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Much of her current work is related to the experiences of food insecurity amongst a diverse range of populations, where she seeks to understand the phenomenon better and explore new ways to describe it. Dr McKay also teaches into the undergraduate and post graduate health promotion and public health courses.

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3216 Connect Op Shop
Bellarine Living & Learning Centre
Bethany Community Support
CatholicCare
Christ Church Community Meals Program
Diversitat Financial Counselling Program
Encompass Community Services
Geelong Food Relief Centre

Lazarus Community Service Geelong
OneCare Geelong
Portarlington Food Assistance Program
St Mary's Pantry
St. Vincent De Paul Society
The Outpost Inc
The Salvation Army Northside Church
and Community Centre
Torquay Food Aid

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REPORT BACKGROUND

Located in Geelong, the Give Where You Live Foundation aims to be recognised as one of the most progressive Foundations in the country. We want to build a better, fairer society and use all our energy and resources, in partnership with our community, to help all people and all places thrive. Whether that be financially helping frontline community support agencies, bringing people and organisations together to tackle a challenge, advocating on behalf of those that need assistance or rallying the community to support our cause, we have always put community at the centre of our work.

The Give Where You Live Foundation has been actively engaged in the issue of food insecurity and supporting the food assistance system since it established the Direct Assistance Voucher Program (DAVP) in the early 1990's. A 'no cost' emergency relief program for people experiencing immediate financial crisis in the Geelong/G21 region, the program provides food, pharmacy and material aid vouchers to those in need. To complement this program, in 2011 the Foundation established Feed Geelong to support awareness raising and fundraising to support organisations responding to the issue of food insecurity within the G21 region.

As part of our commitment to support the food assistance system, the Give Where You Live Foundation also conducts regular research to provide an evidence base of the needs and challenges impacting the sector. The Food for Thought reports in 2014 and 2018 have provided key information to understand food insecurity and the food assistance system in the region.

This report, however, provides a unique picture of the sector during a time of global crisis, COVID-19. The global pandemic impacted everyone globally and locally, however the effects were felt more keenly by members of our community who were already struggling.





As Victoria went in to lock down in March 2020, the succeeding stockpiling and panic buying highlighted the disparity that already existed in communities, with only people who had access to savings and resources having the capacity to do this.

As the crisis unfolded there were compounding impacts on the food assistance system. Where there was an increase in need for assistance, there was also a significant and sudden drop in volunteer support. A sector that is traditionally reliant on volunteers to provide support and services, with over 500 volunteers (over 80% of staff resourcing) supporting food assistance in our region alone (Food for Thought, 2018), suddenly had reduced resources and capacity. At the same time, donated food items declined, and agencies had to compete with panic buying and supply chains under pressure to purchase food.

As lockdowns continued, key members of our community became increasingly vulnerable, most notable were concerns over the lack of government support for international students, people on temporary visas, and people who were ineligible for government support.

Whilst anecdotal evidence and data was captured early within this crisis across a number of agencies providing food assistance in our region, with the help of Deakin University we were able to capture evidence of the impact the crisis was having across the food assistance system. This research was undertaken between November 2020 and April 2021, and whilst does not capture the initial increase in demand which occurred earlier in 2020, it does capture the prolonged impact of the pandemic on the sector.

This report provides a brief snapshot of the food assistance system within the Geelong/G21 region during a unique period, and highlights some of the challenges impacting the sector as a result of the COVID-19 pandemic.



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RESEARCH FINDINGS

INTRODUCTION

Food scarcity and hunger have been recognised as a growing problem among low-income and vulnerable populations in many high-income countries, including Australia¹²³. In Australia, formal monitoring is infrequent, however, food insecurity is considered to effect approximately 5% of the population⁴, a figure that is widely considered to be an underestimate⁵⁶.

While not a perfect indicator of need, Foodbank, Australia's largest distributor of emergency and community food, has reported increasing need for food assistance consistently over the past several years⁷⁸⁹. Despite the lack of monitoring in Australia, there is considerable research that has explored the negative impacts of food insecurity and hunger on health and wellbeing^{10 12}, highlighting the need to minimise food insecurity and hunger through any means.

Household food insecurity is inextricably linked to socio-economic disadvantage¹³ ¹⁴ ¹⁵ ¹⁶. Social policy, including welfare, child care, education, and employment, plays a role in hunger and food insecurity¹⁷. The charity sector has long been considered a reasonable solution to fill the gaps in government welfare provision¹⁸.

While the operating structures of Foodbanks differ across countries, particularly with respect to the extent of government involvement, structure of donations, and the ability of agencies to rescue food, research exploring the role of the emergency and community food sector has shown consistent concern about the ability of food charities to manage escalating food insecurity, arising in the context of widespread poverty, unemployment, and underemployment^{19 20 21 22}.

While the emergency and community sector was created to mitigate short term need and to provide emergency food for those in crisis²³, it is clear that the sector is now responding to chronic food insecurity and hunger. Many people are returning to food charities month on month, for years, or even generations. Despite increasing need, the sector has responded to the changing needs of its cliental, and the changing cliental, and today is offering more support than ever, not only in food assistance.

Of concern is how this sector can respond to acute crisis including bushfires, floods, and pandemics.

This research builds on the work of the Give Where You Live Foundation. and their support of the Geelong Food Assistance Network to explore the response and capacity of emergency food aid agencies in the Geelong region. Understanding who is seeking emergency food relief, the capacity of the agencies to meet this need and any changes in demand will give us a greater understanding of community and emergency food aid provision within the Geelong region. Furthermore, how the sector is functioning in this crisis period, in terms of human resources, food supplies, funding and similar operational functions, will help to illustrate opportunities for additional support and collaboration as we move out of the initial crisis period of the pandemic in Victoria.

AIMS

The aim of this project is to explore the various providers of emergency and community food aid in the Geelong region to gain an understanding of how they are dealing with the COVID-19 pandemic and to investigate the relationship between the provider of food aid itself and those in need.



Specifically, the aims of this research are to:

- Investigate any change in client need as a result of the COVID-19 pandemic.
- Explore problems in meeting demand as a result of the COVID-19 pandemic.
- Investigate the implications of food insecurity and food aid use as a result of the COVID-19 pandemic.
 Additionally, this research will provide an up-to-date overview of the emergency and community food aid
 sector in the Geelong region and will provide a space in which emergency and community food sector and
 their clients' experiences and inequalities can be reported and recorded. This research has also enabled
 additional collaboration through sharing results as they become available to inform policy and practice.

A SNAPSHOT OF THE FOOD ASSISTANCE SYSTEM

GENERAL CHARACTERISTICS

Of the 37 organisations contacted, 21 (56.8%) completed at least one survey; ten organisations completed four or more of the six surveys. More than half (n=12, 57%) of organisations that responded were located in Geelong, with others from Anglesea, Barwon Heads, Corio, Drysdale, Grovedale, Portarlington, Torquay, and Whittington. Respondents who completed the first survey (n=14), responded to a number of questions referring to their normal business practices over the past 12 months, not repeated in subsequent surveys. See table 1, page 32, for an outline of the general characteristics of the emergency food providers who responded to the first survey.



Most common assistance provided were

food parcels or boxes

36%

of respondents were from community organisations **36%**

were from welfare and non-profit organisations 28%

were from religious organisations



57% of agencies reported that the busiest two months of the year are

November and December



Respondents provided a range of different types of food relief, most common were:

71% food parcels

or boxes

57% prepared meals,

epared meals, fooc either eaten cash onsite or taken away

43% food and/or

food and/or cash vouchers

76% of respondents

did not have any eligibility requirements to access their services



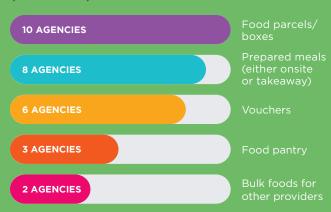
50%

of agencies were providing help once or more each week

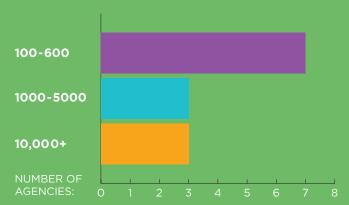
50% of agencies were serving 100-600 clients a year

Figure 1

TYPE OF EMERGENCY FOOD PROVIDED (NOV 2020)



NUMBER OF CLIENTS ACCESSING SERVICE ANNUALLY (NOV 2020)



CHANGES IN SERVICES AND NEED BECAUSE OF COVID—19

Across the whole reporting period, agencies reported an impact on services because of government restrictions (see table 7, page 36). While these impacts were also felt by clients at the beginning of the reporting period, by the end, organisations had absorbed most of these impacts and restrictions on client facing activities were lessoned, so agencies were able to provide stable support for clients.

Responses in the first survey highlighted challenges with recently imposed density requirements, and restrictions placed in operations occurring indoors.

"

8

Space limit in rooms means that services must be run remotely, or with only one volunteer (or two from one household) present at a time. Drop-in program has been suspended since March [2020].

Some COVID-19 related restrictions had an impact on clients, with many respondents in the initial surveys indicating that restrictions had affected client's ability to access their services. Impacts included the closure of services, or the change to how their services were delivered, such as moving to takeaway or delivered meals or moving face-to-face assessments to phone assessments.

"

When Geelong was in the first and second wave, [agency] began a meal delivery service to ensure those that needed meals received them. Many of our clients that attend the community meal stayed home, instead of coming to the Foodbank due to fear of COVID-19. In the beginning, we had to close for about 3 months.

By the final survey, agencies reported that the restrictions that were in place were generally well accepted by clients, given that they were the same restrictions that had been in place across the state for several months.

"

Reduced numbers in public spaces, QR code, hand sanitiser.

At the beginning of the reporting period, organisations reported that they had to change the way that they operate because of the COVID-19 pandemic. This included providing services to more people and extending and reducing hours or the type of service offered. Some respondents reported a significant increase in need because of the pandemic.

"

We added an additional food access services on a Tuesday (previously we only ran a community meal on a Thursday), since COVID-19 began our additional food access program has developed into a Foodbank. When COVID-19 restrictions relaxed (in October) we resumed our community meal program on a Thursday (outdoors) and continued the Foodbank program on a Tuesday. The Foodbank will now continue as a permanent program.



By the final survey, two-thirds of agencies were reporting that they had no change in their operations as Victoria recorded no COVID-19 cases and most restrictions were eased.

Figure 3
GOVERNMENT RESTRICTIONS

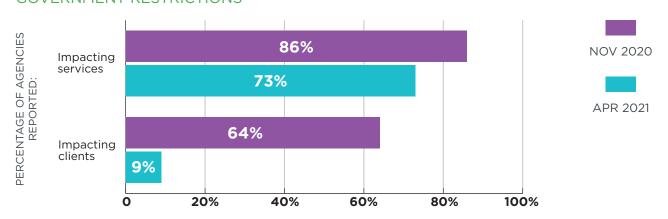
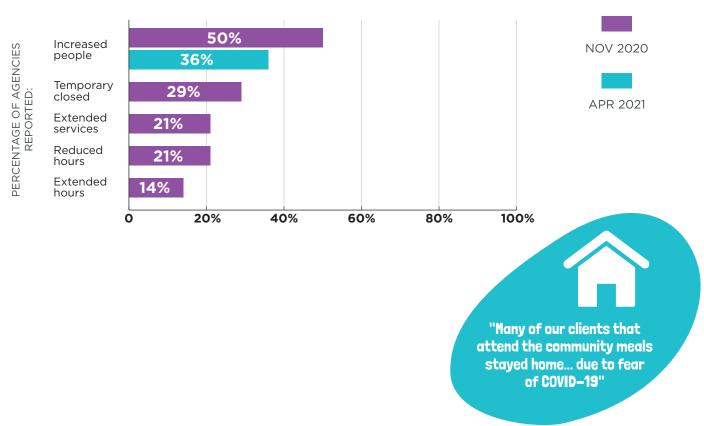


Figure 4
IMPACT ON OPERATION



CHANGES IN SERVICES AND NEED BECAUSE OF COVID-19 (CONTINUED)

In the initial survey reporting period, the most common of the COVID-19 restrictions was the inability to have face-to-face contact with clients, which affected community meals and meal deliveries (see table 8, page 37).

"

Working from home, no face to face contact with clients. On home visitations we do not enter home- drop off only. No face to face services available. All appts completed via phone and email. ER vouchers emailed to clients. Clients email bills in and we pay them.

Other services were impacted due to capacity limits, limiting how many clients could be inside at a time or how staff interacted with clients.

"

Our community meal program is being held outside to ensure we can accommodate our participants during COVID-19.

71% of agencies reported an impact on food supply since the commencement of the COVID-19 pandemic

In the initial reporting period, almost all (10 or 71%) respondents reported changes to their food supply due to COVID-19.

Some respondents reported short term supply issues due to panic buying early in the pandemic or upstream supply problems as well as challenges preparing and transporting food.

"

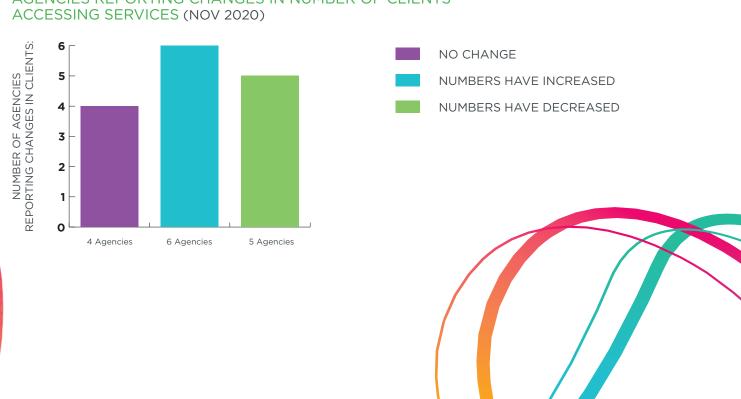
Because the state of Victoria was declared a 'State of Disaster' all food from Foodbank Victoria was diverted to Red Cross for emergency hampers. This left much of the pasta and ambient goods that we were normally able to access unavailable for food aid agencies. We had to purchase these products through other means, thus putting budgets under pressure.



Figure 5
IMPACT OF GOVERNMENT RESTRICTIONS ON AGENCY (NOV 2020)



Figure 6
AGENCIES REPORTING CHANGES IN NUMBER OF CLIENTS ACCESSING SERVICES (NOV 2020)



11

FUNDING AND STAFFING

During the initial study period, organisations reported an increase in funding. This period was at the end of the long lock down in Melbourne and regional Victoria, and many agencies were reporting increased demand and as a result required increased funding to meet this demand.

"

We have received less general donor and local business support; however we have received additional government support (COVID-19 related) as well as additional philanthropic support from local funders.

As the pandemic in Victoria moved from the emergency phase into a period of COVID-normal, agencies reported a stabilisation in funding. On a positive note, few agencies reported an overall decrease in funding across the study period (see table 6, page 36). Only modest funding changes occurred for most respondents with most remaining funded via philanthropic funding. A small group received extra COVID-19 specific government funding.

"

We received additional funding due to impact of COVID-19. We have had more funding for the purchase of emergency food from local government and philanthropy but have lost income from our traditional voucher system as referring agencies have closed operations and lost income from their op shops etc. We have received less general donor and local business support.

While funding is often challenging for many services, during this period, lack of funding related to the closure of opportunity shops negatively impacted some respondents.

"

Agencies referring clients to Geelong Food Relief Centre have reduced operations and have lost income due to the closure of op shops.





71% of agencies reported a loss in volunteer staff
(Nov 2020)

Figure 7
PERCENTAGE OF AGENCIES REPORTING CHANGES TO RESOURCES

Changes to funding	NOV 2020	APRIL 2021
Increased funding	79%	0
Same funding	14%	100%
Decreased funding	7%	0
Changes to staffing		
Same staffing	29%	82%
Lost volunteer staff	71%	18%
Lost paid staff	0	0

CONCERNS OVER HIGH WORKLOAD

In the initial months of the reporting period, organisations reported a loss in volunteer staff. This loss was primarily related to a loss in staff who were over 65 and who were more susceptible to COVID-19, and therefore were sheltering at home.

"

Our stores are mainly staffed by volunteers. Many of these people are in a vulnerable age bracket for contracting COVID-19. Some have not returned to work.

Over time, agencies reported a stabilisation in staffing, however, many were concerned that the high workload of staff came with concerns about burnout, with agencies trying to assist staff to manage the stresses in their lives.

"

Our staff have been operating from a crisis response dynamic from Jan 2020 as a response to Bushfires, that came off a busy Christmas period in 2019. So our staff have been operating at 150% for over 12 months, with limited support from volunteers and or other supports, our staff have fatigue, there is the impact of vicarious trauma and being the frontline service our workers have dealt with the distress and anxiety of our community in a condensed manner. We have had some staff requiring work from home to limit personal hardship/strain on their home lives, staff are feeling isolated. overwhelmed and exhausted. We are doing our best to care for our team's wellbeing, prioritising safety and ensuring we can continue to provide critical services to our community. Other agencies were trying to increase the number of paid or volunteer staff, however a lack of funds or unreliable volunteers were preventing them from increasing their workforce.

"

We don't seem to be able to attract many volunteers. A lot of people apply, and we send further information but don't hear from them.

"



SCALE OF OPERATIONS

Agencies reported on the scale of their operations over the 6-month period (see table 2, page 33). On average, over the reporting period, the number of women and men being assisted was even.

The most common age groups who required assistance across the reporting period were those aged between 31 and 45 and 45 and 60 years. Most agencies reported serving a range of population groups; the most common population group who sought emergency and community food assistance were families. Most months there was also a small increase in the number of agencies who reported people seeking assistance specifically for children.

However, when we asked about which family group was most common, agencies reported the most common family type in need of assistance on average were single people with no children. In addition, people with disability and people who are aged also increasingly sought assistance across the study period.

The 21 agencies surveyed provided around 1,000 meals on average each month, with the number of meals ranging from 30 to over 10,000. The scale of operations differed between agencies and across months, reflecting the heterogeneity in these programs.

Figure 8
GENDER OF THOSE RECEIVING ASSISTANCE (APRIL 2021)

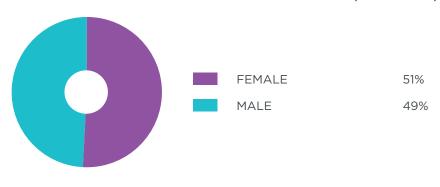


Figure 9
FAMILY TYPE RECEIVING ASSISTANCE (APRIL 2021)





Figure 10

AGE OF THOSE RECEIVING FOOD ASSISTANCE (APRIL 2021)

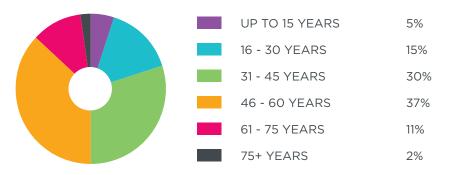
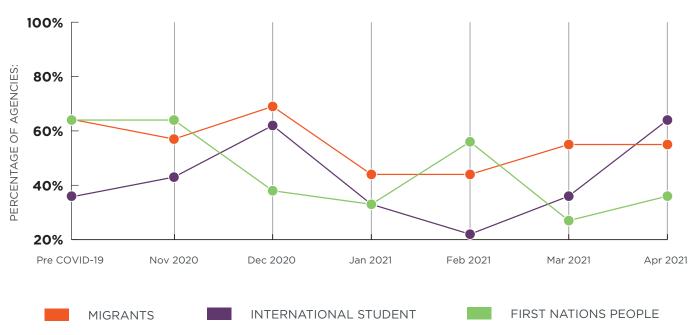
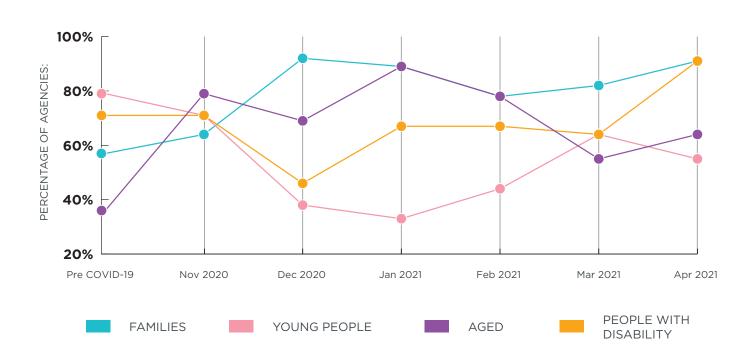


Figure 11
AGENCIES REPORTING POPULATION GROUP OF THOSE RECEIVING FOOD ASSISTANCE

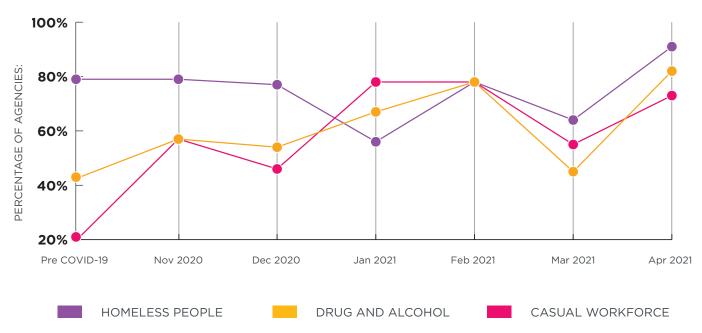




SCALE OF OPERATIONS (CONTINUED)

Figure 11 (Continued)

AGENCIES REPORTING POPULATION GROUP OF THOSE RECEIVING FOOD ASSISTANCE





Over the 6-month period, agencies reported that demand was either roughly the same, or had increased. In addition to serving people who were not accessing the service prior to the COVID-19 pandemic, providers also reported on the frequency of use of their regular clients. In most months, most agencies reported that their regular clients were using their service with the same frequency or with increased frequency as they had done before the start of the COVID-19 pandemic.

The decrease in client numbers reported by some respondents was linked to the temporary financial support provided by the Government. Many respondents reported that the temporary government support had been very helpful to their client base.

"

For many months we were down 50% on calls from 2019 which we believe was because of JobKeeper & JobSeeker. Some have attended a little less often due to the extra money available.

Other respondents however, stated that the government support had not been helpful or were only helpful for a short period or for a select few, or costs were consumed by other expenses.

"

Many of our participants are pensioners and haven't received JobSeeker. No, our clients are not eligible for these payments... Rents have increased locally keeping the situation very similar.

Agencies were asked how they manage need and if there were people who they were unable to assist. In the initial survey, half (n=7, 50%) of respondents reported that they had recently had difficulty in meeting the needs of all their clients.

Some organisations reported that this was related to changes to funding, meaning that they were no longer able to offer services including assisting their clients to paying utility bills or other expenses. While other agencies were more restricted in who they were able to offer support to through their funding models and were unable to provide assistance to groups who had previously not needed assistance.

66

"

We have had several migrants (not refugees/asylum seekers) referred to us for assistance. However, our funding and community donations have been provided specifically for people seeking asylum/refugees.

As shown in table 2, page 33, international students were in need over the study period as, while they have work rights in Australia, and have often worked in casual employment while they completed their studies, they were ineligible for government assistance through the JobKeeper and JobSeeker programs and as such, became increasingly reliant on the charitable sector to meet some of their needs.

"

[We are being asked to provide] ongoing financial support to international students and people with no visas and not entitled [or do not have a visa that allows them access] to Centrelink but have lost income.





There was also concern about other non-citizens who were at risk of hunger and homelessness. There was frustration that government assistance had not included these groups and that the responsibility for providing assistance was just being moved onto other areas.

"

People seeking asylum and people on temporary protection visas have been overlooked by the Federal Government COVID-19 income support during the pandemic. Food is one issue, but people have been left with large rent debts and have been unable to pay their utility and phone bills and pay for their medication. We have been referring people to other community organisations for emergency relief, and this is increasing demand for those organisations.

Across the 6-month period, the number of agencies who were unable to provide assistance to people in need dropped to only one or two each month. However, agencies across the reporting period expressed concern that they would not be able to meet future need, particularly if the need increased when the support provided through the JobKeeper program came to an end.

66

We are concerned the needs of our community will increase when JobKeeper [and] JobSeeker ends and our community will need more food, and we expect new faces, or those who haven't been around in a while."

There were also concerns about what the compounded impacts of the end to government assistance might mean. Some agencies were concerned that while rental or mortgage holidays were able to assist people in the short term, once this assistance ceased, people may struggle to pay back debt or make up for missed payments.

"

Now that a lot of support that was offered last year has finished [we are receiving more] support requested re: Financial hardship with creditors; inability to pay rent/food due to reduction of Jobseeker/ Jobkeeper arrangements.

Agencies were also concerned about the non-food needs of their clients and how they might meet those.

"

We can provide food, but many of our clients have rent arrears and overdue bills.

REFERRALS

Beyond offering food assistance, respondents refer clients to other services including accommodation services, family support/domestic violence services, medical and mental healthcare services and financial counsellors (see table 3, page 33).

Consistently across the 6-month period, agencies reported referring clients to accommodation services the most. The risk of homelessness and assisting people into safe and secure housing was a significant concern for many agencies, with many fearing that the COVID-19 pandemic could push more people into homelessness.

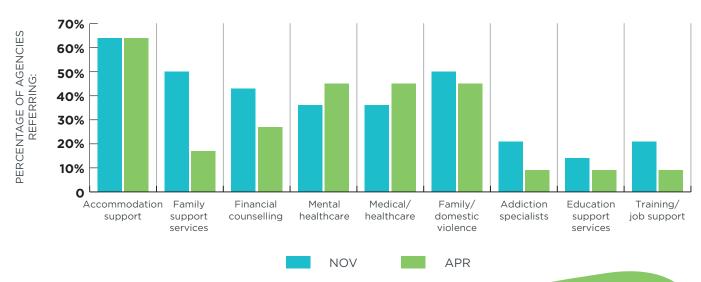
This is consistent with the populations served by the agencies, who reported very high need from people experiencing homelessness across the 6-months (see table 2, page 33).

"

COVID-19 has been particularly hard on our clients. Most have no access to income support or healthcare cards. Without our assistance to negotiate rent waivers and our food deliveries, and access one-off Red Cross emergency relief payments, our people would be homeless and starving.

"

Figure 12
AGENCIES REFERRING TO OTHER SERVICES

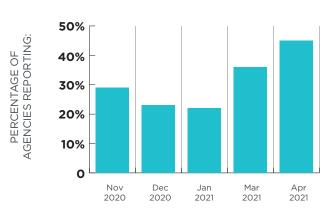




REFERRALS (CONTINUED)

Figure 13

AGENCIES REPORTING AN INCREASE
IN REFERRALS TO OTHER SERVICES

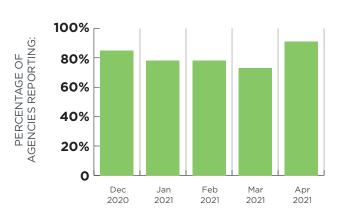


"

Figure 14

AGENCIES REPORTING CONCERN

OVER JOBKEEPER ENDING



Agencies were also concerned for people who were experiencing homelessness who had been temporarily housed in hotels and in other accommodation. There was concern about what would happen to this population when this emergency assistance ceased.

We expect significant changes when Government funding ceases the funding for hotel/motel accommodation for homeless clients.

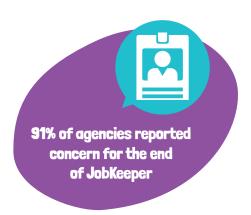
Given the huge strain of COVID-19 on mental health, it is unsurprising to see that many agencies reported an increase in the number of people who were being referred to mental health services. This also came at a time when governments were discussing mental health services and providing additional funding to support the services on offer.

Around one quarter to under one half of respondents reported an increase in the number of people they were referring to other agencies. Again, these referrals were mostly related to housing assistance.

Given the widespread impact of the pandemic on employment, agencies also reported an increase in the number of people who were seeking financial assistance. The financial flow on impact of the pandemic on many families may be felt for years.

"

Financial counselling funding remains the same however demand is higher and will only keep increasing.



FOOD SUPPLY

Across the study period most agencies were able to provide most of the main food groups to their cliental (see table 4, page 34).

Grains and cereals were provided by over 77% of agencies across the study period, while proteins were provided by at least 64% of agencies. Agencies reported some problems in ensuring an adequate supply for food.

Some agencies reported that ensuring an adequate supply of fruit and vegetables was the most challenging. While some weeks this supply was plentifully, in other weeks the supply was sparse. The challenge here was the infrequency of the supply.

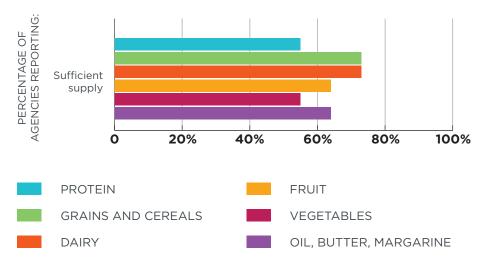
"

Sometimes we have either under or over supply of some types of fruit and veg.

"



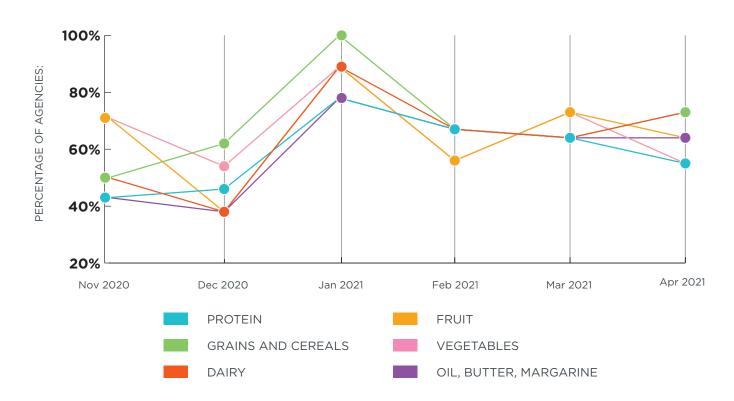
Figure 15 AGENCIES REPORTING SUFFICIENT SUPPLY (APRIL 2021)



Ensuring an adequate supply of fruit and vegetables was the most challenging

FOOD SUPPLY (CONTINUED)

Figure 16
SUFFICIENT SUPPLY OF FOOD TYPE



Most agencies across the 6-month period were purchasing most of their food from third parties rather than receiving foods directly from donations (see table 5, page 35). This could be due to several reasons, including a lack of food donations, increased monetary donations, and an increase in government funding. Until the pandemic is over, it is unclear what the impact of this shift will be on the sector.

Food from food redistribution was most likely to come from Foodbank, however, some agencies reported that this food was increasingly difficult to obtain as costs for all food from Foodbank along with food from other sources had increased.

"

The cost of getting food from sources such as Foodbank has increased which has meant our costs have gone up and our access to food stocks has decreased.

Part of this movement from donated food to purchasing food was a result of a reluctance by volunteers or community members to collect or deliver food, replacing these physical donations with financial donations.

"

Community groups have been reluctant to return to delivering donations. However, they are putting financial donations in our bank account instead.

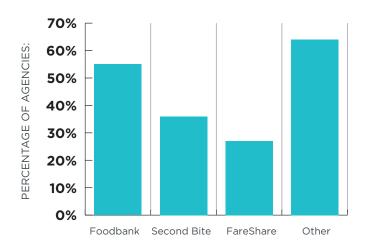
Over the 6-month period, the number of agencies that were concerned about ensuring a sufficient food supply decreased as supply stabilised.

Figure 17
SOURCE OF FOOD



Figure 18

AGENCIES SUPPORTED BY FOOD DISTRIBUTION HUBS (APRIL 2021)







CONCLUSIONS

Changes in demand of emergency and community food are often interpreted as indicating changing levels of food insecurity or food poverty^{24 25}.

The results of this study show how emergency and community food relief have responded during time of crisis, and in most cases how they have adjusted their services to maintain service provision.

While the immediate crisis appears to have moved on, the emergency and community food assistance sector will continue to struggle to provide food for all those in need as the sector is now an embedded part of the welfare system and it is unlikely that welfare will increase to a level that will provide sufficient financial support for all those in need.



This study has
been able to provide
longitudinal data on an
important part
of the charitable
food sector

STRENGTHS AND LIMITATIONS

While there are some clear findings, there are some limitations that need to be taken into consideration when interpreting these results. Both the target and responding sample for this study are small. This means that a change in one or two responses can have a significant impact on the percentages reported here.

As such, it is best to read into trends with caution, with some responses it might be best to consider survey 1 and 2 compared to survey 5 and 6.

Part of the lower response rate for surveys 3 and 4 maybe due to their timing. During the first survey, respondents said that their busiest months are November and December, as such, it may be that respondents were unable to complete the middle surveys due to operational issues.

This study also did not aim to measure the quantity of food distributed in the agencies surveyed or the length of time over which they have assisted individual clients, and no way of knowing how well any of the agencies surveyed were meeting their clients' food needs. The appraisal of emergency and community food activity here relies on self-reports of the numbers of people served and the resources deployed to provide these services. Not all agencies maintain detailed records, and thus the data must be subject to estimation errors.

Despite these limitations, this study, by focusing on programs that provide assistance, has been able to provide longitudinal data on an important part of the charitable food sector and provide data on how the sector has responded during the COVID-19 pandemic.



RESEARCH METHOD

SAMPLE AND RECRUITMENT

A database of agencies and organisations providing food relief services to people in need in the Geelong region was compiled by the Give Where You Live Foundation from information publicly available on the Feed Geelong website.

This database included information such as name, email, and location, and included 37 individual organisations with 69 email contacts in total.

Each month, email containing an overview of the study and a link to the web-based survey was sent to each organisation. Ethics approval was granted by the Deakin University Human Research Ethics Committee [HAEG-H 219_2020].

DATA COLLECTION

Data collection occurred over a 6-month period from November 2020 to April 2021. Each month over the 6-month period, a new survey was created and shared. The first survey consisted of 57 closed and open-ended questions, surveys 2-6 consisted of 35 closed and open-ended questions. None of the surveys included forced responses.

The surveys covered the following areas of investigation:

- General overview of the organisation including services provided, operating hours, location, and any impacts on the delivery of services due to the COVID-19 pandemic.
- Staffing and funding; including percentage of paid to volunteer staff, where funding comes from and if/how this has changed due to the COVID-19 pandemic.
- Food that the organisation provides; including types of food provided as per the Australian Guide to Healthy eating, sources of the food supply and any changes to this supply, and storage preparation and delivery of food.
- Profile of who the organisation supports, including any changes in clientele since the COVID-19 pandemic, how the changes in government support has affected clients and if the organisation is supporting more children than before.

DATA ANALYSIS

Data from all 6 surveys was imported into an Excel spreadsheet. All data from close-ended questions were analysed using basic descriptive statistics to characterise the sample across the sample period. Categorical data were reported using frequencies and percentages while continuous data were presented as means, medians, and standard deviations. Open-ended data were thematically analysed. Data are presented as statistics supported by direct quotes where appropriate.



DATA TABLES

Table 1
GENERAL CHARACTERISTICS OF EMERGENCY FOOD AID PROVIDERS AT TIME POINT ONE

	14 Agencies Reporte
TYPE OF EMERGENCY FOOD PROVIDED	
Food parcels/boxes	(71%) 10
Prepared meals (either onsite or takeaway)	(57%) 8
Vouchers	(43%) 6
Food pantry	(21%) 3
Bulk foods for other providers	(14%) 2
ELIGIBILITY REQUIREMENTS	
None	(76%) 11
NUMBER OF CLIENTS ACCESSING SERVICE ANNUALLY	
100 - 600	(50%) 7
1000 - 5000	(21%) 3
10,000+	(21%) 3
FREQUENCY OF USE	
Once or more each week	(50%) 7
Twice a month	(28%) 4
Monthly	(14%) 2
Less than monthly	(7%) 1



DATA TABLES (CONTINUED)

Table 2
SCALE OF OPERATIONS

	14 Agencies Reported Nov 2020	13 Agencies Reported Dec 2020	9 Agencies Reported Jan 2021	9 Agencies Reported Feb 2021	11 Agencies Reported March 2021	11 Agencies Reported April 2021
PROPORTION WOMEN	50%	62%	43%	47%	53%	51%
FAMILY TYPE						
Single parent	28%	35%	15%	16%	25%	29%
Couple with children	21%	25%	18%	21%	20%	18%
Couple, no children	6%	7%	8%	11%	9%	5%
Single person	43%	30%	59%	52%	43%	45%
AGE						
Up to 15 years	8%	4%	7%	7%	5%	5%
16 - 30 years	16%	16%	7%	16%	16%	15%
31 - 45 years	36%	38%	27%	30%	37%	30%
46 - 60 years	27%	32%	41%	35%	28%	37%
61 - 75 years	12%	8%	15%	9%	13%	11%
75+ years	2%	2%	3%	3%	2%	2%
POPULATION GROUP ^	*					
Families	57% / 64%	92%	89%	78%	82%	91%
Migrants	64% / 57%	69%	44%	44%	55%	55%
Homeless people	79% / 79%	77%	56%	78%	64%	91%
Drug and alcohol	43% / 57%	54%	67%	78%	45%	82%
Young people	79% / 71%	38%	33%	44%	64%	55%
People with disability	71% / 71%	46%	67%	67%	64%	91%
International student	36% / 43%	62%	33%	22%	36%	64%
Casual workforce	21% / 57%	46%	78%	78%	55%	73%
Aged	36% / 79%	69%	89%	78%	55%	64%
Aboriginal and Torres Strait Islander	64% / 64%	38%	33%	56%	27%	36%
INCREASE IN NEED - CASUALLY EMPLOYED	57%	38%	22%	56%	27%	55%
INCREASE IN NEED - CLIENTS WITH CHILDREN	43%	31%	33%	0%	36%	27%
Numbers are roughly the same	29%	31%	56%	22%	45%	55%
Number have increased	36%	54%	33%	44%	36%	45%
Numbers have decreased	36%	15%	11%	33%	18%	0%
FREQUENCY OF USE OF REGULAR CLIENTS						
Same Frequency	21%	46%	89%	56%	73%	55%
Less Frequently	29%	15%	11%	0%	0%	18%
More Frequently	50%	35%	0%	33%	18%	27%

[^]respondents were asked to choose all that apply

^{*}Pre/post COVID-19

Table 3REFERRALS

REFERRALS	14 Agencies Reported Nov 2020	13 Agencies Reported Dec 2020	9 Agencies Reported Jan 2021	9 Agencies Reported Feb 2021	11 Agencies Reported March 2021	11 Agencies Reported April 2021
REFERRALS						
Accommodation support	64%	46%	22%	67%	55%	64%
Family support services	50%	31%	22%	11%	36%	18%
Financial counselling	43%	23%	22%	0%	36%	27%
Mental healthcare	36%	23%	33%	33%	36%	45%
Medical/healthcare	36%	15%	11%	0%	36%	45%
Family/domestic violence	50%	31%	22%	33%	36%	45%
Addiction specialists	21%	15%	11%	0%	9%	9%
Education support services	14%	0%	11%	11%	9%	9%
Training/job support	21%	8%	0%	0%	9%	9%
INCREASE IN REFERRALS	29%	23%	22%	0%	36%	45%
CONCERN ABOUT JOBKEEPER ENDING	-	85%	78%	78%	73%	91%

Table 4 SUPPLY

3011 [1	14 Agencies Reported Nov 2020	13 Agencies Reported Dec 2020	9 Agencies Reported Jan 2021	9 Agencies Reported Feb 2021	11 Agencies Reported March 2021	11 Agencies Reported April 2021
PROTEIN						
Provided	71%	69%	89%	89%	64%	73%
Sufficient supply	43%	46%	78%	67%	64%	55%
GRAINS AND CEREALS						
Provided	86%	77%	100%	89%	82%	82%
Sufficient supply	50%	62%	100%	67%	64%	73%
DAIRY						
Provided	79%	54%	89%	89%	64%	82%
Sufficient supply	50%	38%	89%	67%	64%	73%
FRUIT						
Provided	86%	62%	100%	89%	82%	82%
Sufficient supply	71%	38%	89%	56%	73%	64%
VEGETABLES						
Provided	79%	69%	89%	89%	82%	82%
Sufficient supply	71%	54%	89%	56%	73%	55%
OIL, BUTTER, MARGARINE						
Provided	57%	46%	89%	89%	64%	64%
Sufficient supply	43%	38%	78%	67%	64%	64%

DATA TABLES (CONTINUED)

Table 5

FOOD SOURCE*						
	14 Agencies Reported Nov 2020	13 Agencies Reported Dec 2020	9 Agencies Reported Jan 2021	9 Agencies Reported Feb 2021	11 Agencies Reported March 2021	11 Agencies Reported April 2021
SOURCE OF FOOD						
Donations	42%	40%	45%	37%	51%	36%
Purchased	58%	51%	55%	63%	49%	64%
FOODBANK	57%	23%	22%	56%	55%	55%
Increased supply	29%	0%	0%	0%	0%	9%
Decreased supply	21%	7%	14%	11%	9%	9%
Supply unchanged	7%	14%	7%	33%	45%	36%
SECOND BITE	36%	15%	44%	56%	18%	36%
Increased supply	7%	0%	7%	11%	-	-
Decreased supply	21%	15%	14%	0%	9%	9%
Supply unchanged	7%	0%	7%	33%	9%	36%
FARESHARE	29%	8%	11%	11%	18%	27%
Increased supply	7%	0%	0%	0%	-	-
Decreased supply	14%	0%	0%	0%	-	9%
OZHARVEST	7%	0%	0%	11%	18%	18%
Supply unchanged	-	-	11%	0%	0%	0%
Increased supply	0%	0%	0%	-	-	-
Decreased supply	-	-	0%	-	-	-
Supply unchanged	-	-	7%	-	-	-
OTHER	57%	69%	67%	56%	55%	64%
Increased supply	29%	21%	0%	11%	9%	18%
Decreased supply	7%	7%	7%	0%	18%	-
Supply unchanged	7%	7%	7%	33%	18%	27%

^{*}Not all respondents answered all questions

Table 6
FUNDING AND STAFFING

FUNDING AND STAFFING	and the second second					
	14 Agencies Reported Nov 2020	13 Agencies Reported Dec 2020	9 Agencies Reported Jan 2021	9 Agencies Reported Feb 2021	11 Agencies Reported March 2021	11 Agencies Reported April 2021
CHANGES TO FUNDING						
Increased funding	79%	15%	11%	11%	27%	0%
Same funding	14%	77%	67%	67%	73%	100%
Decreased funding	7%	15%	11%	11%	0%	0%
CHANGES TO STAFFING						
Same staffing	29%	69%	67%	67%	55%	82%
Lost volunteer staff	71%	31%	22%	22%	36%	18%
Lost paid staff	0%	0%	0%	11%	9%	0%

Table 7
COVID-19 RELATED RESTRICTIONS

	14 Agencies Reported Nov 2020	13 Agencies Reported Dec 2020	9 Agencies Reported Jan 2021	9 Agencies Reported Feb 2021	11 Agencies Reported March 2021	11 Agencies Reported April 2021
GOVERNMENT RESTRICTIONS						
Impacting services	86%	62%	78%	78%	64%	73%
Impacting clients	64%	27%	11%	11%	36%	9%
IMPACT ON OPERATION						
Increased people	50%	23%	11%	11%	9%	36%
Temporary closed	29%	0%	11%	22%	18%	0%
No change	21%	31%	67%	56%	55%	64%
Extended services	21%	0%	0%	0%	0%	0%
Reduced hours	21%	15%	11%	0%	0%	0%
Extended hours	14%	15%	0%	0%	18%	0%

Table 8 CHANGES IN SERVICES AND NEED BECAUSE OF COVID-19

	14 Agencies Reported
IMPACT OF GOVERNMENT RESTRICTIONS ON AGENCY	
Affected by physical distancing	(40%) 6
Affected by capacity/density limits	(27%) 4
Affected by close of business and stay at home orders	(20%) 3
Unaffected	(13%) 2
IMPACT ON FOOD SUPPLY SINCE COVID-19^	
Food supply impacted	(71%) 10
CHANGES IN NUMBER OF CLIENTS ACCESSING SERVICES	
No change	(27%) 4
Numbers have increased	(40%) 6
Numbers have decreased	(33%) 5

^{*}respondents could chose more than one option ^not answered by all respondents



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