Economics Research Paper No. 12-26, Available at SSRN: <https://ssrn.com/abstract=2149575>
- Boullier, M., & Blair, M. (2018). Adverse childhood experiences. *Paediatrics and Child Health*, 28(3), 132-137. doi:10.1016/j.paed.2017.12.008
- Bourdieu, P. (1986). The forms of capital. In J. G. Richardson (Ed.), *Handbook of theory and research for the sociology of education*. Connecticut, USA: Greenwood Press Inc.
- Bourke, E. (2022). *Nothing left to give: Emergency relief across the Anglicare Australia networks*. Retrieved from Canberra, Australia: <https://www.anglicare.asn.au/publications/nothing-left-to-give/>
- Bowden, M. (2020). *Understanding food insecurity in Australia*. Retrieved from online: <https://aifs.gov.au/cfca/publications/understanding-food-insecurity-australia>

- Bowen, E. A., & Murshid, N. S. (2016). Trauma-Informed social policy: A conceptual framework for policy analysis and advocacy. *American Journal of Public Health, 106*(2), 223-229. doi:10.2105/AJPH.2015.302970
- Boyle, M. (2010). *The moneyless man: A year of freeeconomic living*. United Kingdom: Oneworld Publications.
- Brase, R., Dai, J., Schneider, A., Werlin, S., & Ebling, R. (2019). A trauma-informed atmospheric assessment for food assistance programs. *Practice Based Community Health Research Reports, 25*. https://elischolar.library.yale.edu/ysph_pbchrr/25
- Braun, V., & Clarke, V. (2006). Using thematic analysis in psychology. *Qualitative research in psychology, 3*(2), 77-101. doi:10.1191/1478088706qp063oa
- Browne, I., & Misra, J. (2003). The Intersection of gender and race in the labor market. *Annual Review of Sociology, 29*(1), 487-513. doi:10.1146/annurev.soc.29.010202.100016
- Bruckner, H. K., Westbrook, M., Loberg, L., Teig, E., & Schaeffbauer, C. (2021). “Free” food with a side of shame? Combating stigma in emergency food assistance programs in the quest for food justice. *Geoforum, 123*, 99-106. doi:10.1016/j.geoforum.2021.04.021
- Bryant, A. (2014). The Grounded Theory Method. In P. Leavy (Ed.), *Oxford handbook of qualitative research* (pp. 116-136). online: Oxford University Press.
- Bryant, A., & Charmaz, K. (2013). Introduction: Grounded Theory Research - methods and practices. In A. Bryant & K. Charmaz (Eds.), *The SAGE Handbook of grounded theory*. London, UK: SAGE Publications Inc.
- Bryant, A., Charmaz, K., Henwood, K., Mitchell, R. G., Clarke, A., Coffey, A., . . . Wittgenstein, L. (2011). Introduction: Grounded Theory Research - methods and practices. In A. Bryant & K. Charmaz (Eds.), *The SAGE handbook of grounded theory*. doi:10.4135/9781848607941
- Büchs, M. (2021). Sustainable welfare: How do universal basic income and universal basic services compare? *Ecological Economics, 189*. doi:10.1016/j.ecolecon.2021.107152
- Butcher, L. M., O’Sullivan, T. A., Ryan, M. M., Lo, J., & Devine, A. (2019). Utilising a multi-item questionnaire to assess household food security in Australia. *Health Promotion Journal of Australia, 30*(1), 9-17. doi:10.1002/hpja.61

- Butcher, L. M., Ryan, M. M., O'Sullivan, T. A., Lo, J., & Devine, A. (2018). What drives food insecurity in Western Australia? How the perceptions of people at risk differ to those of stakeholders. *Nutrients*, 10(8). doi:10.3390/nu10081059
- Caraher, M., & Davison, R. (2019). The normalisation of food aid: What happened to feeding people well? *Emerald Open Research*, 1. doi:10.12688/emeraldopenres.12842.1
- Caraher, M., & Furey, S. (2017). *Is it appropriate to use surplus food to feed people in hunger? Short-term band-aid to more deep rooted problems of poverty*. Retrieved from United Kingdom: <https://foodresearch.org.uk/publications/is-it-appropriate-to-use-surplus-food-to-feed-people-in-hunger/>
- Caraher, M., & Furey, S. (2018). *The economics of emergency food aid provision: A financial, social & cultural perspective*. Switzerland: Springer International Publishing AG.
- Carey, R., Murphy, M., & Alexandra, L. (2020). COVID-19 highlights the need to plan for healthy, equitable and resilient food systems. *Cities & Health*, 1-4. doi:10.1080/23748834.2020.1791442
- Cash Converters. (2023a). What is pawnbroking? Retrieved from <https://www.cashconverters.com.au/about/blog/buying-selling/what-is-pawnbroking>
- Cash Converters. (2023b). Pawnbroking loans on items of value. Retrieved from <https://www.cashconverters.com.au/loans/pawnbroking/general>
- Cash Converters International Ltd. (2023). Announcements & Reports. Retrieved from <https://www.cashconverters.com/investor-centre/annual-reports>
- CBBC. See Christies Beach Baptist Church.
- Center for Youth Wellness. (2017). Childhood adversity increases risk for long-term health and behavioural issues. Retrieved from <https://centerforyouthwellness.org/health-impacts/>
- Centers for Disease Control and Prevention. (n.d.). About the CDC-Kaiser ACE Study. Retrieved from <https://www.cdc.gov/violenceprevention/aces/about.html>
- Centre for Public Impact. (2022). *Changing Lives: Learning to listen again*. Retrieved from <https://www.centreforpublicimpact.org/partnering-for-learning/learning-to-listen-again>
- Centre of United Methodist Aid to the Community Ecumenically Concerned with Helping Others. (n.d.). Roots to Resilience. Retrieved from <https://www.cumac.org/rtr>

- Chan, J. C. N., Gagliardino, J. J., Ilkova, H., Lavallo, F., Ramachandran, A., Mbanya, J. C., . . . Aschner, P. (2021). One in seven insulin-treated patients in developing countries reported poor persistence with insulin therapy: Real world evidence from the cross-sectional International Diabetes Management Practices Study (IDMPS). *Advances in Therapy*, 38(6), 3281-3298. doi:10.1007/s12325-021-01736-4
- Charmaz, K. (2000). Grounded theory: Objectivist and constructivist methods. In N. Denzin & Y. Lincoln (Eds.), *Handbook of qualitative research* (2nd ed., pp. 509-535). California, USA: SAGE Publications Inc.
- Charmaz, K. (2006). *Constructing grounded theory: A practical guide through qualitative analysis*. London, UK: SAGE Publications Ltd.
- Charmaz, K. (2011). Grounded Theory methods in social justice research. In N. Denzin & Y. Lincoln (Eds.), *The SAGE handbook of qualitative research* (4th ed.). California, USA: SAGE Publications Inc.
- Charmaz, K. (2014). *Constructing grounded theory* (2nd ed.). London, UK: SAGE Publications Ltd.
- Charmaz, K., Thornberg, R., & Keane, E. (2018). Evolving grounded theory and social justice inquiry. In N. Denzin & Y. Lincoln (Eds.), *The SAGE handbook of qualitative research* (5th ed.). United States of America: SAGE Publications Inc.
- Chen, J., & Langwasser, K. (2021). *COVID-19 stimulus payments and the Reserve Bank's transactional banking services*. Retrieved from online: <https://www.rba.gov.au/publications/bulletin/2021/jun/covid-19-stimulus-payments-and-the-reserve-banks-transactional-banking-services.html>
- Chen, V. (2020). Online payday lenders: Trusted friends or debt traps? *UNSW Law Journal*, 43(2), 674-706. doi:10.53637/XKSR8815
- Chilton, M., Knowles, M., & Bloom, S. L. (2017). The intergenerational circumstances of household food insecurity and adversity. *Journal of Hunger & Environmental Nutrition*, 12(2), 269-297. doi:10.1080/19320248.2016.1146195
- Chilton, M., Knowles, M., Rabinowich, J., & Arnold, K. T. (2015). The relationship between childhood adversity and food insecurity: 'It's like a bird nesting in your head'. *Public Health Nutrition*, 18(14), 2643-2653. doi:10.1017/S1368980014003036

- Chilton, M., & Rose, D. (2009). A rights-based approach to food insecurity in the United States. *American Journal of Public Health*, 99(7), 1203-1211. doi:10.2105/AJPH.2007.130229
- Cho, S., Williams Crenshaw, K., & McCall, L. (2013). Toward a field of intersectionality studies: Theory, applications, and praxis. *Journal of Women in Culture and Society*, 38(4), 785-810. doi:0097-9740/2013/3804-0001
- Chodur, G. M., Zhao, X., Biehl, E., Mitrani-Reiser, J., & Neff, R. (2018). Assessing food system vulnerabilities: A fault tree modeling approach. *BMC Public Health*, 18(1), 817. doi:10.1186/s12889-018-5563-x
- CHOICE. (2023a). 17th Annual CHOICE Shonky Awards. Retrieved from <https://www.choice.com.au/shonky-awards>
- CHOICE. (2023b). Humm buy now, pay later - the Shonky Award for ... unaffordable debt. Retrieved from https://www.choice.com.au/shonky-awards/hall-of-shame/shonkys-2021/humm-bnpl?utm_source=facebook&utm_medium=social&utm_campaign=shonkys21&fbclid=IwAR14q3sDPdfx_Vz3jyW-Q_zQ8yW7x9U37rldQA2wAM7UODV9lEFjmK_95m4
- Christies Beach Baptist Church. (2022). Emergency relief. Retrieved from <https://christiesbaptist.org.au/emergency-relief/>
- Clapp, J., Moseley, W. G., Burlingame, B., & Termine, P. (2022). Viewpoint: The case for a six-dimensional food security framework. *Food Policy*, 106. doi:10.1016/j.foodpol.2021.102164
- Coates, B., & Cowgill, M. (2021a). Now is an especially bad time to cut unemployment benefits. Retrieved from <https://grattan.edu.au/news/now-is-an-especially-bad-time-to-cut-unemployment-benefits/>
- Coates, B., & Cowgill, M. (2021b). *The JobSeeker rise isn't enough*. Retrieved from online: <https://grattan.edu.au/report/the-jobseeker-rise-isnt-enough/>
- Coles Group Limited. (2023). *Coles Group Limited - 2023 Full Year Results Release*. Retrieved from online: <https://www.colesgroup.com.au/DownloadFile.axd?file=/Report/ComNews/20230822/02700046.pdf>

- Committee on World Food Security. (2012). *Coming to terms with terminology: Food security, nutrition security, food security & nutrition, food & nutrition security*. Retrieved from <http://www.fao.org/3/MD776E/MD776E.pdf>
- Commonwealth of Australia. (2023a). *Community Affairs References Committee: The extent and nature of poverty in Australia - Interim report*. Retrieved from Canberra, ACT, Australia: https://www.aph.gov.au/Parliamentary_Business/Committees/Senate/Community_Affairs/PovertyinAustralia/Interim_Report
- Commonwealth of Australia. (2023b). Social security cost-of-living measures. Retrieved from https://www.aph.gov.au/About_Parliament/Parliamentary_departments/Parliamentary_Library/Budget/reviews/2023-24/SocialSecurity#:~:text=The%202023%E2%80%9324%20Budget%20includes,and%20other%20working%20day%20payments
- Compassion Fatigue Australia. (2024). The facts. Retrieved from <https://compassionfatigue.com.au/the-facts-for-thoughtful-leaders/>
- Considine, M. (2022). Employment services. In *The careless State: Reforming Australia's social services*. Melbourne, Victoria: Melbourne University Publishing Ltd.
- Corbin, J., & Holt, N. L. (2011). Grounded theory. In B. Somekh & C. Lewin (Eds.), *Theory and methods in social research* (2nd ed.). London, UK: SAGE Publications Ltd.
- Cordero-Ahiman, O., Santellano-Estrada, E., & Garrido, A. (2018). Food access and coping strategies adopted by households to fight hunger among indigenous communities of Sierra Tarahumara in Mexico. *Sustainability*, 10(2). doi:10.3390/su10020473
- Correll, D. (2022). Social media statistics Australia - September 2022. Retrieved from <https://www.socialmedianews.com.au/social-media-statistics-australia-september-2022/>
- Crawford, B., Yamazaki, R., Franke, E., Amanatidis, S., Ravulo, J., Steinbeck, K., . . . Torvaldsen, S. (2014). Sustaining dignity? Food insecurity in homeless young people in urban Australia. *Health Promotion Journal of Australia*, 25(2), 71-78. doi:10.1071/HE13090
- Creswell, J. W., & Creswell, J. D. (2017). *Research design: Qualitative, quantitative and mixed method approaches* (5th ed.). USA: SAGE Inc.
- Creswell, J. W., & Poth, C. N. (2018). *Qualitative inquiry & research design: Choosing among five approaches*. California, USA: SAGE Publications Inc.

- Crime Stoppers South Australia. (2023). Crime Stoppers and Coles join forces to fight retail crime. Retrieved from <https://crimestopperssa.com.au/media-releases/crime-stoppers-and-coles-join-forces-to-fight-retail-crime/#>
- CUMAC/ECHO. See Centre of United Methodist Aid to the Community Ecumenically Concerned with Helping Others.
- Darko, J., Eggett, D. L., & Richards, R. (2013). Shopping behaviors of low-income families during a 1-month period of time. *Journal of Nutrition Education and Behavior*, 45(1), 20-29. doi:10.1016/j.jneb.2012.05.016
- Davidson, P., Bradbury, B., & Wong, M. (2023). *Poverty in Australia 2023: Who is affected*. Retrieved from online: <https://povertyandinequality.acoss.org.au/poverty-in-australia-2023-who-is-affected/>
- Davidson, P., Saunders, P., Bradbury, B., & Wong, M. (2018). *Poverty in Australia* (ACOSS/UNSW Poverty and Inequality Partnership Report No. 2). Retrieved from Sydney: https://www.acoss.org.au/wp-content/uploads/2018/10/ACOSS_Poverty-in-Australia-Report_Web-Final.pdf
- de Oliveira, K. H. D., de Almeida, G. M., Gubert, M. B., Moura, A. S., Spaniol, A. M., Hernandez, D. C., . . . Buccini, G. (2020). Household food insecurity and early childhood development: Systematic review and meta-analysis. *Maternal & Child Nutrition*, 16(3), e12967. doi:10.1111/mcn.12967
- De Souza, R. (2019). *Feeding the other: Whiteness, privilege, and neoliberal stigma in food pantries*. USA: Massachusetts Institute of Technology.
- Delman, E. (2015). Should it be illegal for supermarkets to waste food? Retrieved from <https://www.theatlantic.com/international/archive/2015/05/law-france-supermarkets-food-waste/394481/>
- Denzin, N., & Lincoln, Y. (2000). The discipline and practice of qualitative research. In N. Denzin & Y. Lincoln (Eds.), *Handbook of qualitative research* (2nd ed., pp. 1-28). California, USA: SAGE Publications Inc.
- Department of Agriculture, F. F. (2023). Analysis of Australia's food security and the COVID-19 pandemic. Retrieved from <https://www.agriculture.gov.au/abares/products/insights/australian-food-security-and->

[COVID-19#empty-supermarket-shelves-reflect-an-unexpected-surge-in-demand-as-consumers-stockpile-food-taking-supply-chains-by-surprise](#)

- Dickson-Swift, V., James, E. J., Kippen, S., & Liamputtong, P. (2007). Doing sensitive research: What challenges do qualitative researchers face? *Qualitative Research*, 7(3), 327-353.
doi:10.1177/1468794107078515
- Dixon, J., & Frolova, Y. (2011). Existential poverty: Welfare dependency, learned helplessness and psychological capital. *Poverty & Public Policy*, 3(2), 279-298. doi:10.2202/1944-2858.1158
- Dowler, E. A., & O'Connor, D. (2012). Rights-based approaches to addressing food poverty and food insecurity in Ireland and UK. *Social Science & Medicine*, 74(1), 44-51.
doi:10.1016/j.socscimed.2011.08.036
- Economics Reference Committee. (2019). *Credit and hardship: Report of the Senate inquiry into credit and financial products targeted at Australian at risk of financial hardship*. Retrieved from Canberra, Australia:
[https://www.aph.gov.au/Parliamentary Business/Committees/Senate/Economics/Creditfinancialservices](https://www.aph.gov.au/Parliamentary_Business/Committees/Senate/Economics/Creditfinancialservices)
- Eisenberg-Guyot, J., Firth, C., Klawitter, M., & Hajat, A. (2018). From payday loans to pawnshops: Fringe banking, the unbanked, and health. *Health Affairs*, 37(3), 429-437.
doi:10.1377/hlthaff.2017.1219
- Eliaz, S., & Murphy, L. (2020). *A shock to the food system: Lessons learned from the COVID-19 pandemic*. Retrieved from online: <https://www2.deloitte.com/ch/en/pages/consumer-business/articles/a-shock-to-the-food-system.html>
- Elizabeth, L., Machado, P., Zinocker, M., Baker, P., & Lawrence, M. (2020). Ultra-processed foods and health outcomes: A narrative review. *Nutrients*, 12(7), 1-33. doi:10.3390/nu12071955
- Ellard-Gray, A., Jeffrey, N. K., Choubak, M., & Crann, S. E. (2015). Finding the hidden participant. *International Journal of Qualitative Methods*, 14(5), 1-10. doi:10.1177/1609406915621420
- Endo, C., & Choi, Y. J. (2023). Three policy alternatives for advancing active citizenship: Universal basic income, universal basic services, and social economy. *Ethics and Social Welfare*, 1-17.
doi:10.1080/17496535.2023.2267805
- Engels, B., Nissim, R., & Landvogt, K. (2012). Financial hardship and emergency relief in Victoria. *Australian Social Work*, 65(1), 54-72. doi:10.1080/0312407x.2011.603091

- Enns, A., Rizvi, A., Quinn, S., & Kristjansson, E. (2020). Experiences of food bank access and food insecurity in Ottawa, Canada. *Journal of Hunger & Environmental Nutrition*, 1-17. doi:10.1080/19320248.2020.1761502
- Erickson, F. (2018). A history of qualitative inquiry in social and educational research. In N. Denzin & Y. Lincoln (Eds.), *The SAGE handbook of qualitative research* (5th ed.). USA: SAGE Publications Inc.
- FAO, IFAD, UNICEF, WFP, & WHO. See Food and Agriculture Organization, International Fund for Agricultural Development, United Nations Children's Fund, World Food Program, & World Health Organization.
- Farmer, P. (2004). An anthropology of structural violence. *Current Anthropology*, 45(3), 305-325. Retrieved from <http://www.jstor.com/stable/10.1086/382250>
- Farzana, F. D., Rahman, A. S., Sultana, S., Raihan, M. J., Haque, M. A., Waid, J. L., . . . Ahmed, T. (2017). Coping strategies related to food insecurity at the household level in Bangladesh. *PLoS One*, 12(4), e0171411. doi:10.1371/journal.pone.0171411
- Felitti, V. J., Anda, R. F., Nordenberg, D., Williamson, D. F., Spitz, A. M., Edwards, V. J., . . . Marks, J. S. (1998). Relationship of childhood abuse and household dysfunction to many of the leading causes of death in adults: The Adverse Childhood Experiences (ACE) Study. *American Journal of Preventive Medicine*, 14(1), 245-258.
- Felsher, M., Wiehe, S. E., Gunn, J. K. L., & Roth, A. M. (2018). 'I got it off my chest': An examination of how research participation improved the mental health of women engaging in transactional sex. *Community Mental Health Journal*, 54(2), 171-179. doi:10.1007/s10597-017-0094-y
- Fernandez, K. V., Brittain, A. J., & Bennett, S. D. (2011). "Doing the duck": Negotiating the resistant-consumer identity. *European Journal of Marketing*, 45(11/12), 1779-1788. doi:10.1108/03090561111167414
- Financial Counselling Australia. (2023). *Small loans, big problems*. Retrieved from online: <https://www.financialcounsellingaustralia.org.au/docs/small-loans-big-problems-buy-now-pay-later/>
- Fitzpatrick, K. M., & Willis, D. E. (2020). Homeless and hungry: Food insecurity in the land of plenty. *Food Security*, 1-10. doi:10.1007/s12571-020-01115-x

- Foley, W., Ward, P., Carter, P., Coveney, J., Tsourtos, G., & Taylor, A. (2009). An ecological analysis of factors associated with food insecurity in South Australia, 2002-7. *Public Health Nutrition*, 13(2), 215-221. doi:10.1017/S1368980009990747
- Food & Research Action Centre. (2017). *The impact of poverty, food insecurity and poor nutrition on health and well-being*. Retrieved from www.frac.org
- Food and Agriculture Organization of the United Nations. (2020). Novel Coronavirus (COVID-19). Retrieved from <http://www.fao.org/2019-ncov/q-and-a/impact-on-food-and-agriculture/en/>
- Food and Agriculture Organization, International Fund for Agricultural Development, United Nations Children's Fund, World Food Program, & World Health Organization (2021). *The state of food security and nutrition in the world 2021: Transforming food systems for food security, improved nutrition and affordable healthy diets for all* (978-92-5-134325-8). Retrieved from Rome, FAO: <https://www.fao.org/publications/sofi/2021/en/>
- Food and Agriculture Organization, International Fund for Agricultural Development, United Nations Children's Fund, World Food Program, & World Health Organization. (2023). *The state of food security and nutrition in the world 2023: Urbanisation, agrifood systems transformation and healthy diets across the rural-urban continuum*. Retrieved from Rome: <https://www.fao.org/3/cc3017en/online/cc3017en.html>
- Food Bank News. (2024, 28th September, 2021). This is what trauma-informed hunger relief looks like. Retrieved from <https://foodbanknews.org/this-is-what-trauma-informed-hunger-relief-looks-like/>
- Foodbank Australia. (2019). *Foodbank Hunger Report 2019*. Retrieved from <https://www.foodbank.org.au/wp-content/uploads/2019/10/Foodbank-Hunger-Report-2019.pdf?state=sa>
- Foodbank Australia. (2020). *Foodbank Hunger Report 2020: Food insecurity in the time of COVID-19*. Retrieved from <https://www.foodbank.org.au/foodinsecurity/?state=au>
- Foodbank Australia. (2021). Our story. Retrieved from <https://www.foodbank.org.au/our-story/?state=nsw-act>

- Foodbank Australia. (2022). *Financial report for the financial year ended 30 June 2022*. Retrieved from online: <https://www.acnc.gov.au/charity/charities/d7db9a5e-39af-e811-a962-000d3ad24a0d/documents/>
- Foodbank Australia. (2023). *Foodbank Hunger Report 2023*. Retrieved from online: <https://www.foodbank.org.au/?state=au>
- Foodbank Australia. (2024). Volunteer with Foodbank. Retrieved from <https://www.foodbank.org.au/support-us/volunteer-with-us/?state=sa>
- Frank, M., Daniel, L., Hays, C. N., Shanahan, M. E., Naumann, R. B., McNaughton Reyes, H. L., & Austin, A. E. (2024). Association of food insecurity with multiple forms of interpersonal and self-directed violence: A systematic review. *Trauma Violence Abuse*, 25(1), 828-845. doi:10.1177/15248380231165689
- Gallegos, D., & Chilton, M. M. (2019). Re-evaluating expertise: Principles for food and nutrition security research, advocacy and solutions in high-income countries. *International Journal of Environmental Research & Public Health*, 16(4), 1-16. doi:10.3390/ijerph16040561
- Gallegos, D., Eivers, A., Sondergeld, P., & Pattinson, C. (2021). Food insecurity and child development: A state-of-the-art review. *International Journal of Environmental Research & Public Health*, 18(17), 2-17. doi:10.3390/ijerph18178990
- Galtung, J. (1969). Violence, peace, and peace research. *Journal of Peace Research*, 6(3), 167-191. Retrieved from https://www.jstor.org/stable/422690?sid=primo&seq=1#metadata_info_tab_contents
- Garver, N. (1970). What violence is. In A. K. Bierman & J. A. Gould (Eds.), *Philosophy for a New Generation*. London, UK: The Macmillan Company.
- Gaudet, S., & Robert, D. (2018). *A journey through qualitative research*. London, UK: SAGE Publications Ltd.
- Good Shepherd. (2023). No interest loans. Retrieved from <https://goodshep.org.au/services/loans/>
- Government of South Australia. (2023). Crime statistics 2022-23. Retrieved from <https://data.sa.gov.au/data/dataset/crime-statistics/resource/a3c26e4d-6a70-4713-b741-546f71854cae?filters=Offence%20Level%20%20Description%3ATHEFT%20AND%20RELAT>

- Grochowska, R. (2014). Specificity of food security concept as a wicked problem. *Journal of Agricultural Science & Technology*, *B4*, 823-831. doi:10.17265/2161-6264/2014.10.010
- Guidi, J., Lucente, M., Sonino, N., & Fava, G. A. (2021). Allostatic load and its impact on health: A systematic review. *Psychotherapy and Psychosomatics*, *90*(1), 11-27. doi:10.1159/000510696
- Gundersen, C., & Ziliak, J. P. (2018). Food insecurity research in the United States: Where we have been and where we need to go. *Applied Economic Perspectives and Policy*, *40*(1), 119-135. doi:10.1093/aep/px058
- Guo, L., Li, F., Tang, G., Yang, B., Yu, N., Guo, F., et al. (2023). Association of ultra-processed foods consumption with risk of cardio-cerebrovascular disease: A systematic review and meta-analysis of cohort studies. *Nutrition, Metabolism & Cardiovascular Diseases*, *33*(11), 2076-2088. doi:10.1016/j.numecd.2023.07.005
- Hagens, V., Dobrow, M. J., & Chafe, R. (2009). Interviewee transcript review: Assessing the impact on qualitative research. *BMC Medical Research Methodology*, *9*, 47-55. doi:10.1186/1471-2288-9-47
- Hall, H., Griffiths, D., & McKenna, L. (2013). From Darwin to Constructivism: The evolution of grounded theory. *Nurse Researcher*, *20*(3), 17-21.
- Hecht, A. A., Biehl, E., Buzogany, S., & Neff, R. A. (2018). Using a trauma-informed policy approach to create a resilient urban food system. *Public Health Nutrition*, *21*(10), 1961-1970. doi:10.1017/S1368980018000198
- Herault, N., & Ribar, D. C. (2016). *Food insecurity and homelessness in the Journeys Home Survey*. Retrieved from online: <https://melbourneinstitute.unimelb.edu.au/>
- Hesse-Biber, S. N., & Leavy, P. (2006). *The practice of qualitative research*. California, USA: SAGE Publications Inc.
- Hill, A. E. C., & Guittar, S. G. (2022). Powerlessness, gratitude, shame, and dignity: Emotional experiences of food pantry clients. *Journal of Hunger & Environmental Nutrition*, 1-17. doi:10.1080/19320248.2022.2052782

- Hoisington, A., Shultz, J. A., & Butkus, S. (2002). Coping strategies and nutrition education needs among food pantry users. *Journal of Nutrition Education and Behavior*, 34(6), 326-333. doi:10.1016/s1499-4046(06)60115-2
- Howe, B. (2018). Henderson's Legacy: revisiting universal basic income. Retrieved from [https://pursuit.unimelb.edu.au/articles/henderson-s-legacy-revisiting-universal-basic-income?ct=t\(\)](https://pursuit.unimelb.edu.au/articles/henderson-s-legacy-revisiting-universal-basic-income?ct=t())
- Huisken, A., Orr, S. K., & Tarasuk, V. (2017). Adults' food skills and use of gardens are not associated with household food insecurity in Canada. *Canadian Journal of Public Health*, 107(6), e526-e532. doi:10.17269/cjph.107.5692
- Ife, J. (2016). *Community development in an uncertain world* (2nd ed.). Cambridge, United Kingdom: Cambridge University Press.
- Insider Intelligence. (2023, February 3, 2022). Buy Now Pay Later report: Market trends in the ecommerce financing, consumer credit, and BNPL industry. Retrieved from <https://www.insiderintelligence.com/insights/buy-now-pay-later-ecommerce-financing-consumer-credit/>
- Interim Economic Inclusion Advisory Committee. (2023). *2023-2024 Report to the Australian Government*. Retrieved from online: <https://www.dss.gov.au/groups-councils-and-committees-economic-inclusion-advisory-committee/interim-economic-inclusion-advisory-committee-2023-24-report>
- Jacknowitz, A., Amirkhanyan, A., Crumbaugh, A. S., & Hatch, M. (2018). Exploring the challenges and coping strategies in households relying on SNAP and food pantries. *Journal of Hunger & Environmental Nutrition*, 14(1-2), 281-295. doi:10.1080/19320248.2018.1555073
- Jamrozik, A. (2009). *Social policy in the post-welfare state: Australian society in the 21st century* (3rd ed.). Frenchs Forest, NSW: Pearson Education Australia.
- Jenke, T. (2018). It seems that Aldi's attempts to reduce food waste aren't quite going as planned. Retrieved from <https://thebrag.com/aldi-attempts-reduce-food-waste-not-going-plan/>
- Joanna Briggs Institute. (2015). *Joanna Briggs Institute Reviewers' Manual: 2015 edition/supplement*. Adelaide, South Australia: The Joanna Briggs Institute.

- Johnson, D. (1996). Poverty lines and the measurement of poverty. *Australian Economic Review*, 29(1), 110-126. Retrieved from <https://onlinelibrary.wiley.com/doi/epdf/10.1111/j.1467-8462.1996.tb00919.x>
- Johnson, K., Drew, C., & Auerswald, C. (2019). Structural violence and food insecurity in the lives of formerly homeless young adults living in permanent supportive housing. *Journal of Youth Studies*, 23(10), 1249-1272. doi:10.1080/13676261.2019.1667492
- Jyoti, D. F., Frongillo, E. A., & Jones, S. J. (2005). Food insecurity affects school children's academic performance, weight gain, and social skills. *American Society for Nutrition*, 135, 2831-2839.
- Kaur, J., Lamb, M. M., & Ogden, C. L. (2015). The association between food insecurity and obesity in children—The National Health and Nutrition Examination Survey. *Journal of the Academy of Nutrition and Dietetics*, 115(5), 751-758. doi:10.1016/j.jand.2015.01.003
- Ke, J., & Ford-Jones, E. L. (2015). Food insecurity and hunger: A review of the effects on children's health and behaviour. *Paediatric Child Health*, 20(2), 89-91.
- Keane, E. (2014). Considering the practical implementation of constructivist grounded theory in a study of widening participation in Irish higher education. *International Journal of Social Research Methodology*, 18(4), 415-431. doi:10.1080/13645579.2014.923622
- Keating, A. (2013). Food security in Australia: The logistics of vulnerability. In Q. Farmar-Bowers, V. Higgins, & J. Millar (Eds.), *Food security in Australia: Challenges and prospects for the future* (pp. 21-34). New York, USA: Springer.
- Keleher, H. (2016). Policy for Health. In H. Keleher & C. MacDougall (Eds.), *Understanding health* (4th ed.). Melbourne, Victoria: Oxford University Press.
- Kempson, K., Keenan, D., Sadani, P., & Adler, A. (2003). Maintaining food sufficiency: Coping strategies identified by limited-resource individuals versus nutrition educators. *Journal of Nutrition Education and Behavior*, 35(4), 179-188. doi:10.1016/s1499-4046(06)60332-1
- Kempson, K., Keenan, D., Sadani, P., Ridlen, S., & Rosato, N. (2002). Food management practices used by people with limited resources to maintain food sufficiency as reported by nutrition educators. *American Dietetic Association. Journal of the American Dietetic Association*, 102(12), 1795-1799.

- Kent, K., Murray, S., Penrose, B., Auckland, S., Godrich, S., Lester, E., & Visentin, D. (2022). Food insecure households faced greater challenges putting healthy food on the table during the COVID-19 pandemic in Australia. *Appetite*, 169. doi:10.1016/j.appet.2021.105815
- Kent, K., Murray, S., Penrose, B., Auckland, S., Visentin, D., Godrich, S., & Lester, E. (2020). Prevalence and socio-demographic predictors of food insecurity in Australia during the COVID-19 Pandemic. *Nutrients*, 12(9), 1-20. doi:10.3390/nu12092682
- Kessler, F., Oechler, M., & Schroder, T. (2019). Charity economy and social work. In F. Kessler, W. Lorenz, H. Otto, & S. White (Eds.), *European social work - A compendium*. online: Columbia University Press.
- Klein, E., Cook, K., Maury, S., & Bowey, K. (2021). An exploratory study examining the changes to Australia's social security system during COVID-19 lockdown measures. *Australian Journal of Social Issues*. doi:10.1002/ajs4.196
- Klein, E., Cook, K., Maury, S., & Bowey, K. (2022). Understanding COVID-19 emergency social security measures as a form of basic income: Lessons from Australia. *Journal of Sociology*. doi:10.1177/14407833221106242
- Kleve, S., Bennett, C. J., Davidson, Z. E., Kellow, N. J., McCaffrey, T. A., O'Reilly, S., . . . Lim, S. (2021). Food insecurity prevalence, severity and determinants in Australian households during the COVID-19 pandemic from the perspective of women. *Nutrients*, 13(12). doi:10.3390/nu13124262
- Kleve, S., Booth, S., Davidson, Z. E., & Palermo, C. (2018). Walking the food security tightrope- Exploring the experiences of low-to-middle income Melbourne households. *International Journal of Environmental Research & Public Health*, 15(10). doi:10.3390/ijerph15102206
- Kleve, S., Davidson, Z. E., Gearon, E., Booth, S., & Palermo, C. (2017). Are low-to-middle-income households experiencing food insecurity in Victoria, Australia? An examination of the Victorian Population Health Survey, 2006-2009. *Australian Journal of Primary Health*, 23(3), 249-256. doi:10.1071/PY16082
- Kleve, S., & Gallegos, D. (2022). *Responding to food relief needs*. Retrieved from online: <https://aifs.gov.au/resources/short-articles/responding-food-relief-needs#this>
- Kleve, S., Greenslade, D., Farrington, M., Funston, S., David, B. S., Xi, J., . . . Srinivasan, K. (2023). Perspectives of food insecurity and service delivery amongst emergency food relief clients

in a regional city in Victoria, Australia. *Health & Social Care in the Community*, 2023, 1-10.
doi:10.1155/2023/8711041

Koc, M. (2013). Discourses of food security. In B. Karaagac (Ed.), *Accumulations, crises, struggles: Capital and labour in contemporary capitalism* (pp. 245-265). Berlin, Germany: LIT Verlag.

Kollmorgen, A. (2020). More than one in ten Australians using Buy Now, Pay Later, just to get by. *Choice*. Retrieved from https://www.choice.com.au/money/credit-cards-and-loans/personal-loans/articles/using-bnpl-just-to-get-by?fbclid=IwAR0gpYi32OwCiiH_Ephf2GC_p9bZqeonvPbuuf2jUAmPI9vMNeZkOKnIG1g

Korstjens, I., & Moser, A. (2018). Series: Practical guidance to qualitative research. Part 4: Trustworthiness and publishing. *European Journal of General Practice*, 24(1), 120-124.
doi:10.1080/13814788.2017.1375092

Kragt, D., & Holtrop, D. (2020). Volunteering research in Australia: A narrative review. *Australian Journal of Psychology*, 71(4), 342-360. doi:10.1111/ajpy.12251

Kurita, R. (2022). Coping with welfare shame: Responses of urban Indigenous and Non-Indigenous Peoples to “mutual obligation” requirements in Australia. *PoLAR: Political and Legal Anthropology Review*, 45(2), 171-185. doi:10.1111/plar.12503

Kwiet-Evans, N. (2022). Supermarket swindlers: 1 in 5 Australians confess to stealing everyday items. Retrieved from <https://www.finder.com.au/australians-confess-to-stealing-everyday-items>

Lane, M. M., Lotfaliany, M., Hodge, A. M., O’Neil, A., Travica, N., Jacka, F. N., . . . Marx, W. (2023). High ultra-processed food consumption is associated with elevated psychological distress as an indicator of depression in adults from the Melbourne Collaborative Cohort Study. *Journal of Affective Disorders*, 335, 57-66. doi:10.1016/j.jad.2023.04.124

Lang, A. (2022a, 11th June, 2022). Dumpster diving hailed as cost-saving alternative lifestyle. *News.com.au*. Retrieved from <https://www.news.com.au/lifestyle/food/dumpster-diving-hailed-as-costsaving-alternative-lifestyle/news-story/deae5b569d992336afcd2f873137b40>

Lang, A. (2022b, 25th May, 2022). Depths Aussies have resorted to to survive as rising cost of living bites. *News.com.au*. Retrieved from <https://www.news.com.au/lifestyle/food/eat/depths->

[aussies-have-resorted-to-to-survive-as-rising-cost-of-living-bites/news-story/1f4044e3824558edf73b164c8cbaf67b](https://www.theguardian.com/australia-news/2022/apr/11/australians-have-resorted-to-to-survive-as-rising-cost-of-living-bites/news-story/1f4044e3824558edf73b164c8cbaf67b)

- Larson, N., Mason, S. M., Bruening, M., Laska, M. N., Hazzard, V. M., & Neumark-Sztainer, D. (2023). Adverse childhood experiences and food insecurity in emerging adulthood: Findings from the EAT 2010-2018 study. *Public Health Nutrition*, 26(11), 2343-2354. doi:10.1017/S1368980023001349
- Lawlis, T., Bowden, M., Lo, J., & Devine, A. (2022). Dietary intake of women from two Australian cities living in poverty. *Journal of Hunger & Environmental Nutrition*, 1-14. doi:10.1080/19320248.2022.2150532
- Lawrence, F. (2020, 11th April, 2020). UK hunger crisis: 1.5m people go whole day without food. *The Guardian*. Retrieved from https://www.theguardian.com/society/2020/apr/11/uk-hunger-crisis-15m-people-go-whole-day-without-food?fbclid=IwAR3HOHkEZZn-lhjWNNMakSZsSNW77srWxpGS_MRLvHGSY9iw_hyyOOvfHo4
- Leah's Pantry. (2024). About Us. Retrieved from <https://leahspantry.org/about-us/>
- Leddy, A. M., Whittle, H. J., Shieh, J., Ramirez, C., Ofotokun, I., & Weiser, S. D. (2020). Exploring the role of social capital in managing food insecurity among older women in the United States. *Social Science & Medicine*, 265. doi:10.1016/j.socscimed.2020.113492
- Lee, R., McGinnis, K., Sallis, J., Castro, C., Chen, A., & Hickmann, S. (1997). Active vs passive methods of recruiting ethnic minority women to a health promotion program. *Annals of Behavioral Medicine*, 19(4), 378-384.
- Lee, S. D., Mahitab, H., Ball, G. D. C., Farmer, A., Maximova, K., & Willows, N. D. (2018). Food insecurity among postsecondary students in developed countries. *British Food Journal*, 120(11), 2660-2680. doi:10.1108/BFJ-08-2017-0450
- Leung, C. W., Laraia, B. A., Feiner, C., Solis, K., Stewart, A. L., Adler, N. E., & Epel, E. S. (2022). The psychological distress of food insecurity: A qualitative study of the emotional experiences of parents and their coping strategies. *Journal of the Academy of Nutrition and Dietetics*, 122(10), 1903-1910 e1902. doi:10.1016/j.jand.2022.05.010
- Leung, C. W., Stewart, A. L., Portela-Parra, E. T., Adler, N. E., Laraia, B. A., & Epel, E. S. (2020). Understanding the psychological distress of food insecurity: A qualitative study of

children's experiences and related coping strategies. *Journal of the Academy of Nutrition and Dietetics*, 120(3), 395-403. doi:10.1016/j.jand.2019.10.012

Levy, D. L. (2015). Discovering grounded theories for social justice. In C. W. P. Johnson, D. C. (Ed.), *Fostering social justice through qualitative inquiry: A methodological guide*. Retrieved from www.ebookcentral.proquest.com

Liamputtong, P. (2007). *Researching the vulnerable: A guide to sensitive research methods*. London, UK: SAGE Publications Ltd.

Liamputtong, P. (2019). Health, illness and well-being: An introduction to social determinants of health. In P. Liamputtong (Ed.), *Social determinants of health*. Victoria, Australia: Oxford University Press.

Lindberg, R., Lawrence, M., & Caraher, M. (2017). Kitchens and pantries—Helping or hindering? The perspectives of emergency food users in Victoria, Australia. *Journal of Hunger and Environmental Nutrition*, 12(1), 26-45. doi:10.1080/19320248.2016.1175397

Lindberg, R., McKenzie, H., Haines, B. C., & McKay, F. H. (2021). An investigation of structural violence in the lived experience of food insecurity. *Critical Public Health*, 33(2), 185-196. doi:10.1080/09581596.2021.2019680

Lindberg, R., McNaughton, S. A., Abbott, G., Pollard, C. M., Yarooh, A. L., & Livingstone, K. M. (2022). The diet quality of food-insecure Australian adults—A nationally representative cross-sectional analysis. *Nutrients*, 14(19). doi:10.3390/nu14194133

Lindberg, R., Whelan, J., Lawrence, M., Gold, L., & Friel, S. (2015). Still serving hot soup? Two hundred years of a charitable food sector in Australia: A narrative review. *Australian and New Zealand Journal of Public Health*, 39(4), 358-365. Retrieved from <http://onlinelibrary.wiley.com/doi/10.1111/1753-6405.12311/abstract>

Liu, Y., Croft, J. B., Chapman, D. P., Perry, G. S., Greenlund, K. J., Zhao, G., & Edwards, V. J. (2013). Relationship between adverse childhood experiences and unemployment among adults from five U.S. states. *Social Psychiatry and Psychiatric Epidemiology*, 48(3), 357-369. doi:10.1007/s00127-012-0554-1

Loibl, C., Bruine de Bruin, W., Summers, B., McNair, S., & Verhallen, P. (2021). Which financial stressors are linked to food insecurity among older adults in the United Kingdom,

Germany, and the Netherlands? An exploratory study. *Food Security*, 14(2), 533-556.
doi:10.1007/s12571-021-01206-3

Loopstra, R. (2020). *Vulnerability to food insecurity since the COVID-19 lockdown: Preliminary report*. Retrieved from London: <https://foodfoundation.org.uk/publications/>

Louie, S., Shi, Y., & Allman-Farinelli, M. (2022). The effects of the COVID-19 pandemic on food security in Australia: A scoping review. *Nutrition & Dietetics*, 79(1), 28-47.
doi:10.1111/1747-0080.12720

Lupton, R. D. (2011). *Toxic charity: How churches and charities hurt those they help (and how to reverse it)*. New York, USA: HarperCollins Publishers.

Luu, J. (2023, 17th October, 2023). Sarah steals from supermarkets when she can't afford to eat. She says it's justified. *SBS News*. Retrieved from <https://www.sbs.com.au/news/the-feed/article/sarah-steals-from-supermarkets-when-she-cant-afford-to-eat-shes-not-alone/0iy2ab585>

Machado, P. P., Steele, E. M., Levy, R. B., da Costa Louzada, M. L., Rangan, A., Woods, J., . . . Monteiro, C. A. (2020). Ultra-processed food consumption and obesity in the Australian adult population. *Nutrition & Diabetes*, 10(1), 1-11. doi:10.1038/s41387-020-00141-0

Maier, S. F., & Seligman, M. E. P. (1976). Learned helplessness: Theory and evidence. *Journal of Experimental Psychology: General*, 105(1), 3-46.

Mandela, N. (2005). *Make poverty history campaign*. Retrieved from http://db.nelsonmandela.org/speeches/pub_view.asp?pg=item&ItemID=NMS760&txtstr=SLAVERY

MarionLIFE. (2020a). Emergency relief. Retrieved from <https://marionlife.org.au/emergency-relief/>

MarionLIFE. (2020b). About us. Retrieved from <https://marionlife.org.au/about-us/>

Marmot, M., & Allen, J. (2014). Social determinants of health equity. *American Journal of Public Health*, 104, S517-S519.

Martin, K., S. (2021). *Reinventing food banks and pantries: New tools to end hunger*. Washington DC, USA: Island Press.

- Mayer, V. L., McDonough, K., Seligman, H., Mitra, N., & Long, J. A. (2016). Food insecurity, coping strategies and glucose control in low-income patients with diabetes. *Public Health Nutrition*, 19(6), 1103-1111. doi:10.1017/S1368980015002323
- McCain, M. N., Mustard, J. F., & Shanker, S. (2007). *Early Years Study 2: Putting science into action*. Toronto, Canada: Council for Early Child Development.
- McIntyre, L., Tougas, D., Rondeau, K., & Mah, C. L. (2015). "In"-sights about food banks from a critical interpretive synthesis of the academic literature. *Agriculture and Human Values*, 33(4), 843-859. doi:10.1007/s10460-015-9674-z
- McIntyre, L., Williams, J. V., Lavorato, D. H., & Patten, S. (2013). Depression and suicide ideation in late adolescence and early adulthood are an outcome of child hunger. *Journal of Affective Disorders*, 150(1), 123-129. doi:10.1016/j.jad.2012.11.029
- McKail, B. (2023). *The poverty premium: The high cost of poverty in Australia*. Retrieved from Canberra: <https://www.anglicare.asn.au/publications/the-poverty-premium/>
- McKay, F. H., Bastian, A., & Lindberg, R. (2021). Exploring the response of the Victorian emergency and community food sector to the COVID-19 pandemic. *Journal of Hunger & Environmental Nutrition*, 1-15. doi:10.1080/19320248.2021.1900974
- McKay, F. H., & Bennett, R. (2023). Examining the relationship between food insecurity and family violence: A systematic narrative review. *Journal of Family Violence*. doi:10.1007/s10896-023-00624-5
- McKay, F. H., Haines, B. C., & Dunn, M. (2019). Measuring and understanding food insecurity in Australia: A systematic review. *International Journal of Environmental Research & Public Health*, 16(3), 2-27. doi:10.3390/ijerph16030476
- McKay, F. H., & Lindberg, R. (2019). The important role of charity in the welfare system for those who are food insecure. *Australian and New Zealand Journal of Public Health*, 43(4), 310-312. doi:10.1111/1753-6405.12916
- McKay, F. H., McKenzie, H., & Lindberg, R. (2022). Stigma and emergency and community food assistance: 'But... beggars can't be choosers'. *Journal of Poverty and Social Justice*, 30(2), 171-191. doi:10.1332/175982721x16461506229420
- McKay, F. H., McKenzie, H., & Lindberg, R. (2023). The coping continuum and acts reciprocity - A qualitative enquiry about household coping with food insecurity in Victoria, Australia.

Australian and New Zealand Journal of Public Health, 47(1).

doi:10.1016/j.anzjph.2022.100004

McKechnie, R., Turrell, G., Giskes, K., & Gallegos, D. (2018). Single-item measure of food insecurity used in the National Health Survey may underestimate prevalence in Australia. *Australian and New Zealand Journal of Public Health*, 42, 389-395. doi:10.1111/1753-6405.12812

McKenzie, H., Lindberg, R., & McKay, F. H. (2023). Navigating the Australian welfare system for those relying on emergency and community food assistance. *Social Policy and Society*, 1-13. doi:10.1017/s147474642200063x

McNaughton, D., Middleton, G., Mehta, K., & Booth, S. (2021). Food charity, shame/ing and the enactment of worth. *Medical Anthropology*, 40(1), 98-109. doi:10.1080/01459740.2020.1776275

Megelus, K. (2023, 27th September, 2023). Supermarket chain Drakes adopts Afterpay - But welfare group warns of 'dangerous debt'. *ABC News*. Retrieved from <https://www.abc.net.au/news/2023-09-27/supermarket-chain-drakes-adopts-afterpay/102905990>

Melbourne Institute. (2021). *Poverty Lines: Australia - June Quarter 2021*. Retrieved from online: <https://melbourneinstitute.unimelb.edu.au>

Melbourne Institute. (2022). *Poverty Lines: Australia - March Quarter 2022*. Retrieved from online: <https://melbourneinstitute.unimelb.edu.au/publications/poverty-lines>

Melbourne Institute. (2023). *Poverty Lines: Australia - March Quarter 2023*. Retrieved from online: <https://melbourneinstitute.unimelb.edu.au/publications/poverty-lines#2023>

Mendes, P. (2020). Conditionalising the unemployed: Why have consecutive Australian governments refused to increase the inadequate Newstart Allowance? *Australian Journal of Social Issues*, 56(1), 42-53. doi:10.1002/ajs4.140

Middleton, G., Mehta, K., McNaughton, D., & Booth, S. (2017). The experiences and perceptions of food banks amongst users in high-income countries: An international scoping review. *Appetite*, 120, 698-708. doi:10.1016/j.appet.2017.10.029

Militao, E. M. A., Salvador, E. M., Silva, J. P., Uthman, O. A., Vinberg, S., & Macassa, G. (2022). Coping strategies for household food insecurity, and perceived health in an urban

community in Southern Mozambique: A qualitative study. *Sustainability*, 14(14).
doi:10.3390/su14148710

Miller, K., & Li, E. (2022). *Foodbank Hunger Report 2022*. Retrieved from online:

<https://reports.foodbank.org.au/foodbank-hunger-report-2022/?state=sa>

Mills, J., Birks, M., & Hoare, K. (2017). Grounded theory. In J. Mills & M. Birks (Eds.), *Qualitative methodology: A practical guide*. London, UK: SAGE Publications.

Monbiot, G. (2016, 15th April). Neoliberalism - the ideology at the root of all our problems. *The Guardian*. Retrieved from

https://www.theguardian.com/books/2016/apr/15/neoliberalism-ideology-problem-george-monbiot?fbclid=IwAR3HwrlDyA6AovHRMqcaHoZ9tf0xqgCXZSBetctklDBTVml1-Gt4r9yb_Ys

Monteiro, C. A., & Cannon, G. (2019). The role of the transnational ultra-processed food industry in the pandemic of obesity and its associated diseases: Problems and solutions. *World Nutrition*, 10(1), 89-99.

Moraes, C., McEachern, M. G., Gibbons, A., & Scullion, L. (2021). Understanding lived experiences of food insecurity through a paraliminality lens. *Sociology*, 55(6), 1169-1190.
doi:10.1177/00380385211003450

Morphett Vale Seventh-day Adventist Church & Community Centre. (2017). Our vision. Retrieved from <https://morphettvalesda.com/who-we-are/vision/>

Morris, A., & Wilson, S. (2014). Struggling on the Newstart unemployment benefit in Australia: The experience of a neoliberal form of employment assistance. *The Economic and Labour Relations Review*, 25(2), 202-221. doi:10.1177/1035304614533462

Morrison, S. (2020). Update on coronavirus measures [Press release]. Retrieved from <https://pmtranscripts.pmc.gov.au/release/transcript-43970>

Mossenson, S., Giglia, R., Pulker, C. E., Chester, M., McStay, C., & Pollard, C. M. (2024). Evidence for initiating food safety policy: An assessment of the quality and safety of donated food at an Australian food bank. *Food Policy*, 123. doi:10.1016/j.foodpol.2023.102589

Moubarac, J. C., Martins, A. P., Claro, R. M., Levy, R. B., Cannon, G., & Monteiro, C. A. (2013). Consumption of ultra-processed foods and likely impact on human health. Evidence from Canada. *Public Health Nutrition*, 16(12), 2240-2248. doi:10.1017/S1368980012005009

- Mousa, T. Y., & Freeland-Graves, J. H. (2019). Impact of food pantry donations on diet of a low-income population. *International Journal of Food Sciences and Nutrition*, 70(1), 78-87. doi:10.1080/09637486.2018.1466271
- Munn, Z., Peters, M. D. J., Stern, C., Tufanaru, C., McArthur, A., & Aromataris, E. (2018). Systematic review or scoping review? Guidance for authors when choosing between a systematic or scoping review approach. *BMC Medical Research Methodology*, 18(1), 143. doi:10.1186/s12874-018-0611-x
- Munoz, K., Wagner, M., Pauli, F., Christ, J., & Reese, G. (2021). Knowledge and behavioral habits to reduce mycotoxin dietary exposure at household level in a cohort of German University Students. *Toxins*, 13(11), 1-14. doi:10.3390/toxins13110760
- Musolino, C., Baum, F., Womersley, R., van Eyk, H., Freeman, T., Flavel, J., & Earl, C. (2020). *SA: The Heaps Unfair State: Why have health inequities increased in South Australia and how can this trend be reversed? Summary Report*. Retrieved from Adelaide, South Australia: <https://www.sacoss.org.au/sa-heaps-unfair-state>
- Myers, E. (2022, 25th July, 2022). As the cost-of-living crisis continues, dumpster diving has become a lifesaver for some families doing it tough. *ABC News*. Retrieved from <https://www.abc.net.au/news/2022-07-25/dumpster-diving-food-waste-cost-of-living/101261506>
- National Debt Helpline. (2020). Risks of using Buy Now Pay Later. Retrieved from <https://ndh.org.au/debt-problems/buy-now-pay-later/risks-of-using-buy-now-pay-later/>
- Neter, J. E., Dijkstra, S. C., Visser, M., & Brouwer, I. A. (2016). Dutch food bank parcels do not meet nutritional guidelines for a healthy diet. *British Journal of Nutrition*, 116(3), 526-533. doi:10.1017/S0007114516002087
- Norman, J. S., & Snape, J. (2021). Prime Minister argues \$25 per week increase to JobSeeker is 'appropriate'. *ABC News*. Retrieved from [https://www.abc.net.au/news/2021-02-23/jobseeker-recipients-in-line-for-extra-\\$25-a-week/13182498](https://www.abc.net.au/news/2021-02-23/jobseeker-recipients-in-line-for-extra-$25-a-week/13182498)
- Nosratabadi, S., Khazami, N., Abdallah, M. B., Lackner, Z., S, S. B., Mosavi, A., & Mako, C. (2020). Social capital contributions to food security: A comprehensive literature review. *Foods*, 9(11), 1-17. doi:10.3390/foods9111650

- Nothling, J., Malan-Muller, S., Abrahams, N., Hemmings, S. M. J., & Seedat, S. (2020). Epigenetic alterations associated with childhood trauma and adult mental health outcomes: A systematic review. *The World Journal of Biological Psychiatry*, 21(7), 493-512. doi:10.1080/15622975.2019.1583369
- O'Connell, J. (2017). *A timeline of Australian food*. Australia: New South Publishing.
- Office for Victims of Crime Training and Technical Assistance Center. (2024). Vicarious trauma. Retrieved from <https://www.ovcttac.gov/vicarioustrauma/?nm=sfa&ns=vt>
- Office of the High Commissioner for Human Rights (UN Human Rights). (1966). *International Covenant on Economic, Social and Cultural Rights*. Retrieved from <https://www.ohchr.org/en/professionalinterest/pages/cescr.aspx>
- Office of the High Commissioner for Human Rights (UN Human Rights). (2014). Status of Ratification (interactive dashboard). Retrieved from <https://indicators.ohchr.org/>
- Olive, J. L. (2014). Reflecting on the tensions between emic and etic perspectives in life history research: Lessons learned. *Forum: Qualitative Social Research*, 15(2).
- Oxford English Dictionary. (2021). Orthodox. Retrieved from <https://www.lexico.com/definition/orthodox>
- OzHarvest. (2020). What we do. Retrieved from <https://www.ozharvest.org/what-we-do/>
- Papan, A. S., & Clow, B. (2015). The food insecurity—obesity paradox as a vicious cycle for women: Inequalities and health. *Gender & Development*, 23(2), 299-317. doi:10.1080/13552074.2015.1053204
- Park, S., & Kim, K. (2018). Food acquisition through private and public social networks and its relationship with household food security among various socioeconomic statuses in South Korea. *Nutrients*, 10(2). doi:10.3390/nu10020121
- Parliament of South Australia. (1936). *Civil Liability Act 1936*. Retrieved from Adelaide, South Australia: <https://www.legislation.sa.gov.au/lz?path=/c/a/civil%20liability%20act%201936>
- Parsell, C., & Clarke, A. (2022). Charity and shame: Towards reciprocity. *Social Problems*, 69(2), 436-452. doi:10.1093/socpro/spaa057
- Pearlman, L. A., & Caringi, J. (2009). Living and working self-reflectively to address vicarious trauma. In C. A. Courtois & J. D. Ford (Eds.), *Treating complex traumatic stress disorder*. New York, USA: The Guilford Press.

- Pettman, T. L., Dent, C., Goodwin-Smith, I., & Bogomolova, S. (2022). *Evaluation of the social supermarket model across three new sites*. Retrieved from online:
<https://researchnow.flinders.edu.au/en/publications/evaluation-of-the-social-supermarket-model-across-three-new-sites>
- Pettman, T. L., Pontifex, K., Williams, C. P., Wildgoose, D., Dent, C., Fairbrother, G., . . . Bogomolova, S. (2023). Part discount grocer, part social connection: Defining elements of social supermarkets. *Nonprofit and Voluntary Sector Quarterly*, 1-23.
doi:10.1177/08997640231210463
- Pettman, T. L., Williams, C., Booth, S., Wildgoose, D., Pollard, C. M., Coveney, J., . . . Goodwin-Smith, I. (2022). A food relief charter for South Australia-Towards a shared vision for pathways out of food insecurity. *International Journal of Environmental Research & Public Health*, 19(12). doi:10.3390/ijerph19127080
- Pineau, C., Williams, P. L., Brady, J., Waddington, M., & Frank, L. (2021). Exploring experiences of food insecurity, stigma, social exclusion, and shame among women in high-income countries: A narrative review. *Canadian Food Studies / La Revue canadienne des études sur l'alimentation*, 8(3). doi:10.15353/cfs-rcea.v8i3.473
- Pollard, C., & Booth, S. (2019). Food insecurity and hunger in rich countries-it is time for action against inequality. *International Journal of Environmental Research & Public Health*, 16(10). doi:10.3390/ijerph16101804
- Pollard, C. M., Begley, A., & Landrigan, T. (2016). The rise of food inequality in Australia. In M. Caraher & J. Coveney (Eds.), *Food Poverty and Insecurity: International Food Inequalities* (pp. 89-103). Switzerland: Springer International Publishing.
- Pollard, C. M., Booth, S., Goodwin-Smith, I., & Coveney, J. (2017). *South Australian food relief recipients' perspectives on services*. Retrieved from Adelaide, South Australia:
https://dhs.sa.gov.au/_data/assets/pdf_file/0007/62764/Client-Perspectives-Food-Relief-SA-2017-A18293835.pdf
- Pollard, C. M., Booth, S., Jancey, J., Mackintosh, B., Pulker, C. E., Wright, J. L., . . . Kerr, D. A. (2019). Long-term food insecurity, hunger and risky food acquisition practices: a cross-sectional study of food charity recipients in an Australian capital city. *International Journal of Environmental Research & Public Health*, 16(15), 1-16. doi:10.3390/ijerph16152749

- Pollard, C. M., Booth, S., Louth, J., Mackenzie, C., & Goodwin-Smith, I. (2020). "I'd be sleeping in the park, I reckon": Lived experience of using financial counselling services in South Australia*. *Economic Papers*, 39(4), 353-366. doi:10.1111/1759-3441.12298
- Pollard, C. M., Mackintosh, B., Campbell, C., Kerr, D., Begley, A., Jancey, J., . . . Booth, S. (2018). Charitable food systems' capacity to address food insecurity: An Australian capital city audit. *International Journal of Environmental Research & Public Health*, 15(6). doi:10.3390/ijerph15061249
- Pourmotabbed, A., Moradi, S., Babaei, A., Ghavami, A., Mohammadi, H., Jalili, C., . . . Miraghajani, M. (2020). Food insecurity and mental health: a systematic review and meta-analysis. *Public Health Nutrition*, 23(10), 1778-1790. doi:10.1017/S136898001900435X
- Powell, R., Do, A., Gengatharen, D., Yong, J., & Gengatharen, R. (2023). The relationship between responsible financial behaviours and financial wellbeing: The case of Buy-Now-Pay-Later. *Accounting & Finance*. doi:10.1111/acfi.13100
- Powers, A., Langhinrichsen-Rohling, R. A., Sonu, S. C., Haynes, T., & Lathan, E. C. (2023). Brief trauma-informed care training to enhance health care providers' knowledge, comfort, and implementation of trauma-informed care in primary care clinics: A pilot effectiveness study. *Psychological Services*. doi:10.1037/ser0000823
- Prager, R. A. (2014). Determinants of the locations of alternative financial service providers. *Review of Industrial Organization*, 45(1), 21-38. doi:10.1007/s11151-014-9421-4
- Purdam, K., Garratt, E. A., & Esmail, A. (2016). Hungry? Food insecurity, social stigma and embarrassment in the UK. *Sociology*, 50(6), 1072-1088. doi:10.1177/0038038515594092
- Quide, Y., Cohen-Woods, S., O'Reilly, N., Carr, V. J., Elzinga, B. M., & Green, M. J. (2018). Schizotypal personality traits and social cognition are associated with childhood trauma exposure. *British Journal of Clinical Psychology*, 57(4), 397-419. doi:10.1111/bjc.12187
- Raise the Rate. (2019). About our Campaign. Retrieved from <https://raisetherate.org.au/about/>
- Raj, V. A., Jasrotia, S. S., & Rai, S. S. (2023). Intensifying materialism through Buy-Now Pay-Later (BNPL): examining the dark sides. *International Journal of Bank Marketing*. doi:10.1108/ijbm-08-2022-0343

- Ramsey, R., Giskes, K., Turrell, G., & Gallegos, D. (2011). Food insecurity among Australian children: Potential determinants, health and developmental consequences. *Journal of Child Health Care*, 15(4), 401-416. doi:10.1177/1367493511423854
- Ramsey, R., Giskes, K., Turrell, G., & Gallegos, D. (2012). Food insecurity among adults residing in disadvantaged urban areas: Potential health and dietary consequences. *Public Health Nutrition*, 15(2), 227-237. doi:10.1017/S1368980011001996
- Remen, R. N. (2010). *Kitchen table wisdom: Stories that heal*. Sydney, Australia: Pan Macmillan Australia Pty Ltd.
- Reserve Bank of Australia. (2022). Cash Rate Target. Retrieved from <https://www.rba.gov.au/statistics/cash-rate/>
- Reutter, L., Stewart, M., Veenstra, G., Love, R., Raphael, D., & Makwarimba, E. (2009). "Who do they think we are, anyway?": Perceptions of and responses to poverty stigma. *Qualitative Health Research*, 19(3), 297-311. doi:10.1177/1049732308330246
- Richards, C., Kjærnes, U., & Vik, J. (2016). Food security in welfare capitalism: Comparing social entitlements to food in Australia and Norway. *Journal of Rural Studies*, 43, 61-70. doi:10.1016/j.jrurstud.2015.11.010
- Riches, G. (2018). *Food bank nations: Poverty, corporate charity and the right to food*. Oxon, UK: Routledge.
- Right to Food. (n.d.). About the coalition. Retrieved from <https://righttofood.org.au/about/>
- Ritchie, D. A. (2015). *Doing oral history* (3rd ed.). New York, USA: Oxford University Press.
- Rizvi, A., Enns, A., Gergyek, L., & Kristjansson, E. (2022). More food for thought: A follow-up qualitative study on experiences of food bank access and food insecurity in Ottawa, Canada. *BMC Public Health*, 22(1), 586. doi:10.1186/s12889-022-13015-0
- Roberts, C., Darroch, F., Giles, A., & van Bruggen, R. (2022). You're carrying so many people's stories: Vicarious trauma among fly-in fly-out mental health service providers in Canada. *International Journal of Qualitative Student Health Well-being*, 17(1), 2040089. doi:10.1080/17482631.2022.2040089
- Rondeau, S., Stricker, S. M., Kozachenko, C., & Parizeau, K. (2020). Understanding motivations for volunteering in food insecurity and food upcycling projects. *Social Sciences*, 9(27), 2-17. doi:10.3390/socsci9030027

- Rosa, T. L., Ortolano, S. E., & Dickin, K. L. (2018). Remembering food insecurity: Low-income parents' perspectives on childhood experiences and implications for measurement. *Appetite*, 121, 1-8. doi:10.1016/j.appet.2017.10.035
- Rowlands, J. (2021). Interviewee transcript review as a tool to improve data quality and participant confidence in sensitive research. *International Journal of Qualitative Methods*, 20. doi:10.1177/16094069211066170
- Royer, M. F., Ojinnaka, C. O., Zhang, X., Thornton, A. G., Blackhorse, K., & Bruening, M. (2022). Food insecurity and adverse childhood experiences: A systematic review. *Nutrition Reviews*, 80(10), 2089-2099. doi:10.1093/nutrit/nuac029
- Russell, G., & Lightman, S. (2019). The human stress response. *Nature Reviews - Endocrinology*, 15(9), 525-534. doi:10.1038/s41574-019-0228-0
- Rylko-Bauer, B., & Farmer, P. (2016). Structural violence, poverty, and social suffering. In D. Brady & L. M. Burton (Eds.), *The Oxford Handbook of the Social Science of Poverty*. USA: Oxford University Press.
- SA Community. (2022a). Seventh-day Adventist Church - Morphett Vale. Retrieved from [https://sacommunity.org/org/205463-Seventh-day Adventist Church - Morphett Vale](https://sacommunity.org/org/205463-Seventh-day_Adventist_Church_-_Morphett_Vale)
- SA Community. (2022b). ADRA Community Pantry - Morphett Vale. Retrieved from [https://sacommunity.org/org/236873-ADRA Community Pantry - Morphett Vale](https://sacommunity.org/org/236873-ADRA_Community_Pantry_-_Morphett_Vale)
- SA Health. (2019a). Food poisoning. Retrieved from <https://www.sahealth.sa.gov.au/wps/wcm/connect/public+content/sa+health+internet/health+topics/health+conditions+prevention+and+treatment/poisons/food+poisoning/food+poisoning+-+including+symptoms+treatment+and+prevention>
- SA Health. (2019b). Shopping and storing of food at home. Retrieved from <https://www.sahealth.sa.gov.au/wps/wcm/connect/public+content/sa+health+internet/health+topics/health+conditions+prevention+and+treatment/food+safety/keeping+food+safe/shopping+and+storing+of+food+at+home>
- SA Health. (2019c). Preventing food poisoning at home. Retrieved from <https://www.sahealth.sa.gov.au/wps/wcm/connect/public+content/sa+health+internet/health+topics/health+conditions+prevention+and+treatment/food+safety/keeping+food+safe/preventing+food+poisoning+at+home>

- Schwartz, N., Buliung, R., & Wilson, K. (2019). Disability and food access and insecurity: A scoping review of the literature. *Health Place*, 57, 107-121. doi:10.1016/j.healthplace.2019.03.011
- Scottish Government. (2022). *Using intersectionality to understand structural inequality in Scotland: Evidence synthesis*. Retrieved from online:
<https://www.gov.scot/publications/using-intersectionality-understand-structural-inequality-scotland-evidence-synthesis/documents/>
- Seivwright, A. N., Callis, Z., & Flatau, P. (2020). Food insecurity and socioeconomic disadvantage in Australia. *International Journal of Environmental Research & Public Health*, 17(2). doi:10.3390/ijerph17020559
- Seligman, H. K., & Berkowitz, S. A. (2019). Aligning programs and policies to support food security and public health goals in the United States. *Annual Review of Public Health*, 40, 319-337. doi:10.1146/annurev-publhealth-040218-044132
- Seligman, H. K., Laraia, B. A., & Kushel, M. B. (2010). Food insecurity is associated with chronic disease among low-income NHANES participants. *The Journal of Nutrition*, 140(2), 304-310. doi:10.3945/jn.109.112573
- Services Australia. (2023a). Mutual obligation requirements. Retrieved from
<https://www.servicesaustralia.gov.au/mutual-obligation-requirements>
- Services Australia. (2023b). JobSeeker payment: How much you can get. Retrieved from
<https://www.servicesaustralia.gov.au/how-much-jobseeker-payment-you-can-get?context=51411>
- Shepherd, T. (2023, 24th November, 2023). Deaths of four women in South Australia prompt calls for royal commission into domestic violence. *The Guardian*. Retrieved from
<https://www.theguardian.com/australia-news/2023/nov/24/south-australia-deaths-women-domestic-violence-rally-parliament-house-royal-commission>
- Shonkoff, J. P., & Garner, A. S. (2012). The lifelong effects of early childhood adversity and toxic stress. *Pediatrics*, 129(1), e232-246. doi:10.1542/peds.2011-2663
- Silvasti, T. (2015). Food aid – normalising the abnormal in Finland. *Social Policy and Society*, 14(3), 471-482. doi:10.1017/s1474746415000123

- Skattebol, J. (2011). "When the money's low": Economic participation among disadvantaged young Australians. *Children and Youth Services Review*, 33(4), 528-533.
doi:10.1016/j.childyouth.2010.05.007
- Soederberg, S. (2014). Debtfarism and the payday loan industry. In *Debtfare states and the poverty industry: Money, discipline and the surplus population*. online: Taylor & Francis Group.
- Standing Committee on Agriculture. (2023). *Australian food story: Feeding the nation and beyond*. Retrieved from Canberra, Australia:
https://www.aph.gov.au/Parliamentary_Business/Committees/House/Agriculture/FoodsecurityinAustrali/Report
- Stettin, S., Pirie, C., & McKendrick, J. H. (2022). Keeping the baby when we throw out the bathwater: Social supermarkets for community development. *Community Development Journal*, 57(3), 399-403. doi:10.1093/cdj/bsab057
- Stewart, E. (2020). As thousands lose their jobs due to coronavirus, demand for Foodbank doubles. ABC News. Retrieved from https://www.abc.net.au/news/2020-04-29/coronavirus-foodbank-covid-19-poverty-unemployment/12180056?fbclid=IwAR1EXbQVjjAA8KgsqoR6zHb4xXvTqxXxExWXcoH3o8GP_WJPpHbdFtlygDE
- Stinson, E. J., Votruba, S. B., Venti, C., Perez, M., Krakoff, J., & Gluck, M. E. (2018). Food insecurity is associated with maladaptive eating behaviors and objectively measured overeating. *Obesity*, 26(12), 1841-1848. doi:10.1002/oby.22305
- Stone, T. H. (2003). The invisible vulnerable. *Currents in Contemporary Ethics*, 31(1), 149-153.
- Stuber, J. M., Middel, C. N. H., Mackenbach, J. D., Beulens, J. W. J., & Lakerveld, J. (2020). Successfully recruiting adults with a low socioeconomic position into community-based lifestyle programs: A qualitative study on expert opinions. *International Journal of Environmental Research & Public Health*, 17(8). doi:10.3390/ijerph17082764
- Styklunas, G. M. (2023). Addressing food insecurity and intersectional health-related social needs at a federally qualified health centre during the COVID-19 pandemic: A case study. *Local Environment*, 28(2), 157-168. doi:10.1080/13549839.2022.2162027

- Sun, J., Knowles, M., Patel, F., Frank, D. A., Heeren, T. C., & Chilton, M. (2016). Childhood adversity and adult reports of food insecurity among households with children. *American Journal of Preventive Medicine*, 50(5), 561-572. doi:10.1016/j.amepre.2015.09.024
- Sydor, A. (2012). Conducting research into hidden or hard-to-reach populations. *Nurse Researcher*, 20(3), 33-37.
- Tabe-Ojong, M. P. J., Gebrekidan, B. H., Nshakira-Rukundo, E., Borner, J., & Heckelei, T. (2022). COVID-19 in rural Africa: Food access disruptions, food insecurity and coping strategies in Kenya, Namibia, and Tanzania. *Agricultural Economics*, 53(5), 719-738. doi:10.1111/agec.12709
- Tame, G. (2021). 'Share your truth, it is your power': Grace Tame's address to the National Press Club. *The Guardian*. Retrieved from <https://www.theguardian.com/commentisfree/2021/mar/04/share-your-truth-it-is-your-power-grace-tames-address-to-the-national-press-club>
- Tarasuk, V. (2017). *Implications of a basic income guarantee for household food insecurity* (24). Retrieved from <https://www.northernpolicy.ca/bigandfoodinsecurity>
- Tarasuk, V., St-Germain, A.-A. F., & Loopstra, R. (2019). The relationship between food banks and food insecurity: Insights from Canada. *Voluntas*, 1-12. doi:http://dx.doi.org/10.1007/s11266-019-00092-w
- Taylor, E. (2016). Supermarket self-checkouts and retail theft: The curious case of the SWIPERS. *Criminology & Criminal Justice*, 16(5), 552-567. doi:10.1177/1748895816643353
- Taylor, E. (2018). How shoplifters justify theft at supermarket self-service checkouts. *news.com.au*. Retrieved from <https://www.news.com.au/technology/innovation/inventions/how-shoplifters-justify-theft-at-supermarket-selfservice-checkouts/news-story/1a64c0c6bd94243c162a4072696f2f41>
- Teasdale, S. B., Muller-Stierlin, A. S., Ruusunen, A., Eaton, M., Marx, W., & Firth, J. (2023). Prevalence of food insecurity in people with major depression, bipolar disorder, and schizophrenia and related psychoses: A systematic review and meta-analysis. *Critical Reviews in Food Science and Nutrition*, 63(20), 4485-4502. doi:10.1080/10408398.2021.2002806

- Temple, J. B. (2018). The association between stressful events and food insecurity: Cross-Sectional evidence from Australia. *International Journal of Environmental Research & Public Health*, 15(11). doi:10.3390/ijerph15112333
- Temple, J. B., Booth, S., & Pollard, C. M. (2019). Social Assistance payments and food insecurity in Australia: Evidence from the Household Expenditure Survey. *International Journal of Environmental Research & Public Health*, 16(3). doi:10.3390/ijerph16030455
- Thomas, V., Darab, S., & Hartman, Y. (2016). Gatekeepers, sole mothers and housing in a regional New South Wales shire. *Rural Society*, 25(3), 240-255. doi:10.1080/10371656.2016.1255474
- Thornton, L., Batterham, P. J., Fassnacht, D. B., Kay-Lambkin, F., Caelear, A. L., & Hunt, S. (2016). Recruiting for health, medical or psychosocial research using Facebook: Systematic review. *Internet Interventions*, 4, 72-81. doi:10.1016/j.invent.2016.02.001
- Tilahun, N., Persky, J., Shin, J., & Zellner, M. (2021). Childhood poverty, extended family and adult poverty. *Journal of Poverty*, 1-14. doi:10.1080/10875549.2021.2010860
- Treasury. (2022). *Regulating Buy Now, Pay Later in Australia*. Retrieved from online: <https://treasury.gov.au/consultation/c2022-338372>
- Tripodi, E., Jarman, R., Morell, R., & Teasdale, S. B. (2022). Prevalence of food insecurity in community-dwelling people living with severe mental illness. *Nutrition & Dietetics*, 79(3), 374-379. doi:10.1111/1747-0080.12706
- Tse, C., & Tarasuk, V. (2008). Nutritional assessment of charitable meal programmes serving homeless people in Toronto. *Public Health Nutrition*, 11(12), 1296-1305. doi:10.1017/S1368980008002577
- Tuominen, M. C., & Thompson, E. L. (2015). "There was no money left to save": Financial literacy and the lives of low-income people. *Journal of Progressive Human Services*, 26(2), 148-165. doi:10.1080/10428232.2015.1018104
- Turkkan, C. (2021). Who is "deserving" of aid? Subject-formation in Istanbul's food banks. *Food, Culture & Society*, 24(3), 464-480.
- Turkkan, C. (2023). Screening for eligibility: Access and resistance in Istanbul's food banks. *Journal of Cultural Economy*, 1-17. doi:10.1080/17530350.2023.2176339

- Turnbull, L., & Bhakta, D. (2016). Is UK emergency food nutritionally adequate? A critical evaluation of the nutritional content of UK food bank parcels. *Proceedings of the Nutrition Society*, 75(OCE1). doi:10.1017/s0029665115004413
- United Nations. (1948). *Universal Declaration of Human Rights (UDHR)*. Retrieved from <https://www.un.org/en/universal-declaration-human-rights/>
- United Nations. (2020). Ensuring food security in the Era of COVID-19. Retrieved from <https://www.un.org/sustainabledevelopment/blog/2020/04/ensuring-food-security-covid-19/>
- United Nations. (2023). Progress and info (SDG Goal #2). Retrieved from https://sdgs.un.org/goals/goal2#progress_and_info
- United Nations. (n.d.-a). Goal 2 - End hunger, achieve food security and improved nutrition and promote sustainable agriculture. Retrieved from <https://sdgs.un.org/goals/goal2>
- United Nations. (n.d.-b). Sustainable Development Goals. Retrieved from <https://sustainabledevelopment.un.org/?menu=1300>
- United States Department of Agriculture. (2020). Measurement: What is food security? Retrieved from <https://www.ers.usda.gov/topics/food-nutrition-assistance/food-security-in-the-us/measurement/>
- Uniting Communities. (2022). *Uniting Communities Incorporated and controlled entities financial report 30 June 2022*. Retrieved from online: <https://www.acnc.gov.au/charity/charities/46541e89-3aaf-e811-a962-000d3ad24a0d/documents/>
- Uniting Communities. (2023). *Uniting Communities Incorporated and controlled entities financial report 30 June 2023*. Retrieved from online: <https://www.acnc.gov.au/charity/charities/46541e89-3aaf-e811-a962-000d3ad24a0d/documents/>
- Urquhart, C. (2013). *Grounded theory for qualitative research: A practical guide*. London, UK: SAGE Publications Ltd.
- Vance, D. (1995). Barriers and aids in conducting research with older homeless individuals. *Psychological Reports*, 76(3), 783-786.

- Velardo, S., & Elliott, S. (2018). Prioritising doctoral students' wellbeing in qualitative research. *The Qualitative Report*, 23(2), 311-318.
- Velardo, S., & Elliott, S. (2021). The emotional wellbeing of doctoral students conducting qualitative research with vulnerable populations. *The Qualitative Report*, 26(2), 1522-1545. doi:10.46743/2160-3715/2021.4421
- Velardo, S., Pollard, C. M., Shipman, J., & Booth, S. (2021). How do disadvantaged children perceive, understand and experience household food insecurity? *International Journal of Environmental Research and Public Health*, 18(8), 2-16. doi:10.3390/ijerph18084039
- Velardo, S., Stevens, K., Watson, M., Pollard, C., Coveney, J., Shipman, J., & Booth, S. (2024). How do children perceive and understand the experience of household food insecurity? A narrative review of the literature. *British Food Journal*. doi:10.1108/bfj-07-2023-0600
- Veritas Health Innovation. (n.d.). Covidence Systematic Review Software. Melbourne, Australia: Veritas Health Innovation. Retrieved from www.covidence.org
- Vinegar, R., Parker, P., & McCourt, G. (2016). More than a response to food insecurity: Demographics and social networks of urban dumpster divers. *Local Environment*, 21(2), 241-253. doi:10.1080/13549839.2014.943708
- Volunteering Australia. (2022). *Key volunteering statistics*. Retrieved from online: <https://www.volunteeringaustralia.org/resources/key-facts-2/>
- Wahlqvist, M. (2011). Food security, nutrition in transition and sustainable environments. In M. Wahlqvist (Ed.), *Food & nutrition: Food and health systems in Australia and New Zealand* (3rd ed., pp. 59-79). New South Wales: Allen & Unwin.
- Walls, H. L. (2018). Wicked problems and a 'wicked' solution. *Global Health*, 14(1), 34. doi:10.1186/s12992-018-0353-x
- Waterman, E. A., McLain, M., Zulfiqar, H., Ahmar Qadeer, T., & Ciavoi, S. M. (2023). The link between intimate partner violence and food insecurity: A review of quantitative and qualitative studies. *Trauma Violence Abuse*. doi:10.1177/15248380231186152
- Watson, M., Booth, S., Velardo, S., & Coveney, J. (2022). The orthodox and unorthodox food acquisition practices and coping strategies used by food insecure adults: A scoping review. *Journal of Hunger & Environmental Nutrition*, 1-16. doi:10.1080/19320248.2021.2021121

- Watson, M., Booth, S., Velardo, S., & Coveney, J. (2023). The “who” and “why” of dumpster diving for food in wealthy industrialised countries – An international scoping review. *British Food Journal*, 125(10), 3784-3799. doi:10.1108/bfj-01-2023-0014
- Watts, L., & Hodgson, D. (2019). *Social justice theory and practice for social work: Critical and Philosophical Perspectives*. Singapore: Springer Nature.
- Weibel, W. W. (1990). Identifying and gaining access to hidden populations. In E. Y. Lambert (Ed.), *The collection and interpretation of data from hidden populations*. USA: U.S. Department of Health & Human Services, Public Health Service.
- Weiser, S. D., Leiter, K., Bangsberg, D. R., Butler, L. M., Korte, F. P.-d., Hlanze, Z., . . . Heisler, M. (2007). Food insufficiency is associated with high-risk sexual behavior among women in Botswana and Swaziland: e260. *PLoS Medicine*, 4(10), 1589-1597; discussion 1598. doi:10.1371/journal.pmed.0040260
- Wellbeing SA. (2019). *South Australian Population Health Survey - 2019 Annual Report (Adults)*. Retrieved from online: <https://www.wellbeingsa.sa.gov.au/evidence-data/sa-population-health-survey>
- Whittle, H. J., Palar, K., Hufstedler, L. L., Seligman, H. K., Frongillo, E. A., & Weiser, S. D. (2015). Food insecurity, chronic illness, and gentrification in the San Francisco Bay Area: An example of structural violence in United States public policy. *Social Science and Medicine*, 143, 154-161. doi:10.1016/j.socscimed.2015.08.027
- Whittle, H. J., Palar, K., Napoles, T., Hufstedler, L. L., Ching, I., Hecht, F. M., . . . Weiser, S. D. (2015). Experiences with food insecurity and risky sex among low-income people living with HIV/AIDS in a resource-rich setting. *Journal of the International AIDS Society*, 18(1). doi:10.7448/IAS.18.1.20293
- WHO. (2024). Violence against women. Retrieved from <https://www.who.int/news-room/fact-sheets/detail/violence-against-women>
- Wilkinson, R., & Marmot, M. (2003). *Social determinants of health: The solid facts*. Retrieved from Copenhagen, Denmark: http://www.euro.who.int/_data/assets/pdf_file/0005/98438/e81384.pdf
- Willis, J. (2007). *Foundations of Qualitative research: Interpretive and critical approaches*. Online: SAGE Research Methods.

- Wills, B. (2017). Eating at the limits: Barriers to the emergence of social enterprise initiatives in the Australian emergency food relief sector. *Food Policy*, 70, 62-70.
doi:10.1016/j.foodpol.2017.06.001
- Wilson, J. (1997). Australia: Lucky country/hungry silence. In G. Riches (Ed.), *First world hunger: Food security and welfare politics*. New York, USA: St Martin's Press Inc.
- Wingrove, K., Barbour, L., & Palermo, C. (2016). Exploring nutrition capacity in Australia's charitable food sector. *Nutrition & Dietetics*. doi:10.1111/1747-0080.12284
- Wolfson, J. A., & Leung, C. W. (2020). Food insecurity and COVID-19: Disparities in early effects for US adults. *Nutrients*, 12(6). doi:10.3390/nu12061648
- Wood, D. K., Shultz, J. A., Edlefsen, M., & Butkus, S. N. (2006). Food coping strategies used by food pantry clients at different levels of household food security status. *Journal of Hunger and Environmental Nutrition*, 1(3), 45-68. doi:10.1300/J477v01n03_04
- Woolworths Group Limited. (2023). *2023 Annual Report*. Retrieved from online:
<https://www.woolworthsgroup.com.au/content/dam/wwg/investors/reports/2023/f23-full-year/Woolworths%20Group%202023%20Annual%20Report.pdf>
- Zorbas, C., Browne, J., Chung, A., Peeters, A., Booth, S., Pollard, C., . . . Backholer, K. (2023). Shifting the social determinants of food insecurity during the COVID-19 pandemic: the Australian experience. *Food Security*, 15(1), 151-170. doi:10.1007/s12571-022-01318-4