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Understanding the rise of food aid and its implications for the welfare state:
a study of Scotland and Finland

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Abstract

Over the past decade, the UK has witnessed a considerable expansion in the provision and use of charitable food aid, particularly food banks. The phenomenon has become a prominent political issue, and a rapidly expanding field of academic study. However, there is limited data available as to the prevalence of food aid use or the factors associated with it. The growth in food aid has also prompted research and policy interest in the wider issue of food poverty: the extent to which people struggle to afford food; its drivers and impacts; and the role which charitable food aid has come to play in food poverty experiences. There is a recognised need for better understanding of both food poverty and food aid use as separate but connected phenomena.

The recent rise of charitable food aid in the UK has been mirrored across other European welfare states, provoking significant questions about the changing roles of, and relationships between, statutory and voluntary sectors in providing a social safety net. There is a need for greater critical reflection on how food aid is challenging and changing welfare states, particularly in countries where it has only recently become widespread.

The overall aim of this thesis is to gain new empirical and theoretical insights into the rise of food aid and its role in relation to the changing nature of the welfare state. In order to address this aim, a mixed methods study of food poverty and the rise of food aid within the welfare state was undertaken. Scotland was selected as the major case study for the research, with a particular focus on the city of Glasgow, while Finland provided the minor, comparative case. The quantitative part of the study involved cross-sectional and longitudinal analysis of an existing household survey of 15 deprived neighbourhoods in Glasgow (the GoWell study). The objective was to examine the scale of both food poverty and food bank use. Binary logistic regression modelling was used to examine the relationship of these outcomes with socio-demographic, health, and financial variables. The qualitative fieldwork involved a total of 51 semi-structured interviews. These included interviews with a sample of the GoWell study participants (n=12); service providers in Glasgow (n=12); and policy actors across Scotland (n=9). Fieldwork in Finland involved interviews with policy actors and individuals working in statutory and voluntary services (n=18).

This study provides quantitative analysis of a self-reported measure of food bank use, including empirical evidence of the scale and drivers of food poverty and food bank use in deprived neighbourhoods. While four per cent of respondents were found to have reported food bank use in 2015, 17 per cent reported difficulties affording food. The findings highlight the impact of financial factors, specifically of recent UK Government welfare reforms, on both food poverty and food bank use. The study found that survey respondents with mental and physical health problems were more likely to experience both food poverty and food bank use than those who reported good health. Worsening health was also found to increase the likelihood of entering food poverty over time. The qualitative findings provide evidence of how food banks are shaping experiences, perceptions, and delivery of the welfare state at a local level, and also consider how policy makers perceive the state-food aid relationship.

Drawing on welfare state regime theory, analysis of interviews with policy actors in both Scotland and Finland inform an examination of the various roles and relationships of food aid and the welfare state across different regime types. Theoretical characterisations of the relationship between food aid and the welfare state, arising from analysis of interview data in both countries, are presented. These include understandings of food aid in relation to a welfare state which might be considered: contingent; shrunken; impersonal; or regressive. Comparing Scotland and Finland offers important insight into how and why food aid may play different roles in different welfare state contexts.

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Author's Declaration

I declare that, except where explicit reference is made to the contribution of others, that this dissertation is the result of my own work and has not been submitted for any other degree at the University of Glasgow or any other institution.

Name: Mary Anne MacLeod

Signature:

Chapter One: Introduction

1.1   Personal background and origins of the research

My professional training and background, prior to beginning this study, was in the field of community development. I have a long-standing interest in what can be achieved when communities come together to identify local needs and priorities, and take action to bring about change. I have worked in adult education, and in supporting urban and rural community enterprise, and have been involved with local political movements and campaigns. However, I found deeply troubling the expansion of food banks in Scotland in around 2013, as a form of community activity providing food parcels to people who could not afford to buy their own. Working for a national funding organisation at the time, there were clear rules regarding funding for third sector activity which was 'additional' to statutory services – i.e. we could not support work which might duplicate or replace that which the state had an obligation to provide. Yet, in the context of austerity and the initial impacts of welfare reform, the agency began to fund the development of food bank activities in Scotland. For me, this was a concerning indication of acceptance that the government could no longer be relied upon to meet people's basic needs for food. I was interested to understand the motivations and experiences of communities providing and receiving food bank support.

This concern and curiosity led me to take up a role as a researcher for a third sector, anti-poverty organisation where I delivered a research project examining the scope of emergency food aid in Scotland (MacLeod, 2015). Completed in 2014, this study was one of very few other pieces of work looking at this issue in Scotland at that time. Indeed as the food bank sector in the UK had expanded dramatically over a short period, there was growing interest at that time from researchers, policy makers and service providers and a sense of urgency in the need to better understand what was then a largely new (and therefore under-examined) phenomenon. Governments were under-pressure to defend their social policy decisions; local services were anxious to understand the needs of existing and new client groups; campaigning organisations wanted better information in order to strengthen their arguments about the drivers of the problem and the changes needed to address it.

I was motived to further investigate the rise of food banks for my PhD thesis as I recognised the gap in available evidence. I wanted to help understand the scale and nature

of food bank use and the experience of food poverty more broadly. Having conducted a series of focus groups with food bank staff and volunteers as part of the earlier study, I had been struck by their frustration – often anger – at what many felt to be the government's increased reliance on them to meet people's basic needs. I recognised the ideological and political context of the UK Government's austerity agenda and reforms to public services, in particular the 2012 Welfare Reform Act, as crucial backdrop to the emergence of the food bank response. I completed much of the fieldwork for this study during the summer of 2014, a highly politicised time in Scotland in the run-up to the Independence Referendum. I was aware what a politically charged symbol the food bank had become – both in the context of local activity, and of national political debate. The image of the food bank was used by those on both sides of the campaign to envision the future of the welfare state in Scotland, within or outside of the UK.

Since I began researching food aid in 2014, the evidence base, policy discourse, and political context surrounding food poverty and food aid activity in the UK have evolved considerably. The topic has garnered interest from a range of academic disciplines including public health; social policy; nutrition; business; human geography; and sociology. April this year saw the first interdisciplinary conference on food poverty in the UK, with over 30 research papers presented. Food poverty is clearly an evolving and expanding arena of activity for the third sector in the UK. Since beginning this research, considerable funding has been put into voluntary organisations delivering a range of food-based interventions in local communities. In addition, national campaigns and coalitions have brought together third sector organisations to call for specific policy changes and develop local initiatives related to food poverty. Some of this activity serves to enhance the infrastructure of charitable food aid provision in the UK, notably the £20 million partnership between Asda, the Trussell Trust and Fareshare launched this year. Elsewhere in the third sector there have been criticisms of such developments which have been considered examples of the corporatisation of food poverty (see for example the Independent Food Aid Network's (2018) response to the Asda deal), and effort to challenge the institutionalisation of food charity within the social safety net.

Having worked for an anti-poverty campaigning organisation before, during and after completing this thesis, my perspective is informed by a structural understanding of the drivers of poverty and inequality. As a researcher I am motivated by a concern for social justice, and my interest in pursuing the line of inquiry for my thesis was stimulated by a deep concern about the rise of food banks as a social justice issue. My epistemological

position is one which considers neutral objectivity to be impossible within research, and therefore follows feminist researchers who argue that the aim of research should not be to extract oneself from the process, but to enter into it fully aware of one's own positionality, power and privilege (Oakley, 1981). I therefore recognise the importance of reflective and critical self-awareness on the part of the researcher and thus this introduction to my background aims to locate myself within the research, with the explicit aim of challenging my own preconceptions throughout.

1.2   Introduction to the research

The provision of food by charitable organisations and institutions to people in need is nothing new. In fact such activities have a long history from the early days of organised religion with its central teachings of charity and feeding the hungry. However, since the establishment of modern-day welfare states in the latter half of the twentieth century, food charity has come to play a much less prominent role in society, and there has been an expectation that more formalised social protection systems largely serve to prevent hunger and extreme need. While it is not the purpose of this study to chart the history and development of food aid, in modern times the concept might most commonly be associated with humanitarian interventions, provided in countries afflicted by famine, conflict or natural disaster. Yet the emergence and expansion of formalised food charity across high-income countries in recent decades challenges such assumptions, raising questions as to the experiences of poverty, and the changing nature and role of the welfare state, in these settings.

The term 'food aid' has been increasingly used in the UK to describe these new forms of voluntary sector food assistance, encompassing a range of activities including food banking and surplus food redistribution to local organisations serving meals and other forms of food provision (Lambie-Mumford et al., 2014). It is the growth of the formalised food banking sector in the UK which has received particular attention over the past decade, and has prompted considerable political and public debate (see for example: Butler, 2017, Hansard, 2017; 2015 and Munro, 2015). Since it opened its first food bank in 2004, the Trussell Trust's network, the biggest food bank provider in the UK, has grown rapidly and now numbers over 1,200 outlets (Trussell Trust, 2018). Food aid is a new but quickly growing field of academic research in the UK, with several recent studies having sought to better understand the scale, drivers and experience of food bank use, in particular

evidencing the connection with recent changes to the social security system (Perry et al., 2014; Garthwaite, 2016; Loopstra and Lalor, 2017; Loopstra et al. 2018).

The rapid expansion of charitable food aid has also stimulated particular interest in food poverty, or household food insecurity, in the UK. Food insecurity is recognised as the inability to access adequate quality or sufficient quantity of food in socially acceptable ways, or the uncertainty that one will be able to do so (Radimer, 2002, also Riches 1997 and Dowler et al., 2001). While not currently routinely measured in the UK, understanding food insecurity is important as it is a powerful indicator of material deprivation which captures the experience of having insufficient and insecure financial resources to meet one's basic needs (Loopstra and Lalor, 2017). Indeed, cuts to social security, stagnant incomes, rising unemployment, and increased costs of living have meant difficulty affording food has become a daily reality for far more households than the numbers turning to food banks represent (Davis and Baumberg Geiger, 2016).

The growth of food banks in the UK has occurred against a backdrop of significant cuts to public spending and a thoroughgoing restructuring of the social security system. The levels of conditionality within the new Universal Credit scheme, the flagship policy of the programme of welfare reforms begun by the Coalition Government in 2010, has been said to "represent a fundamental change to the principles on which the British welfare state was founded" (Dwyer and Wright, 2014: 33). Beyond the UK, in the context of the Global Financial Crisis of 2008 and the ensuing period of global recession, the rise of what Taylor-Gooby et al. term the "neo-liberal logic of austerity" has been widespread across the welfare states of Western Europe (2017a: 11). Charitable food aid has emerged in many different national contexts (see for example: Pfeiffer et al., 2011; de Armino, 2014; van der Horst, 2014) and has come to symbolise the retrenchment of the welfare state and the weakening of statutory social protection.

According to welfare regime theory, different national welfare state systems can be placed into distinct categories. Broadly speaking, countries are grouped together according to the extent to which universalist, contributions-based, or means-tested social policy dominates, and the relative roles played by the state, the family and the private sector in providing good and services (Esping-Andersen, 1990). These frameworks provide useful tools for drawing comparisons between countries within and across different regime types. Most existing research on the role of food aid in the Global North has emerged from weaker welfare state contexts including the USA and Canada and has therefore not tended to engage with the welfare state literature. Drawing on welfare regime theory, this study aims

to consider the extent to which there might be convergence or divergence in respect to the nature and development of food aid provision across different welfare regime contexts. In doing so the study builds on the work of Taylor-Gooby et al. (2017a) who identify different ways in which welfare regimes are evolving as a result of austerity, by using the rise of food aid as lens through which to examine these changes.

An interest in the implications of food aid and the growth in food poverty for the role of the welfare state also raises important questions about the position that food has historically played within it, and the extent to which modern-day food aid represents a significant change in the role of the voluntary sector. Again, an application of welfare regime theory provides a useful framework for comparative analysis of these different roles and relationships.

This thesis aims to gain new empirical and theoretical insights into the role of food aid in relation to the changing nature of the welfare state. It is interested to understand everyday experiences and perceptions of food banks in the context of welfare state service delivery and use, and the lived reality of food poverty more broadly. In doing so it responds to calls for more quantitative and qualitative evidence of both food bank use and household food insecurity as separate but connected phenomena in order to enable 'individual analyses of the causes and consequences of these experiences' (Loopstra et al., 2016: 9) .

As a largely recent phenomenon in the UK and other Western European nations, the empirical evidence base, and theoretical examinations of the implications of food aid for the role of the welfare state in these contexts are still largely underdeveloped. Scotland and Finland form the case study countries for this study, examples of liberal and social democratic welfare states respectively. This is not an even comparative study: Scotland forms the major case, with depth of analysis achieved through a focus on the city of Glasgow as a critical case study within Scotland, while Finland provides the minor case study for comparison with Scotland. The objectives of this study are therefore to:

- Examine the scale, drivers and experiences of food poverty and food bank use in deprived neighbourhoods

- Understand how food banks are shaping experiences, perceptions and delivery of the welfare state at a local level

- Explore the roles and relationships of food aid and the welfare state across different regime types

- Provide new evidence for the development of policy solutions to food poverty in Scotland, Finland and elsewhere.

1.3   Overview of the thesis

Chapters Two, Three, Four and Five form the literature-based section of this thesis. They lay the foundations for the empirical part of the study through a review of the academic literature and policy context relating to food poverty, food aid and the welfare state. First, Chapter Two defines food poverty, exploring how the concept has been used in the literature and presents a framework for how different dimensions of food poverty might be understood and experienced. The chapter considers how food poverty, or food insecurity, in high income countries is measured and provides an overview of research evidence on its drivers and impacts from countries where such data is routinely gathered.

Chapter Three then builds on the discussion in Chapter Two to consider the evolution of charitable food aid as a response to the growth in food poverty in high income countries. It describes how food banks, as a particular form of charitable food aid, have developed across North America and also in parts of Western Europe. The chapter explores the social and political contexts in which charitable food aid provision has emerged in recent decades, and explores in particular the existing research evidence of the drivers and impacts of food bank use in the UK.

Given the overarching objective of this thesis to understand the implications of food aid for the role of the welfare state, Chapter Four examines welfare regime theory literature, considering the different ways in which the relative roles and responsibilities of the state and other key actors might be understood in international comparative analysis. The chapter particularly aims to examine where the responsibility for food has historically been located within welfare regime theory. It draws on Esping-Andersen (1990) to propose a framework for examining where the position of food is located within different welfare state regime types, and identifies key areas of food-related welfare state intervention. Having explored the empirical and theoretical contexts in which the contemporary debate regarding the rise of food aid in the welfare state are located, Chapter Five goes on to introduce the case study countries of Scotland and Finland, selected for particular investigation in the empirical part of the thesis. This chapter briefly considers the nature of the welfare states in each country, and the role of food in each context, drawing on the

theoretical framework outlined in Chapter Four. The chapter also provides an overview of the nature of food aid provision in Scotland and Finland, examining how this has been related in the literature and in political discourse to changes within the welfare state in both countries. The chapter concludes the literature-based section of the thesis by outlining the research questions, framing them within the context of the evidence and debates as discussed in the preceding chapters.

Next, Chapter Six outlines the methodological approach taken to answering the research questions in the empirical part of the study. It introduces the mixed methods research design and use of an international comparator case. The chapter also explains the approach taken to data collection, research ethics and data analysis.

The empirical part of the thesis is made up of three chapters which present and discuss the main findings from the research, in turn answering the three research questions as stated at the end of Chapter Five. First, Chapter Seven presents both quantitative and qualitative findings in order to understand food poverty in deprived neighbourhoods of Glasgow. Next, Chapter Eight also presents mixed methods results in an examination of the role of food banks in these same communities. Chapter Nine then brings together the qualitative findings from interviews with policy makers and strategic individuals in both Scotland and Finland in order to examine the implications of the rise of food aid for the changing role of the welfare state, proposing a framework for considering the different ways in which the food aid-welfare state relationship might be understood.

Finally, Chapter Ten concludes the thesis by summarising the answers it provides to the research questions, and identifying the contributions which it makes to advancing both empirical and theoretical knowledge in this area of study. The chapter also makes recommendations for future research and identifies the implications of the study for policy and practice development.

Chapter Two: Understanding food poverty

2.1   Introduction

The rapid expansion of food banks over the past decade has prompted widespread discussion and debate among politicians, academics and civil society about food poverty in the UK. The aim of this chapter is to develop an understanding of what is meant by food poverty, a central phenomenon under investigation in this thesis. The chapter examines how the concept has been used in the literature and offers up a working definition. A framework for how different dimensions of food poverty might be understood and experienced is also presented, focusing on the importance of a structural interpretation of the issue. The chapter examines the ways in which conceptual differences in how the term is framed imply differences in understandings of what the underlying causes are.

A key objective of this thesis is to better understand the scale and nature of food poverty in deprived neighbourhoods. Therefore this chapter also considers discussion in the literature of how food poverty should be measured. Reviewing the evidence base provided by analysis of data on food poverty as it has emerged from the USA and Canada in particular; current knowledge about the impacts of food insecurity and its associated risk factors is also explored. An understanding of such evidence is important for designing the research questions and analytical approach for the quantitative element of this study.

Having examined what food poverty is and what is known about it, the chapter goes on to discuss how it has been framed in policy discourse in the UK. Such discourse provides important context for the examination of the policy solutions which have emerged, and, in particular, the growth of food aid as a response to food poverty, which is the focus of discussion in Chapter Three.

2.2   Food poverty definition

Hunger, famine and problems of physical access to food are recognised as features of the most extreme forms of poverty, which have generally been associated with countries in the Global South. There are therefore challenges to defining food poverty, and debates about what is the most appropriate terminology to use for the phenomenon as it is experienced in wealthier, developed countries. While the term food poverty has been commonly used in

UK policy and media discourse around people on low incomes struggling in relation to food, the concept of food insecurity is more widely used internationally and in academic literature. A commonly cited definition used by Dowler et al. considers food poverty to be:

> "the inability to acquire or consume an adequate quality or sufficient quantity of food in socially acceptable ways, or the uncertainty that one will be able to do so" (2001: 2).

This definition is derived from a definition of food insecurity provided by Radimer et al. (1992). Food insecurity is understood to be experienced on a spectrum, characterised first by anxiety about being able to access enough food, followed by modifying diet to make food supplies last and finally by going without food for extended periods.

The value of the Dowler et al. definition is that it frames food poverty as a social problem and suggests a multi-dimensional conceptual framework for understanding it. It is understood not only in relation to the quantity and quality of food one has access to, but also incorporates the psychological and social aspects of having difficulty affording food. A person can be considered food insecure if they are not able to access food in ways which are common and acceptable in a society such as: "resorting, e.g. to emergency food supplies, scavenging, stealing and other coping strategies'' (Andersen, 1990: 1558). Food carries great significance for social, cultural and family life, as well as for individual identity and sense of belonging. Therefore, while an important indicator of deprivation, this thesis does not consider food poverty as just a symptom of wider poverty, but as a phenomenon to be examined in its own right. Indeed central to this research is a concern to better understand the role of food in how poverty is experienced and responded to. Adopting a narrow definition of food poverty based on food expenditure or nutritional deficiency would fail to capture the full complexity of the human experience of food poverty. This approach to defining food poverty draws on Townsend's theory of relative poverty and his conceptualisation of human needs that recognises the interdependence of the physiological and the social:

> 'The amount and cost of the food which is eaten depends on the social roles people play and the dietary customs observed as well as the kinds of foods made available socially through production and availability in markets. In short, food in all kinds of society is 'socialised'. . . . The specification of the costs of meeting minimum dietary needs in any society is as problematic as the specification of the costs of fulfilling the entire roles, participative relationships and customs enjoined of a people" (Townsend, 1993: 31).

In defining food poverty, this thesis applies a structural interpretation. This approach considers "insufficient economic access" (as contained in the definition offered by O'Connor et al. (2016: 432)) as the key factor in determining food poverty, and emphasises the significance of labour market, welfare and wider economic and social policies as the key structural barriers to sufficient food access. Such an approach draws upon structural definitions of poverty, including Lister's observation that: "structural perspectives…point to how economic, social and political structures and processes – from the global to the local – create and perpetuate poverty" (2004: 35).

Arguing for a focused interpretation of food poverty is not to take away from an appreciation of broader conceptualisations of the phenomenon, as discussed elsewhere in this chapter, and neither does it ignore the role of human agency within the food poverty experience. However, a structural framing of food poverty is to differentiate it from individualistic approaches which would locate responsibility for food poverty with the 'food poor' themselves. Influenced by Lambie-Mumford's (2017) approach to the structure-agency dynamic within the food poverty experience which is informed by Lister again, this thesis recognises that:

> "people experiencing poverty are actors in their own lives, but within the bounds of frequently formidable and oppressive structural and cultural constraints, which are themselves the product of other's agency" (Lister, 2004: 157)

The concept of 'insecurity' as it relates to food access is also helpful in understanding food poverty, in that it recognises the temporal nature of the experience. Therefore while someone may have sufficient food to feed themselves and their family today, they can be considered food insecure if they are anxious or uncertain about their future ability to do so. This definition of food insecurity is derived from a study of women on low-income in upstate New York (Radimer et al., 1992), a qualitative study from which key quantitative indicators of food insecurity were developed. As discussed in Section 2.4 of this chapter, variations of these indicators continue to be used in gathering data on household level food insecurity in North America and elsewhere. As with much of the current literature on the issue in the UK (see for example Dowler and O'Connor, 2012), throughout this thesis the terms food poverty and food insecurity are used interchangeably, as they are recognised to refer to the same multifaceted concept of struggling to afford food.

This thesis also recognises the importance of understanding food poverty in experiential terms and draws on Lister's conceptualisation of poverty which she considers "a dynamic

process rather than a fixed state", and which pays attention to the "multifarious ways in which poverty is experienced" (2004: 157 and 76). This emphasis on the lived experience is central to the enquiry of this thesis which examines the complex and dynamic ways in which food poverty is played out at the level of the individual, the household, the community, and wider society.

2.3   Dimensions of food poverty

Having explained the definition of food poverty adopted in the thesis, this section presents an examination of how the concept of food poverty has been framed in the literature and considers the multiple dimensions which shape how the issue is conceptualised and experienced. While adopting a clear definition of food poverty, it is also important to examine broader conceptualisations of the phenomenon.

This section develops a framework for examining the different factors which shape how food poverty is understood and experienced. In doing so, it seeks to identify potential gaps in existing interpretations. The framework builds upon the key factors which Dowler et al. (2001) identify as necessary to understand food poverty and draws primarily from UK literature.

2.3.1   The affordability of food

Whether people have enough money for food is central to understanding food poverty and is also a key component of broader efforts to measure poverty more generally. There are a number of ways in which the question of food affordability might be answered. It is widely known that people on low incomes spend a greater proportion of their money on food than those better off and a specific food expenditure threshold is often used as a way of identifying when someone is living in food poverty. In its 2013 report, *Hard to Swallow: The Facts about Food Poverty*, the Centre for Economic and Business Research defined households that have to spend more than 10 per cent of their income on food as being in food poverty (CERB, 2013). According to data from the 2012 *Living Costs and Food Survey*, for households in the lowest 20 per cent by equivalised income, 16.6 per cent of spending went on household food (Defra, 2014).

There are limitations to applying such threshold measures to assessing who can afford food, and indeed regional variations in food and other household costs have implications for where the threshold should be set. Dowler et al. (2001) identify a budget standard approach as a more appropriate means of understanding who has enough money for food. This approach involves costing a basic, nutritionally adequate weekly food supply and then comparing that with the income of families on low incomes. A number of budget standard approaches have been developed by poverty researchers in recent years. One model is the Minimum Income Standard (MIS) for the UK which is used as an indicator of the incomes that different household types require in order to be able to afford a socially acceptable standard of living. The MIS was first published in 2008 (Bradshaw et al., 2008), and MIS updated budgets are produced annually for different household types. These are based on research with members of the public and informed by experts (such as nutritionists), who identify the items that are needed in a minimum household budget. The budgets are then checked against expenditure surveys to ensure that they reflect actual spending patterns. MIS data is used by researchers to analyse the impact of policy changes, and at a more practical level, by some charities to target financial support. It is also the basis for calculating the Living Wage, an hourly rate set by the Living Wage Foundation.

The MIS defines income standards in ways which are about more than just survival. The group involved in developing the first MIS defined it in these terms:

> "A minimum standard of living in Britain today includes, but is more than just, food, clothes and shelter. It is about having what you need in order to have the opportunities and choices necessary to participate in society" (Bradshaw et al., 2008: 1)

Analysis of changes in income levels over time found that the proportion of people living in households with an income below MIS increased by nearly a third between 2008/9 and 2012/13 (Padley et al., 2015). Analysis of the 2016 MIS found that basic out-of-work benefits provide 39 per cent of the minimum income (net of rent and council tax) required for an adult with no children, and 56 per cent for a lone parent with one child (Davis et al., 2016).

Another model used to measure poverty based on the material wellbeing of a household is that of the Poverty and Social Exclusion UK (PSE) research project. Unlike the MIS approach, PSE does not provide a direct measure of minimum income but is based wholly on the 'consensual' approach to understanding poverty. The consensual approach, first used in the 1983 Breadline Britain study examines the public's perceptions of minimum

needs, and poverty is therefore said to be experienced by: "those who have an enforced lack of socially perceived necessities" (Mack and Lansley, 1985: 47). The 2012 PSE study involved two major surveys; a survey of publically perceived necessities, and then a living standards survey to identify who is forced to do without these necessities and therefore provide a picture of the nature and extent of deprivation in the UK. In a report analysing the 2012 PSE survey results for child poverty and social exclusion, these perceived necessities are grouped into different domains. The report highlights that five per cent of children were deprived in the food domain, which included having three meals, fresh fruit/vegetables and meat or equivalent per day (Main and Bradshaw, 2014).

In analysis of survey questions on economising behaviours, the PSE study also found, that over two thirds of adults in households with poor children skimped on food 'sometimes' or 'often' to ensure others had enough to eat. Elsewhere, this has been identified as a particularly gendered issue, with women more likely to go without in order to feed children and partners in the household or to take the strain off expenditure in other domains (Cantillon and Nolan, 2001). It has certainly been argued that food is the expenditure which people are most likely to cut back on when their budgets are squeezed. In such circumstances it is likely that households on low-incomes will not eat an adequate diet (Dowler and O'Connor, 2012). Indeed in a 2009/10 Department for Environment, Food and Rural Affairs study, many participants identified that further falls in income would cause people to eat more cheap, unhealthy, poor quality food (Dowler et al., 2011).

In addition, considering budgeting by poor households, other studies have highlighted the strategies which many develop for maximising low incomes, trading down or cutting back on certain items (Dowler et al., 2011; Kempson, 1996). According to Defra's annually published *Family Food* report, between 2007 and 2012 average households traded down to cheaper products in order to save money. The data showed that this was done to a much lesser extent among these on the lowest income, suggesting that they were already buying the cheapest products (Defra, 2013). Other reports have identified that in such cases households have cut back on food spending altogether (Northern Housing Consortium, 2015). In the Defra study of consumers' perspectives of food security as mentioned above, only 47 per cent of survey respondents on a low income said they were able to adequately feed their families all of the time (Dowler et al., 2011: 410). Developing greater understanding of food poverty experiences, the sorts of coping mechanisms adopted, and their impact on family life, will be important objectives of the empirical part of this thesis.

Household food insecurity (as defined above), like the MIS and PSE, is a direct measure of material deprivation in that it captures insufficient and insecure financial resources to meet basic needs. As Loopstra argues "direct measures provide a measure of income-sufficiency relative to needed resources and capture this mismatch with greater precision than income-poverty measures" (2014: 17). Food insecurity, or food poverty, should therefore be recognised as a potent indicator of poverty – driven by a lack of financial resources.

Related to the question of whether people have enough money to buy food, is the other side of the food affordability issue – how much do people have to pay for food? Since the world food price crisis in 2007 when the price of food globally rose dramatically (FAO, 2011), food has exerted greater strain on household budgets, and, as is stated in a Defra publication of food statistics: "A rise in food prices is more difficult for low income households to cope with because those on low incomes spend a greater proportion of their income on food" (Defra, 2014: 18). In the 2014 MIS recalculation, the cost of a minimum food shopping basket was found to have increased faster than general food inflation. This was said to be associated with prices of lower cost food rising more than average. However, the 2016 MIS report highlighted:

> "the overall influence of rising food prices noted in previous years has gone into reverse. Food prices generally have fallen – by a cumulative 6% since their peak in early 2014, according to the Consumer Prices index (CPI) – while general prices have remained stable" (Davis et al., 2016: 22).

While rising food prices disproportionately affect those on lower incomes because they spend a higher proportion of their money on food, they may also have to pay more depending on where they live and shop. As Dowler et al. (2001) highlight, issues of availability of, and access to low-cost nutritious food can mean that the costs for many people on low-incomes may in fact be higher than suggested by the budget standard approach described above.

2.3.2 Physical access to affordable food

There is not a shortage of food in the UK, in fact a vast variety of foods are readily available and abundant in all but the most remote rural areas of the country. To identify physical access to food as a dimension of food poverty involves an examination of the role of neighbourhood social and physical environments on food consumption. This perspective

considers how spatial inequalities impact on diet and how the local food environment might have an independent influence over what people buy and eat. The term "food desert" was reputedly first used by a resident of a housing association in the west of Scotland in the early 1990s to capture the experience of living in a deprived neighbourhood where food was expensive and relatively unobtainable (Cummins, 2014). In the mid-1990s the concept came to be used by public health policy makers in the UK where poor access to healthy affordable food was linked to poor health and social exclusion in deprived urban neighbourhoods.

Some researchers at this time reported that the quality and variety of food items in local shops was lower, and prices higher than in large supermarkets (Piachaud and Webb, 1996). Such research mapped food access and sought to evidence the impacts of the rise of out-of-town supermarkets in the 1980s and 1990s, and the decline of local high street food shops on the economic and physical access barriers to affordable healthy foods experienced by people on low incomes living in both rural and inner-city areas. The issue of food deserts garnered much policy and research interest at the time, and was valuable in bringing structural determinants into the food poverty discourse and closely linking social exclusion and health inequalities in policy development (Wrigley, 2002). Indeed in their analysis of food deserts at this time Caraher and Lang called for a shift in policy discourse, asking "whether too much attention has been given to trying to alter individual behaviour and not enough to tackling the circumstances within which people live" (1998: 203).

However, evidence of the existence of food deserts in UK cities has been mixed, and in the context of considerable public health policy interest in the issue, Cummins and McIntyre (2002a) warned against the over-interpretation of a few small scale studies. Indeed several studies have suggested that deprived neighbourhoods in urban areas in the UK may in fact have shorter travel times to the nearest food shop compared with the least deprived (Cummins and Macintyre, 2002b; Pearson et al., 2005; Smith et al., 2010). In addition, research in Canada where household food insecurity is routinely monitored has highlighted that in deprived Toronto neighbourhoods, food security did not appear to be mitigated by proximity to food retail or community food programmes (Kirkpatrick and Tarasuk, 2010). The researchers comment that their findings raise questions about the extent to which neighbourhood-level interventions to improve food access can mitigate problems of food insecurity that are rooted in resource constraints.

It has been argued that food deserts, as a plausible problem with seemingly simple policy solutions, have been assumed to exist without sufficient engagement with the evidence, or

appreciation of the complex relationship between neighbourhood deprivation, health inequalities, diet, and access to healthy affordable food (Cummins and McIntyre, 2002a; Wrigley, 2002b). As examined in this thesis, financial, social, and cultural, as well as geographic factors need to be considered when examining determinants of food access in deprived areas.

2.3.3 Food budgeting and cooking skills

While issues of affordability and access focus on structural determinants of food poverty, usage – people's food shopping, budgeting and cooking – frames food poverty in individual, behaviourist terms. Discourse on food poverty in developed countries has come to recognise how the ready availability of cheap, processed food contributes to poor diets and diet-related diseases among those on low incomes (Lang et al., 2009; Dowler and O'Connor, 2012). Certainly the high prevalence of obesity and other conditions related to over-consumption of foods high in sugar, fat and salt among the less well-off adds complexity to discussions of food poverty in societies that do not experience the same levels of starvation, malnutrition or undernourishment as other parts of the globe. National food and nutrition surveys have consistently shown that poorer households eat more processed meats, biscuits and full-fat milk, and less of foods recommended for health such as oily fish, vegetables and wholemeal bread, than richer households. In 2012, the lowest ten per cent of households by income purchased the least fruit and vegetables at an average of 2.9 portions per person per day, eleven per cent less than in 2007 (Defra, 2014). In this context, as Dowler et al. suggest:

> "the default position is to question individual-level competencies within low income households, and focus on sufficiency of nutritional knowledge, and capacity to budget, shop and cook" (2012: 44).

However, studies have found that those on low incomes do not have fewer of these competencies than the rest of the population and in fact, when it comes to managing money, many have developed complex strategies for food shopping on a tight budget (Dowler et al., 2001; Kempson, 1996). Yet living in food poverty means it can be very difficult to bulk buy or to plan ahead. Food shopping is often a daily activity and determined by when and where special offers or discounts are available.

Lang et al. (1999) also point out that changes in cooking behaviours and reliance on pre-prepared food have occurred at a societal level, suggesting that such practices are related to broad cultural changes in how we eat, rather than deficiencies in particular social groups. In a report drawing upon the Health Education Authority's 1993 Health and Lifestyle Survey, the authors warn that:

> "Cooking skill classes aimed at the poor and deprived of context run the risk of further disadvantaging the poor and missing the bigger picture of why people cannot or choose not to cook. The choice not to cook from basics is not always related to a lack of skills but to aspects of food culture" (Lang et al., 1999: 3)

Indeed the same report highlights that those from higher social grades were more likely to have eaten pre-prepared meals in the last week compared with those from lower social grades- nearly a third in the former compared with a sixth in the later (Lang et al., 1999: 9).

More recently, in her ethnographic study of food bank users in Stockton-on-Tees, Garthwaite (2016a) found that it was lack of access to cooking facilities or equipment, as well as lack of income to afford the food items or fuel necessary to prepare a nutritious meal, which led to poor diet among people using food banks, rather than a lack of knowledge or motivation to eat well. In addition, high energy costs and the expense of pre-paid energy meters which are used by many low-income households mean that many struggle to afford the energy necessary to cook or prepare meals from scratch. This double bind of food and fuel poverty is often termed the 'heat or eat' dilemma (Lambie-Mumford and Snell, 2015) and is often an additional barrier to eating well for people on very low incomes.

2.3.4 Social participation and food

The place of food in daily life goes beyond its nutritional role. It is important to consider the ways in which food poverty can shape people's participation in, or exclusion from the social and cultural practices associated with food access and consumption. As Dowler et al. state: "food is a general marker of social exclusion and those who are unable to eat in ways that are socially acceptable can also be said to experience food poverty" (2001: 3). Similarly, Riches (1997: 65) argues that if a person cannot afford to buy food in shops and supermarkets used by others in their society and is forced to rely on charitable food provision, then they too, whilst not necessarily as undernourished as those living in

contexts of famine, "can be recognised as experiencing hunger". From this perspective, food poverty might therefore be considered a consequence of both absolute and relative deprivation (Riches, 1997); both a lack of sufficient nutrients leading to mal- and under-nourishment, and an exclusion from social and cultural practices and settings leading to social isolation and increased inequality.

However, stigmatisation associated with food and how and where it is accessed extends beyond charity hand-outs. Food retailing, and even particular products and brands are significantly stratified and there are often great differences across class, cultural and gender lines in the ways in which people consume food. Such social differences vary across cultures and national contexts. For example, there is a less predictable relationship between fruit and vegetable consumption and social class in southern European countries than in northern ones. A study of social variations in diet across seven European countries observed that lower educational level was associated with higher consumption of fresh vegetables in southern European countries (Trichopoulou et al., 2002: 557).

Considering food poverty from this perspective of participation and exclusion, Dowler and Caraher (2003) express particular frustration at a lack of policy focus on food access and consumption as an issue of citizenship. Similarly, Lambie-Mumford comments on the impact of limiting our analysis of food poverty, stating:

> "an approach to food poverty framed in terms of healthy eating runs the risk of promoting an idea of food as primarily a means to better health and physical efficiency, and can detract from a broader appreciation of how constrained food experiences limit social participation and inclusion" (2012: 551).

In addition, Caraher and Lang have argued for: "recognition of cultural and experiential dimensions to reports of modern food poverty" (1998: 205). Drawing on qualitative evidence of a study of the shopping habits of families on low-incomes in the late 1990s which highlighted a number of social factors which influence food choices, they reiterate the point that: "food is imbued with social and cultural characteristics and does not merely operate at a biological or dietetic level" (1998: 205).

An understanding of food poverty which frames it in terms of social justice and human rights has potential to bring greater attention to the issues of participation and citizenship. Amartya Sen's (1981) discussions on food and inequality, noting that food is both a consumer good and a crucial aspect of citizenship, have been influential in shaping this

discussion. The UN Special Raporteur on the Right to Food provides the following expanded definition of the right to food:

> "The right to have regular, permanent and unrestricted access, either directly or by means of financial purchases, to quantitatively and qualitatively adequate and sufficient food corresponding to the cultural traditions of the people to which the consumer belongs, and which ensure a physical and mental, individual and collective, fulfilling and dignified life free of fear" (United Nations Human Rights Office of the High Commissioner, 2017)

In response to the recent rise in people using food banks and other forms of charitable food aid, a number of commentators have called for a rights-based approach to be adopted in policy making (Lambie-Mumford, 2013; Cooper et al., 2014).

This brief examination of the dimensions of food poverty has considered how it might be understood in relation to: affordability; access; skills; and social participation. While interconnected, each framing foregrounds a particular way of understanding what the problem is. This thesis argues for an approach to food poverty that recognises it as fundamentally a problem of low income and warns against interpretations which ignore its structural determinants and reinforce myths that individual failings are to blame. At the same time, as this section has highlighted, it is also necessary to consider the social and cultural roles of food and how they might shape and be shaped by experiences of food poverty. In this study, applying both qualitative and quantitative methods will be important to explore the different dimensions of food poverty and how it is experienced.

Attempts to define and interpret food poverty in the UK have a much shorter history than in North America. Here the notion of food security has more commonly been used when considering factors affecting food production and consumption at global and national levels. However, through the evolution of the concept, as Dowler et al. (2011: 405) highlight:

> "critical paradigm shifts in approach have been from global to national, household and individual focus; from a perspective on food as primary need to one where livelihood security is seen as key; and from objective to subjective indicators as legitimate sources of causal analysis and policy response".

As such, this thesis, which emphasises the lived experience of food poverty and recognises it as a relative term, also understands food poverty to be a phenomenon which can be

observed and discretely measured. It is to the concept of food poverty measurement which this chapter now turns.

2.4   Food poverty measurement

How and what is chosen to be measured points to important conceptual assumptions about what the problem is and what counts as valid evidence. Approaches to measurement also have implications for policy making and suggest the types of responses to the problem which are likely to be considered appropriate. Who decides to measure something, and what their aims are in doing so, are also important for shaping what we understand the issue to be.

Various approaches have been taken to define and apply a measurement of food poverty. Indeed food and diet have long played a key role in understanding poverty since the earliest attempts to measure it. Boyd Orr's 1936 survey, *Adequacy of Diet, Food, Health and Income* sought to draw upon "the newer knowledge of nutrition" to understand the relative importance of income as the cause of "faulty diets" among the British population (Boyd Orr, 1936). It was the knowledge of nutritional scientists which Rowntree also turned to when developing his poverty line. He sought to identify a minimum calorific intake and nutritional balance required for basic health. He then surveyed the cheapest costs of these foods in order to develop what he intended to be a robust, unchallengeable definition of what he called 'primary poverty' (Glennerster et al., 2004: 23). For these early poverty researchers, food and diet were intended to provide objective, absolute measurements of poverty, and the poor health resulting from a poor diet a clear indicator of the impact of poverty upon national efficiency.

As poverty measurements have evolved, questions about food and diet have continued to be important indicators. As mentioned above, what is measured largely depends upon the aims and perspectives of those designing and commissioning the study. Food expenditure, food intake and perceptions about basic food requirements, have all been examined as part of wider investigations into poverty and health inequalities in the UK, as discussed in Section 2.3. For example the *Living Costs and Food Survey* (Office for National Statistics, 2017) which collects information on spending patterns and the cost of living, has been used to suggest levels of food poverty based on proportion of income spent on food by different socio-economic groups (Douglas et al., 2015). Some one-off studies have focused

specifically on food and diet in relation to material deprivation. For example the *Low Income, Diet and Nutrition Survey 2003-2005* (National Centre for Social Research, 2008) was commissioned by the Food Standards Agency to examine the dietary habits and nutritional status of those on low income in the UK. While providing useful information on health and nutritional intakes, such data is highly limited in its ability to assess the extent of food poverty as the multi-dimensional, relative phenomenon described above. Indeed no systematic measurement of food poverty per se has to date been developed or implemented in the UK.

At a European level, recent analysis of the *European Quality of Life Survey* examined changes in levels of food insecurity across different countries. This study looked at responses to a question that has been a longstanding component of deprivation scales, 'could your household afford a meal with meat, chicken or fish every second day if you wanted it?' It found that food insecurity had risen across many European countries since the global financial crisis and that the UK and Ireland had experienced the sharpest post-2008 rise (Davis and Baumberg Geiger, 2017).

In the USA, food stamps have long been the basic form of social assistance provided by the Government, and therefore food, diet and nutrition have been more closely associated with efforts to measure poverty. In the 1980s national attention was drawn to the issue of hunger in the USA and a Task Force on Food Assistance was appointed by President Reagan to investigate claims of rising levels of hunger (Radimer, 2002). It examined a range of data, including undernutrition data and numbers using food aid. The Task Force concluded that while there was evidence of hunger, there was no indicator to estimate its extent or whether it was increasing (Radimer, 2002).

Research undertaken for a doctoral thesis at Cornell University in the late 1980s sought to develop a conceptual framework and definition for hunger and indicators for measuring it (Radimer et al., 1992). This study involved qualitative research with low-income women in order to identify indicators of food insecurity at a household level. Including many items in the Radimer/Cornell study, the US Department of Agriculture (USDA) developed an 18-item scale to measure food insecurity "from its least severe to its most severe aspects" (Radimer, 2002: 862). At the least severe end of the scale, respondents report anxiety about running out of food, while at its most severe they report children going for a whole day without food. The level of severity of food insecurity experienced by a household is determined by the number of affirmative responses given to the survey. An important advantage of the food security module is that it refers to the past twelve months,

recognising that one's level of food insecurity is not a permanent state and allowing periods of food insecurity experienced earlier in the year to be captured. The full US Household Food Security Module is used in a range of national surveys.

Versions of the survey have been developed and applied in other countries, in some cases modifying the questions to reflect cultural and societal differences in food practices. Adaptations of the Radimer/Cornell food insecurity scale have been applied in settings as diverse as Iran and Tanzania. A study which sought to test the validity of the measure among low-income households in Tehran concluded: "results lend support to the utility and applicability of experience-based measures in varying cultural communities" (Zerafati Shoae et al., 2007: 855). When examining the application of these measurement tools, it is vital to recognise that the interpretation of results and how they are used to classify food security status is arbitrary and highly political. For example in the USA, 0-2 affirmative responses on the scale have been recently reclassified by the USDA, from indicating an 'at risk' status, to being considered 'food secure'. Meanwhile in Canada this group is identified as experiencing 'marginal food insecurity' (Tarasuk et al., 2016).

A similar experience-based metric of food insecurity has been developed by the Food and Agricultural Organisation of the United Nations (FAO). The tool includes eight questions similar to those used in the USDA questionnaire in order to gather self-reported data on food insecurity at the household and individual level – applying the same theoretical construct of food insecurity as experienced on a spectrum ranging from mild (worrying about ability to get food) to severe (experiencing hunger) (FAO, 2016). The tool was developed in order to allow for international comparison of food insecurity across 140 countries, with the FAO recognising that the different levels of food insecurity experience are common across cultures. The most recent data from the FAO indicates that levels of severe food insecurity in the UK are the second highest in Europe at 4.2 per cent, second only to Albania where the rate is 10 per cent (FAO, 2017).

While the UK does not routinely gather data on levels of household food insecurity, the Food Standards Agency (FSA) included ten questions from the USDA Household Food Security Survey Module in its 2016 *Food and You* survey (Bates et al., 2017). The findings offer the first national-level data on levels of food insecurity in England, Wales and Northern Ireland and show that 21 per cent of the adult population is food insecure. The Scottish Government has included three questions of the *Food Insecurity Experience Survey* in the 2017/18 *Scottish Health Survey*, with a view to including the full module in subsequent surveys. While such developments are important in helping to develop an

understanding of the scale of the issue in the UK, the lack of consistency in approach or commitment to on-going monitoring, limit capacity for comparisons over time or between devolved nations.

Measuring food insecurity is important because of the significant effects it has been found to have on a range of health, wellbeing and other outcomes. Studies in North America have found that food insecurity has a negative impact on health as a result of compromised nutrition, but that it also has a significant relationship with non-diet related conditions. Food insecure adults have trouble managing chronic health conditions (Seligman et al., 2010; Ippolito et al., 2017) and food insecurity in childhood has been found to have a long-term impact on physical and mental health (McIntyre et al., 2013; Kirkpatrick et al., 2010). Given that the definition of food insecurity incorporates the experience of anxiety about running out of food, it is important to consider its psychological and emotional impacts. Rates of poor mental health, depression and anxiety are high among food insecure populations. Adults experiencing food insecurity have been found to be more likely to develop mental health conditions (Heflin et al., 2005). A qualitative study of food insecure households in Quebec identified psychological distress as central to the experience, including feelings of alienation, lack of control over food, indignity and shame (Hamelin et al., 2002).

Research in North America has sought to identify the socio-demographic characteristics of food insecure households and potential determinants of household food insecurity status. Analysis of survey data consistently shows low-income as a predictor, and households headed by lone mothers, families living in rented accommodation, and those reliant on social security, all have increased vulnerability to food insecurity (Che and Che, 2001; Vozoris and Tarasuk, 2003; Matheson and McIntyre, 2014). Source of household income has also been found to be important: in Canada, households reliant on out of work benefits are more likely to be food insecure than those whose main source of income is employment wages. However, it has also been highlighted that the majority (61 per cent) of food insecure households in Canada are in work (Tarasuk et al., 2013). Furthermore, examination of the dynamic relationship between household food insecurity and income and has shown that income and employment changes within households are associated with changes in severity of food insecurity (Loopstra and Tarasuk, 2013).

While limited data is available, some longitudinal studies in the USA have allowed for analysis of factors associated with movement into and out of food insecurity. One study found that those who entered food insecurity were more likely to be Black; have a

disability; or be lone mothers, than those who remained food secure (Ribar and Hamrick, 2003). A further longitudinal study found negative changes in mental health status and declining household incomes were associated with increased odds of food insecurity (Heflin et al., 2007). Research has also suggested that health status may be a predictor of food insecurity. For example analysis of survey data in Canada found that ill-health may predispose households to food insecurity (Tarasuk et al., 2013).

This section has provided a brief overview of food insecurity measurement, highlighting ways in which experience-based metrics have been developed which allow self-reported data on food insecurity to be systematically gathered. It has also considered the available evidence on the drivers and impacts of food insecurity from analysis of food insecurity data in North America. Such evidence points to the relationship between: food insecurity and low income; food insecurity and ill-health (particularly poor mental health); and the vulnerability of certain household groups to experiencing food insecurity. This evidence provides important theoretical justification for the analysis of certain variables in the empirical part of this study.

Having thus far explored both theoretical and empirical knowledge of food poverty, the chapter now considers food poverty in the context of social policy. The following section briefly examines how food poverty has been framed by policy makers in the UK over the past thirty years, highlighting the ways in which different dimensions of the issue may be prioritised in order to justify different policy responses.

2.5   Policy framing of food poverty

As Bacchi (1999) argues, it is important to recognise policies not as impartial presentations of solutions to particular problems, but as constituting competing interpretations, or representations of political issues.

Policy attention to food and food security in the UK has been generally focused at a national level, laying out strategies for increasing sustainable food production in the context of declining levels of self-sufficiency, and mitigating against potential disruptions to our food supplies caused by climate change and other factors (Defra 2006; 2013; 2014). As Lambie-Mumford (2013: 86) highlights, such policy interest has tended to come not from those departments of government with specific social policy remits, and most policy discussions of household level food security have largely framed the issue as a "private,

rather than a public concern". Indeed in 1999 Lang described food poverty experienced by households as a "Cinderella subject within public policy" (1999: 12), warranting minimal action or debate, similarly Dowler (2002: 699) has commented on the "invisibility of food as a component of social policy where it relates to poverty".

It was under John Major's Conservative Governments (1990 – 1997) and the creation of a Nutrition Taskforce in the early 1990s, when the parameters of these discussions began to widen and there was growing interest in the impact of low income on diet and the difficulties of people on low income in obtaining a healthy diet (Dowler and Calvert, 1995; Leather 1996). However Lang, who was a member of the Food and Low Income Project Team established under the Nutrition Taskforce, points out, social security benefit levels were excluded from discussions, "when everyone knew that was central" (Lang 2001: x). Indeed the Task Force failed to acknowledge the structural causes of food poverty, and recommended the encouragement of local projects, as opposed to national action, to be the best way to address it.

The New Labour Government which came to power in 1997 provided a more favourable policy environment for greater focus on the structural drivers of food poverty. Indeed the Government's focus on tackling health inequalities included an interest in access to food which was listed in the Acheson Inquiry (1998) as a key contributing factor to health inequalities. In the context of the Government's wider policy priorities at the time around health inequalities and neighbourhood renewal, physical access to food and the concept of the 'food desert' as interpretations of the food poverty problem held particular appeal. New Deal for Communities (NDCs), New Labour's flagship area-based regeneration initiative, included place-based interventions which sought to improve food access in deprived neighbourhoods (Lambie-Mumford, 2013b). However, as discussed at section 2.2, Wrigley (2002: 2032) suggests that policy development on food deserts ran ahead of available, "systematic research documenting their prevalence and distribution". Commenting on the extent to which the term 'food desert' quickly became established in policy discourse in the mid-1990s, Wrigley (2002: 2032) highlights how it brought together different key issues of policy and research interest at the time and:

> "provided a metaphor for the complex nexus of interlinkages between increasing health inequalities, retail-development-induced differential access to food retail provision, compromised diets, undernutrition and social exclusion".

In addition, despite the stated objective of improving access to services for deprived areas, in her case study research on food-related project work in two New Deal for Communities partnerships, Lambie-Mumford (2013a) found food was largely conceptualised as an issue of health and healthy behaviours. She found that this limited conceptualisation of food experiences meant that interventions were focused on promoting healthy eating and improving cooking skills, rather than on activity which might challenge structural issues which limit food access such as local retail or transport provision. This health-based approach to food poverty taken by the NDCs, Lambie-Mumford suggests, is perhaps reflective of wider dominant policy discourse which presents food issues in terms of individual behaviour and consumer choice. Where policy responses to food poverty frame hunger as a problem of food and health, the solutions presented can often depoliticise the issue and separate it out from the wider context of structural and material inequalities which have been widely evidenced as the drivers of food poverty.

This tension between individual and the structural interpretations of food poverty has continued in current debates. It is the recent growth in food banks and the extension of charitable food aid to a wide range of social security recipients and people in work which has brought food poverty back up the political agenda. According to data from the Trussell Trust, the primary causes for referrals to its food banks in recent years have been benefit delays, low income and benefit changes (Trussell Trust, 2017). Austerity measures and reforms to social security have occurred at the same time as the growth in food banks and there has been concern, and, as discussed in Chapter Three, increasing evidence that the two are linked. In this context there has been significant political and policy interest in determining the drivers of this growth in food bank use, and specifically in evidencing the link with the UK Government's recent welfare reforms (Cooper et al., 2014; Scottish Parliament., 2014).

The emergence of food banks in the UK has brought food poverty high up the political agenda, and it has been debated across a wide range of policy and civil society sectors. The affordability dimension of food poverty, driven by structural factors which keep incomes low, has received renewed attention as the sheer numbers of people turning to charitable food hand-outs has prompted many to challenge the behavioural and consumerist interpretations most commonly applied to food poverty. While many in Government have maintained that it is an increase in supply of food banks which is driving such growth (Hansard, 2013; 2015) this position has been widely discredited. A Defra commissioned report published in February 2014 states: "there is no systematic evidence on the impact of

increased supply, and hypotheses of its potential effects are not based on robust evidence" (Lambie-Mumford et al., 2014). Meanwhile opposition parties and civil society organisations have argued that the growth in food banks is evidence of the failures of current social policy (Hansard, 2015; Cooper et al., 2014). Indeed, the Scottish Parliament's Welfare Reform Committee also stated in June 2014 that it is, "convinced by the volume and strength of the evidence that there is a direct correlation between Welfare Reform and the increase in use of food banks" (Scottish Parliament, 2014).

Despite this concern regarding the impact of low incomes on food poverty, much political and policy discourse at a UK level continues to emphasise food budgeting and cooking skills as assumed solutions to the problem. For example, the report from the All Party Parliamentary Inquiry into Hunger and Food Poverty (APPI) states that: "we have heard how some families may require more intensive help to ensure they have sufficient budgeting skills and are able to be successful parents" (APPI, 2014: 29). Such a position has been met with much criticism by commentators and academics who have long presented evidence which undermines such behavioural responses to poverty. As Dowler and Lambie-Mumford (2015: 8) assert:

> "challenge to human efficiency arguments on the grounds of inadequacies of income (from waged work or social security) is well rehearsed and as consistently ignored, since it suits governments to reduce public expenditure and pass on responsibility for the health and social consequences for inadequate food intakes to those who experience and embody them"

The tone of the APPI report was characterised by Dowler and O'Connor as typical of political and policy responses to food poverty developed within neoliberal states, whereby: "the default position is to question individual-level competencies within low income households, and focus on sufficiency of nutritional knowledge, and capacity to budget, shop and cook" (2012: 44).

An important aspect of the empirical work of this thesis will be to consider how policy makers in both Scotland and Finland currently interpret the problem of food poverty, as the dimensions of food poverty which they emphasise will likely inform the sorts of policy solutions which they present and where they consider responsibility for addressing the problem to lie. This brief discussion of the near-history of food poverty policy in the UK indicates that policy interpretations are likely to be informed by other current policy interests and agendas, as well as prevailing political ideology

2.6   Conclusion

This chapter has considered what food poverty might look like, arguing for the importance of recognising it as a multidimensional phenomenon. The chapter has also considered how an experience-based measurement of food poverty might be useful in attempting to quantify this complex matter and gave a brief overview of the evidence of its drivers and impacts from contexts in which it is routinely monitored. The need to recognise the social and cultural aspects of food poverty and the important role of food in participation have been highlighted, while emphasising a structural framing of the issue which acknowledges that lack of food is ultimately a matter of lack of income. This examination of the nature of food poverty and how it is understood in the literature provides a necessary framework for how the matter will be approached through the empirical work of this thesis.

A brief examination of how food poverty has been framed in UK policy in recent decades provides important background to Chapter Three which focuses on charitable food aid and food banks in particular, as a response to food poverty and the central phenomenon under investigation in this study. The discussion of food poverty and its social policy framing in this chapter also prompts a number of questions examined in Chapter Four which seeks to take a broader theoretical and comparative view of the role of food within the welfare state.

Chapter Three: Understanding the charitable food aid response

3.1 Introduction

The motivation for pursuing this thesis emerged from a curiosity and concern about the rapid growth of charitable food banks in the UK in recent years. The provision of food charity by church and other voluntary organisations has a long history which pre-dates the establishment of the welfare state and it is beyond the scope of this thesis to trace it in detail. However in order to understand the recent growth of food banks in the UK, it is important to locate it in the context of the changing role of the voluntary sector in recent decades in relation to food. A theoretical analysis of these roles and relationships is offered in Chapter Four.

The term 'food aid' has been increasingly used in the UK to describe these new forms of voluntary sector food assistance. A report from Defra defines food aid as:

> "an umbrella term encompassing a range of large-scale and small local activities aiming to help people meet food needs, often on a short term basis during crisis or immediate difficulty" (Lambie-Mumford et al., 2014: iv).

This thesis further defines food aid as a charitable intervention, distinguishing it from forms of state-provided food assistance. The following sections of this chapter examine different forms of food aid and how they have evolved in different contexts including: surplus food redistribution; food banking; and community food initiatives.

The aim of this chapter is to examine the phenomenon of modern-day charitable food aid within wealthy countries more broadly, in order to better understand how and why the expansion of food banks has occurred in the UK over the past decade. The chapter considers the development of different forms of food aid in recent times, touching on how this might represent an evolution in the role of the voluntary sector within the welfare state. It also reviews the emerging evidence base and critical debate around the growth of food banks in the UK, as well as drawing on literature from Canada, the USA and other European countries. This contextualisation is important for the empirical work of this thesis, providing vital background to the topic under investigation and helping to identify relevant gaps in the evidence and to frame the emerging research questions.

3.2   Surplus food redistribution

Modern day consumer society generates a considerable amount of surplus food. Surplus food is that which is consumable, but has become surplus to the market and unsellable. It is, as Alexander and Sanje (2008: 1291) describe, "surplus to a retailer's ability to generate profit". Food may become surplus at different points in the supply chain, for example at the retailers this may be because of damaged or incorrect packaging, over-ordering, out of date promotions, or end-of-line runs. The use of commercial cosmetic standards for fresh food also generates a large amount of surplus at the point of production (Caraher et al., 2016). The global scale of food waste is significant. WRAP estimates that by 2030 global greenhouse gas emissions could be lowered by as much as 1 billion tonnes CO2eq per year through food waste reductions (WRAP, 2015). In this context, as Midgley (2013: 1874) states "food poverty and food waste are potent symbols of inequalities and inefficiencies found in contemporary food systems". Over recent decades infrastructure has been developed to enable the redistribution of this waste, or surplus food to people who might not otherwise be able to afford to buy these items when they are in the shops. Surplus food forms a central component of the food aid provided in many western countries.

National and international agricultural policies have often led directly to over-production, and therefore the generation of surplus food. For example in the 1970s and 1980s under the European Union's Common Agricultural Policy (CAP), financial incentives for farmers to produce food led to significant overproduction. Similarly in the USA farmer subsidy policies of the early to mid-20th Century generated considerable surpluses (Poppendieck, 2014). It was the desire to make use of these surpluses without distorting markets which prompted the development of processes and programmes of redistribution. The EU's Food Distribution programme for the Most Deprived Persons (MDP), which was seen essentially as part of agriculture policy, ran from 1987 until 2013, and distributed surplus food through aid agencies within member states (Caraher, 2015). Reforms to CAP and rising food prices in the early 2000s meant the redistribution of surplus food, from an economic and agricultural perspective, was no longer required and MDP was stopped. However, under pressure to continue to address the social demand for food aid, the EC committed 3.8 billion euros to a new social programme – Fund for European Aid for the Most Deprived (FEAD) – for the six year period 2014 – 2020.

In many instances then, models of formal charitable food aid were motivated at least in part by economic or environmental concerns to find a use for surplus food. At a national

level, the redistribution of surplus food from the retail sector has, over recent decades, become an established part of third sector activity within the UK. Surplus food is collected from supermarkets and food producers by third sector agencies which store, sort and then deliver from retailers to local charities who use it to prepare meals or food parcels for their service users. This model of food provision for local charities has been largely welcomed by policy makers and politicians, perceived as a logical response to the dual problem of vast amounts of food waste on the one hand, and the growing numbers struggling to afford food on the other.

While it is the austerity and welfare reform policies of the Coalition Government which, as discussed previously, are seen to have precipitated recent rapid expansion in food banks across the UK, it is New Labour's encouragement of a more professionalised third sector and of more public-private links which is recognised as having established a favourable policy landscape in which early models of surplus food redistribution could develop (Hawkes and Webster, 2000; Lambie-Mumford 2015). Indeed in 2000 John Prescott, then Deputy Prime Minister, was quoted as stating:

> "Retailers' involvement in Crisis FareShare [charity which coordinates surplus food redistribution] is an inspiring example of how effective partnerships between the voluntary and business community can make a real impact on contributing to improvements in the lives of homeless people" (Hawkes and Webster, 2000)

In 2006 the approach was first recommended by Defra in their Food Industry Sustainability Strategy. In their Food 2030 Strategy, the benefits, both ecological and environmental, of surplus food being "shared with or redistributed to vulnerable people" (Defra, 2010: 56) were stated even more explicitly. Such practices were recommended in order to help enable "low income and other vulnerable groups ... [have] access to affordable, nutritious food to give them food security" (Defra, 2010: 13).

In the UK Fareshare is the largest national distributor of surplus food with twenty distribution centres across the country providing food to over 1,700 charities (Fareshare 2015). The premise of Fareshare's work is that providing food to agencies such as homeless hostels which already serve meals to their clients saves the charities money which they can redirect into other areas of their work. According to their website, Fairshare handles two per cent of the surplus food available in the UK (Fareshare, 2015). Currently Fareshare provide food for a wide range of services including womens' refuges, youth organisations, and older people's lunch clubs. Certainly the valuable role of surplus food in

initiating and maintaining client contact with support services such as these has been highlighted (Midgley, 2013).

However the redistribution of surplus food is a highly contentious practice, from both food poverty and food waste perspectives (Midgley, 2014: 1874; also Alexander and Smaje, 2008). Indeed as early as 2000, when organisations such as Fareshare were in their infancy, an enquiry concluded that the actual impact of food redistribution schemes on food insecurity and nutritional outcomes, given their limited reach and unpredictable coverage, was minimal (Hawkes and Webster 2000). In addition to concern as to the capacity of food redistribution to meet nutritional needs, the stigma associated with surplus food, and its impacts on those who receive it, has also been highlighted. This perspective relates to the social participation dimension of food poverty and the importance of the social acceptability of how food is accessed, as discussed in Chapter Two.

Midgley (2013) describes the process of re-qualification of surplus food whereby it becomes 'othered' – adopting a place outside of normal market mechanisms. Tarasuk and Eakin (2005) have also commented on how the redistribution of surplus food creates an ad-hoc secondary food system. Consequentially consumers of surplus food themselves become 'others', experiencing both material inequity in receiving food which is perceived to be sub-standard, and process inequity through being unable to participate in the mainstream market system of food access (Midgley 2013: 1878). While the high quality of the food being redistributed is emphasised by food redistribution charities in an attempt to minimise this experience of 'otherness', the process of food redistribution is inherently one of power imbalances which restricts the agency of those in receipt of the food (Tarasuk and Eakin, 2005; Lambie-Mumford, 2017). This loss of agency is an important issue for analysis when considering the experience of poverty and poverty relief measures which, across diverse social, cultural and political contexts, has been found to attract significant social stigma (Narayan et al., 2000; Walker et al., 2013). Shame and stigma associated with food poverty and food bank use are of particular interest for this thesis and are discussed in more detail below.

For Lambie-Mumford (2015: 10) the processes of accessing redistributed surplus food are characterised by: "the exclusion, the lack of choice, the vulnerability and neediness, and the 'otherness' of the experience". She also argues that "the lack of rights of recipients… and the reliance on volunteer labour forces further distances the emergency food system from that of commercial markets and social security provision". Such features of the charitable food redistribution model could be seen to reflect wider shifts in the state-third

sector relationship, and changes to role of the welfare state in meeting people's basic needs which are explored in more depth later in this thesis. Indeed in 2000 Hawkes and Webster highlighted the link between the growth of surplus food redistribution and the shrinkage of state funded welfare systems, suggesting (2000: 23): "it could be argued that the privatisation of welfare in the UK is not, and will never be, so widespread as the U.S. and, since the scale of surplus food redistribution in the UK is so small". At the time they concluded surplus food redistribution in this country to be no more than what Poppendieck (1998) deemed "a kindly add on" to an adequate state welfare system. However, since then models of charitable food aid in the UK have developed and their role expanded to the extent that their position as additional to the welfare state might be called into question.

The most significant development in food aid provision in the UK since these early models of surplus food redistribution has been the expansion of formal food banking systems. While surplus food is not a central feature of food banking in the UK, which is largely supplied by donated food, elsewhere food banking systems are supported by the redistribution of supermarket surplus. Section 3.3 examines the nature and origins of food banking, considering how it has evolved in different countries and exploring the existing evidence base as to the drivers and impacts of food bank use.

3.3 Understanding food banks

The terminology of the food bank varies by country and region. In the USA and many European countries the food bank is where food is stored and then distributed to local 'food pantries' (the American term) or other charitable organisations where people can go and collect a parcel of food free of charge. In the UK, the food bank is the initiative which provides food parcels directly to people in need. According to Gentilini (2013: 8), food banks are characterised by being "in-kind and informal" programmes, this, she argues, makes them fundamentally different from statutory food assistance measures such as the formal, voucher-based U.S. Supplemental Nutrition Assistance Program (SNAP). Coordinated systems of food banking - whereby surplus and donated food is stored, packaged and distributed to people directly - originated in North America and therefore this examination of the nature and development of food banking begins there.

3.3.1 Food banks in North America

In the USA food banks are largely run by faith-based charitable organisations and have become highly professionalised national operations. Government policy and legislative developments in the late 1960s and 1970s facilitated the expansion and embedding of the model as a principle form of help for people in need. In this context, and given on-going cuts to state welfare, Second Harvest (the largest network of food banks in the US) continued to expand, becoming one of the ten largest charities in the United States. Rebranded as Feeding America, the network now has 60,000 food pantries and meal programmes across the country and claims to serve one in seven Americans (Feeding America, 2015).

Here the distribution of food parcels via corporately-sponsored, Government endorsed, charitable and faith-based organisations, has been recognised as a firmly established component of the 'shadow state' (Wakefield et al., 2012). In the USA food banks have expanded in the context, and arguably as a result of, the rise of neoliberalism within American social and economic policy and the retrenchment of statutory social welfare provision. Similar changes have occurred across other welfare states.

While slower to develop, food banking has also emerged in Canada and become a well-established part of the social security system (Tarasuk and Eakin, 2003). In Canada, where state welfare systems have traditionally been stronger than those in the US, food banks were first conceived of as a temporary, emergency intervention in the context of financial recession of the early 1980s. However food banks have continued to expand, despite economic recovery, and their growth has been mirrored by a rise in low-paid, insecure work, and a decrease in public spending on social security (Riches and Tarasuk, 2014).

Most of the food distributed by food banks in Canada is either donated by food producers, processors, and retailers or collected through appeals to the public (Tarasuk and Eakin, 2003). Food banks are extra-governmental and do not receive allocated government funding, run by a range of actors including faith and other community groups. Although the national association of food banks, Food Banks Canada, coordinates the distribution of surplus food from retailers to food banks across the country, each food bank is essentially independent, determining their own ways of operating (Loopstra, 2014). Food Banks Canada release annual data on numbers accessing food bank support across the country. Based on a survey of their network, the Hunger Count reported that in March 2016, over 850,000 people received food from a food bank in Canada (Food Banks Canada, 2016).

They identify over four thousand organisations providing food parcels or meal programmes across the country.

3.3.2 Food banks in Europe

In recent decades models of food banking and the redistribution of surplus and donated food have been replicated across other high income countries, including European welfare states. France was the first European nation to open a food bank, with one established in Paris in 1984, and was closely followed by Belgium and Spain (de Armino, 2014). A European Federation of Food Banks has been operating since 1986 and today counts member food banks in most European countries. In 2014 the publications *First World Hunger Revisited* (Riches and Tarasuk, eds, 2014)*,* and a special edition of the *British Food Journal*, included contributions on food aid from, among others, Spain, Germany, the Netherlands, Italy and Finland – reflecting the spread of this phenomenon from liberal to social democratic welfare systems (categorisations explored in detail in Chapter Four).

It is apparent that the dominant discourse surrounding the growth of food banks across European states has been one which emphasises their dual objectives of addressing problems of food waste, as well as of food poverty. According to de Armino (2014), the message of food banks in Spain is first and foremost the benefits which accrue to companies and to society in general, through their efficient management of food surpluses. In many instances food banks are framed as environmental, as well as social, interventions. The European Federation of Food Banks clearly outlines both food waste and food poverty as significant societal problems which food banks are in a position to address.

According to analysis of data from the EU's MDP, almost 19 million people, or six per cent of the Union's population, receive food bank support (Gentilini, 2013). However this figure is likely to be an underestimate given the scale of food bank provision which is not part of the EU's programme. France, Italy, Poland and Spain are counted as the countries with the highest number of food bank users in Europe, yet as a proportion of the population, highest rates of use occur in the Eastern European countries of Lithuania, Slovakia and Slovenia. In general, countries with higher government social expenditure have lower rates of food bank use, however this pattern is not consistent and Gentilini (2013) concludes, warrants further analysis, although comprehensive data is limited.

As discussed in the context of the growth of food banks in North America, food charity in Europe has predominantly occurred in the context of financial recession and cut backs in public and welfare spending by nation states. This development has been observed as part of the global ascent of neoliberal discourse in politics and society (Lorenz, 2012; Riches and Silvasti, 2014). In describing the situation in Germany, Lorenz (2012) comments: "Changes in social support provided by the state and reduced welfare benefits have been accompanied by a common appreciation of charitable assistance". From this perspective then, food banks might be considered a product of the neoliberal turn in nations where state responsibility for providing basic social protection has shifted from the public to the private realm.

In Germany, the largest organisation of charitable food assistance is Die Tafeln, first established in 1993 and now with over 900 initiatives across the country (Lorenz, 2012). Pfeiffer (2015) notes that this expansion particularly accelerated following the introduction of major changes to the German social security system in 2005. Here surplus food is provided to clients who are generally required to prove their eligibility for social benefits as a precondition of access (Lorenz, 2012). Over the years Die Tafeln initiatives have expanded to include provision of a range of other supports and services including youth activities, cooking and growing classes, and information and advice. Lorenz (2012), reflects on how it has become common practice in Germany for municipal agencies to send their clients to the local 'Tafel' (Table) initiative for support. As a result, he argues, food aid represents a profound change in the welfare state and can no longer be considered an emergency response but an established part of the social system. Indeed Pfeiffer (2015) suggests that the German government has delegated responsibility for household food security to the third sector and food banks.

Similar patterns of emergence, establishment, and development of food aid have occurred elsewhere in Europe. In Spain, food banks have expanded from one independent initiative in Barcelona started in 1987, to include a network with presence in every region which forms the Spanish Federation of Food Banks (Federación Española de Bancos de Alimentos – FESBAL). These food banks do not give food to people directly, but as with the American model of food banking, distribute it to local organisations which then provide it to their service users in the form of food parcels or hot meals. According to de Armino (2014), this expansion has occurred in the context of privatisation and budget cuts within the Spanish social security system, which, he argues, was already weak and lacking in capacity to equitably meet people's needs. Certainly data from the FESBAL (no date)

indicates that the spectrum of recipients of food bank food in Spain, formerly concentrated on those most marginalised from society, has widened in recent years to include people who formerly had jobs and were not at risk of social exclusion.

In the Netherlands, while developed more recently, the food banking system has also grown to become an established feature of the social security system for low income households. Van der Horst (2014) describes how individuals must be referred by an external organisation and then have their spending capacity checked by a volunteer in order to be eligible to receive food. Similar practices for screening potential food bank users have developed elsewhere. Such means-testing mirrors processes which exist within many welfare states and is therefore perhaps indicative of the increasing embeddedness as part of mainstream social security systems. The nature of this changing role, and the relationship between food banks and the welfare state, is a central focus of investigation in this thesis.

This section has briefly summarised the development of food banking across European countries. It has also highlighted common concerns raised in the literature as to the extent to which food banks may be becoming embedded in, or replacing, support traditionally provided by the welfare state. However, given its short history, European food aid literature, particularly comparative analysis, is limited. Indeed in their recent review of food bank critiques within academic literature, McIntyre et al. (2016: 857) note the dominance of US and Canadian contributions. They express concern as to the emergence of food banking models in Europe, commenting:

> "European countries have traditionally emphasized social welfare and redistributive policies that reduce poverty and economic inequities; hence their recent adoption of the food bank model is of particular concern as it renders invisible the social conditions that are leading to an increase in food insecurity".

Yet the authors conclude that in these contexts the food bank critique is not yet well articulated. A central aim of this thesis is to further develop the food bank critique within European welfare states through international comparative analysis of their role within two case study countries. This study will also add to a growing body of literature in the UK seeking to better understand the role of the food bank in this context. The following section examines this existing literature.

3.3.3 Food banks in the UK

In the UK a food bank is a place which provides food, generally parcels of non-perishable items, directly to people in need, as opposed to acting as an intermediary which distributes food to frontline organisations as is the case in the USA and some other countries as outlined above. This model of food aid provision has dramatically expanded in the UK over the last 10 to 15 years, largely through the development of a Christian faith-based organisation called the Trussell Trust. Since it opened its first food bank in 2004, the Trussell Trust's network of food banks has grown rapidly and now numbers over 1,000. While in their first year the network provided 41,000 food parcels, recent Trussell Trust figures indicate that a record of over 1.1 million food parcels were provided in the UK in the year 2016/17, over 145,000 of which were in Scotland – up 9 per cent on the previous year (Trussell Trust, 2017).

For Lambie-Mumford (2017), the Trussell Trust marks a departure from previous forms of localised, ad-hoc charitable food aid because of the professionalization, coordination and scale of its operations. The network operates on a franchise basic, where local organsations (largely faith groups and other community organisations) pay a joining and annual membership fee which provides them access to support setting up their food bank, as well as use of official branding. Members are able to benefit from national corporate partnerships, including participation in regular food drives with national retailers (Lambie-Mumford, 2014). While following Trussell Trust guidelines, local food banks determine their own opening times, distribution sites, and recruitment of staff and/or volunteers. Trussell Trust food banks provide food parcels containing three days-worth of food, consisting of non-perishable products, largely following recommended contents lists set by the Network.

Similar to food bank procedures described in other countries, access to the Trussell Trust food banks is via referral from "care professionals such as doctors, health visitors, schools and social workers" (Trussell Trust, 2017). These referrer agencies are identified by the local food bank, which is encouraged when it sets up to engage with local services to hold their referral vouchers and issue them to people when they are in crisis. The Trussell Trust advises that individuals should receive a maximum of three vouchers in a six month period.

This delivery model has played a crucial role in embedding food banks within the social safety net in the UK. Indeed concern has been raised by professionals including GPs

regarding their experiences of supporting growing numbers to access food banks (BMA, 2014). There are also examples of state funding directly supporting food bank operations. In 2014 a third of local authorities in England and Wales reported funding local food banks (BBC, 2014). In the same year the Scottish Government invested £1 million into emergency food aid services – with a prerequisite that they demonstrate ways of connecting users with other forms of support beyond the provision of food. The Big Lottery Fund in Scotland's 'Support and Connect' programme which ran from 2013 to 2015 took a similar approach to funding emergency food aid activity (Big Lottery Fund, 2013). Such investment suggests a further formalisation of charitable food aid within mainstream statutory and voluntary services.

Although it is the growth of the Trussell Trust Foodbank Network and their political and media engagement which has brought considerable attention to the role of food banks in recent years, there is evidence that the number of organisations providing food banking-type services extends considerably beyond their number. Other food banks exist, and vary in their scale and mode of operating. For example some will allow self-referrals, and vary in the size and number of parcels they will provide to an individual over a given period of time. While it has been noted that the informal nature of much provision means it is difficult to comprehensively map services (Sosenko et al., 2013), on-going research by the Independent Food Aid Network (IFAN) has so far identified 680 providers in the UK which are not members of the Trussell Trust, suggesting that the actual scale of food bank use is likely to be much higher than data published by the Trussell Trust suggests (IFAN, 2018).

3.3.4 Drivers and impacts of food bank use

The dramatic growth of food banks in the UK has occurred at a time of substantial changes and reductions in public services and state benefit payments, a situation which largely mirrors the experiences across North America and Western Europe. In the context of global financial recession, the UK Government, alongside many other nation states, chose to pursue an austerity agenda which has had significant implications for the safety net function of the social security system. The programme of welfare reforms brought forward by the Coalition Government in 2010 has been widely cited as a key driver of food bank expansion (Perry et al., 2014; Loopstra et al., 2015; Garthwaite 2016a; Prayogo et al., 2017).

Increased selectivity and conditionality have been distinct features of recent reforms to the social security system in the UK, drawing much from the American approach taken to welfare reform and welfare to work policies of the 1990s. As Watts et al. (2014) highlight, welfare benefits in the UK have always carried an element of conditionality. However, it is the scope (claimant groups such as lone parents and those with disabilities are now subject to increasing conditionality), scale and severity of the punishments of behavioural conditionality which have increased hugely in recent years. Indeed Fletcher and Wright (2018: 324) describe the distinctly "punitive turn" of the UK social security system since 2012, characterised by systems of surveillance, sanctions and deterrence.

There is certainly growing evidence that the rise in food bank use is linked to recent Government austerity measures and welfare reforms. In a study of local authorities in England between 2010 and 2013, areas with higher spending cuts, unemployment and benefit sanctions rates were more likely to have higher levels of food bank use (Loopstra et al., 2015). Further analysis has identified a robust, dynamic relationship between the number of sanctions applied in local authorities and the number of adults receiving emergency food parcels (Loopstra et al., 2018).

UK and international research highlights the structural and financial drivers of food bank use. In a recent study of a representative sample of food bank users across the Trussell Trust Network, all households reported incomes well below measures of low income, and 1 in 10 said they'd had no income at all (Loopstra and Lalor, 2017). Evidence from Canada shows that among food insecure people, those who use food banks tend to be in the most extreme circumstances, having exhausted all other possible sources of help, including going into debt (Tarasuk et al., 2014).

Qualitative research carried out with food bank users in the UK, echoing analysis by Lambie-Mumford and Dowler (2015), found immediate income crisis, leaving a household with no or dramatically diminished income, to be a common trigger of food bank use (Perry et al., 2014). Food bank use is widely reported as a last resort, used by people when they have no other choice. Such income crises are often linked to problems with the operations of and reforms to the benefits system. Other reported causes of income crisis have included sudden adverse life events such as bereavement or redundancy (Perry et al., 2014; Prayogo et al., 2017).

The survey of Trussell Trust food banks also found the majority of users to be benefit claimants, and that most of those are subject to welfare conditionality and at risk of

sanctions (Loopstra and Lalor, 2017). Many have also been left without income due to delays receiving benefit payments. 39 per cent of food bank users had recently made a new benefit claim and were waiting for a decision or payment. Almost 1-in-5 of those had been waiting for 7 weeks or more. The growth of food banks has also been linked to failings of the safety net within the safety net – i.e. a lack of access to statutory forms cash payments previously made available to people in times of crisis (Perry et al., 2014).

The relationship between food bank use and ill health has also been identified as an important yet under-researched issue in the UK. Garthwaite et al. (2015) in their ethnographic study of food bank use in the North East of England found that people accessing the food bank often suffered from chronic health conditions and mental health problems in particular. The report also highlighted that, because it is supply driven and therefore unpredictable, the food received at the food bank can be unsuitable even in the short term for people living with certain health conditions. NHS Health Scotland research into food insecurity also raised concerns regarding the need to better understand the implications for health of food bank use and the extent to which it might exacerbate existing chronic health conditions (Douglas et al., 2015). People with disabilities have been found to be over-represented among UK food bank users, a group currently recognised to be more likely to have experienced a change in benefits following a medical assessment and, as mentioned above, increasingly subject to conditionality and at risk of sanctions (Loopstra and Lalor, 2017). Qualitative research has also identified people with disabilities having to access food banks, with evidence indicating that many have had to cope with a sudden drop or stop to their income as a result of changes to their disability benefits (Garthwaite, 2016a; Perry et al., 2014).

While a smaller proportion of food bank users, people in work report insecure and unsteady income, high living costs, as well as problems accessing in-work benefits as reasons for having to turn to food banks for help (Loopstra and Lalor 2017; Trussell Trust, 2017). International evidence also suggests that lack of access to, or awareness of food banks, as well as unwillingness to use them, as reasons why so few people in work use food banks- therefore potentially masking the level of need among this group (Loopstra and Tarasuk, 2015).

Analysis from North America, where food insecurity data is routinely gathered, has highlighted the limited impact which food bank use has on experiences of food insecurity. Approximately 1.8 million Canadians each year receive food from food banks, yet in 2012 nearly four million lived in food insecure households (Loopstra and Tarasuk, 2012). In the

same year a study on the relationship between food bank use and food insecurity among low income households in Toronto found that of 371 interviewed, 30 per cent were severely food insecure, and 32 per cent were moderately food insecure. From these groups, 65 per cent and 89 per cent of households respectively did not use food banks. The majority of food insecure households chose not to use food banks, largely because they did not see use of food banks as an adequate way to address their needs, as well as the barrier of the stigma associated with their use (Loopstra and Tarasuk 2012: 504). In addition, the study found that when food banks were used, they did not appear to reduce experiences of severe food insecurity:

> "at baseline and follow- up study visits, 41 per cent of households reported that they used a food bank and also experienced severe food insecurity over both years, which suggests that their food bank use was insufficient to ameliorate this severe condition" (Loopstra and Tarasuk 2012: 508)

These findings are consistent with earlier studies of the relationship between food insecurity and food bank use in Canada (Vozoris and Tarasuk, 2003; Kirkpatrick and Tarasuk, 2009).

3.3.5 Stigma and shame in relation to food bank use

In considering the impacts of food banks upon those accessing them, many have highlighted the role of stigma and shame – factors which Purdam et al. (2015) define as the "hidden costs" of food bank use. Walker et al. (2013) describe shame as a co-constructed emotion, in that it occurs as a result of a sense of failure to meet expectations set by oneself, as well as a feeling of being negatively evaluated by others. This fear of social shaming, was identified in Garthwaite's (2016b) research with food bank users who often reported keeping their food bank use a secret from family and friends, and expressed anxiety about being seen going to one. Garthwaite (2016b) also suggests the impact of negative media representations of food bank users has on people who access them. Analysis of media coverage of food banks has highlighted how stigmatising language is commonly used to describe them and those who are accessing them, reinforcing already pervasive narratives which seek to demonise benefit claimants, question the validity of their poverty, and draw distinctions between those deemed 'deserving' and 'undeserving' of help (Wells and Caraher, 2014).

Garthwaite (2016b) identifies that this stigmatisation of food banks through 'poverty porn' television programmes such as 'Benefits Britain' which frame those who access them as 'scroungers' and 'undeserving', has a significant impact on those who may require their help. As a result of this public and political discourse which questions the lifestyles of food bank users, people are prevented from turning to food banks until they are completely desperate (Purdam et al., 2015; Garthwaite, 2016b). In addition, Garthwaite (2016b) identifies food bank users engaging in processes of scape-goating or 'othering' (Lister, 2004) as described in wider poverty literature, whereby people in poverty seek to distance themselves from other groups whom they consider fit the stereotypes of 'undeserving poor' (Walker et al., 2013). In order to retain a sense of pride and agency, this enactment of projected shaming secures a position at least one step above the bottom of the social hierarchy. In Garthwaite's (2016b) study, food bank users interviewed participated in this 'othering' of those they considered undeserving or whom they felt were abusing the system. People with addictions and immigrants were groups commonly framed in this way by her interviewees.

In the context of this pervasive narrative of food banks as shameful, as Purdam et al. (2015) note, their use can have a negative impact on an individual's sense of self-worth. Describing the emotional implications of food bank use on those accessing them in the Netherlands, van der Horst (2014) explain how the charitable interaction may be detrimental to the self-esteem of the receiver. By obliging emotions of gratitude, the encounter can reinforce in the minds of the receiver their low standing in the social hierarchy. Being able to meet the basic needs of one's self and one's family are vital foundations for feelings of autonomy and self-efficacy. As Walker (2014: 48) comments, "people in poverty are subject to shame as a social sanction for transgressing the norm of self-sufficiency". Indeed withdrawal from social life in order to preserve pride, and the subsequent weakening of social relations, has been recognised as an impact of the shame of poverty (Gubrium et al., 2013). It is therefore notable that the United Nations Special Rapporteur on the right to food has argued that food banks offer an insight into the extent of marginalisation in a society (De Schutter, 2013). Given the importance of food for social and cultural identity, and for sense of belonging to family, community and wider society as described in Chapter Two, food bank use is likely to be a psychologically and socially isolating experience. Indeed Garthwaite et al. (2015) have called for further research into the implications of stigma of food bank use on health, and on mental health in particular.

3.4 Community food initiatives

Food banks and other forms of informal food aid are often presented as grassroots, community responses to food insecurity and local awareness of the growing numbers of people struggling to afford to feed themselves and their families. However, from a community development perspective food banks might be considered problematic given their association with paternalistic charitable models of poverty relief. This debate as to how local communities can or should engage in responding to food insecurity has emerged in recent years, largely in the context of growing concern, as outlined above, as to the adequacy and dignity afforded by food banks.

Describing the evolution of food aid and food poverty activities in Canada since the 1980s, Wakefield et al. (2012) identify the expansion of the landscape to include a range of different actors with differing interests and priorities. The emergence of the community food security approach in Canada which Wakefield et al. (2012) describe, incorporated concern for a range of aspects including dignity, environmental sustainability and social justice of the food system. Activities such as community gardening and community kitchens developed as part of food aid providers' programmes. According to Tarasuk (2001), such initiatives resulted from acceptance of food insecurity as a long-term problem, and a concern as to the inappropriateness of food banks as a response. Like food banks, these responses are also ad-hoc, community-based, and have a strong emphasis on food (Tarasuk, 2001). Yet, for Morgan (2015), the emergence of community food security provides a shift in the debate from one about hunger as a problem of individuals requiring immediate, short-term relief, to a debate about food justice for local communities. Community food security, Morgan (2015) argues, is a broader and more empowering concept which provides the basis for promoting an inclusive, rights-based approach to developing local food systems. From this approach however, poverty-related problems of food access are recognised as part of the broader context, but addressing them is not necessarily the principle objective (Tarasuk, 2001). Such initiatives, Tarasuk (2001) suggests, tend to view household food insecurity as part of a wider issue of inequality in local food systems and therefore seek responses which promote empowerment through increased local control over food supply and production.

Similar developments have occurred in relation to food aid provision in the UK, and in some places local activity and debate has also extended to incorporate these broader issues of social and environmental justice within local food systems. In some areas this has

involved community food activity and local food poverty strategies which identify a role for initiatives including growing, cooking and food skills in addressing food insecurity and consider them to be more dignified responses than food banks. Such approaches have, in some contexts, been incorporated into broader discussions of sustainable food production and supply at a local level, and included in the development of local food policies. For example the Sustainable Food Cities initiative, which aims to develop local food systems, identifies food as a critical factor in addressing a wide range of contemporary problems: "from obesity and diet-related ill-health to food poverty and waste, climate change and biodiversity loss to declining prosperity and social dislocation" (Sustainable Food Cities, no date). As discussed by Tarasuk (2001) in relation to the Canadian context, food poverty is identified here as part of the wider contexts of food-related challenges, to which food-related solutions are required.

Elsewhere food banks themselves have evolved to incorporate a range of other services. What the Trussell Trust call their More Than Food programme involves the inclusion of services such as money management advice, children's holiday clubs, and cooking and budgeting classes within the range of support offered by some food banks (Trussell Trust, 2017). Such developments McIntyre et al. (2016) would perhaps consider "improve the food bank" type reactions to criticisms regarding the indignity and insufficiency of food banks as responses to food insecurity. From this perspective, the solution to problems or limitations identified with food bank operations is to provide investment through the development of new services, volunteer training, and more funding. For McIntyre et al. (2016), this narrow focus of problem identification and solution recommendation by some food bank research may be because procedural and operational improvements are more readily actionable, and often more politically acceptable, than focus on changes to policies and practices which would improve the livelihoods of low-income groups.

The community food security approach seeks to develop alternative food distribution mechanisms and strengthen sustainable, local food systems which give greater power and control to local people. According to Power (1999) the sustainable food systems approach to food security, brings together both political and economic critiques of the contemporary food systems (corporate control over food systems; alienation of consumers from production and producers of food; the commodification of food) with arguments of the environmental movement, highlighting the environmental and human costs of the capitalist food system and its unsustainability. Examples of such approaches include investment in urban agriculture, community gardening and community kitchens, as well as seeking to

influence local food procurement and planning policies and practices so that they promote community food security.

In her commentary, Power (1999) makes several critiques of the community food system approach, aligning it with communitarianism and suggesting that it plays to the neoliberal agenda of downsizing government and allowing community to replace state responsibility for welfare. This argument is echoed by Wakefield et al (2012: 430) in their analysis of the community food security discourse in Canada. Power (1999) also references an analysis of urban agriculture by fellow Canadian Desmond Jolly (1997, cited by Power, 1999) who warns of exaggerating the potential of such initiatives, highlighting studies which question the sustainability of community gardens, and suggesting this could lead to a two tier food system, with a market system for those with money, and a subsistence self-sufficiency system for those without.

Findings from a qualitative study of community kitchens in Canada found that the monetary benefits derived from collective meal preparations were limited, largely due to the scope and scale of the operations (Tarasuk, 2001). The study also warns that:

> "the self-help orientation of initiatives such as community kitchens is problematic insofar as it fuels the public perception that household food insecurity is a problem of individuals' resource management skills rather than a problem of their access to resources" (Tarasuk 2001: 494)

In a UK context, these concerns are echoed by Dowler and Caraher (2003: 57) who warn that through community-based food initiatives "the rhetoric of dignity and self-help is used to cover up the lack of fundamental change and to locate both the 'problem' and the 'solutions' as belonging to those labelled – and living – as 'poor'".

Research on the impact of community food activities is limited. While some studies have highlighted the positive impact of such initiatives on nutritional knowledge, cooking skills and social participation, their capacity to reduce food insecurity is unclear (Iacovou et al., 2013). Given the isolating effects of food insecurity, the role of food projects as community-based initiatives in reducing social isolation and providing peer support is certainly not insignificant. However Tarasuk (2001: 495) argues: "the financial barriers to food access that are experienced by low-income households generally remain unchanged by projects that promote local food production and consumption". Research in Canada on use of community and child meal programmes and other community food initiatives aimed

at enhancing food access found rates of participation to be very low and to have no bearing on food insecurity status (Kirkpatrick and Tarasuk, 2009).

The main concern with the community development response to food insecurity is that it largely fails to move the focus beyond food. In emphasising food as the central issue, the social and economic drivers of food poverty risk being side-lined rather than directly challenged, and instead gives rise to behavioural interventions arguably aimed at helping individuals better cope with their current circumstances. Indeed similar criticisms have been levelled at community food activity in the UK. Writing in response to the growth of local food initiatives in the late 1990s, Dowler and Caraher (2003: 60) express concern that while projects may have stated aims of addressing food poverty, in practice their activities focus on improving food skills and as a result, "few projects address the upstream determinants of food choice for poor households because these factors are beyond their control".

3.5 Conclusion

This chapter has considered the evolution of charitable food aid over recent decades across high income countries. It has explored the nature of food aid provision, considering the role of surplus food redistribution and how food aid has in many cases emerged as a result of wider economic, agricultural and environmental concerns, rather than as explicit food poverty interventions. This brief review of the literature has also examined how systems of food banking have commonly become established in different national contexts at times of economic recession, austerity, and government reforms and cut backs to social security. It has offered a short overview of how food banks operate in different high income countries, locating that discussion within wider consideration of the changing roles of and relationship between the state and the voluntary sector. To some extent this points to food banks as products of the neoliberal turn across welfare states. The chapter has also considered how the voluntary or community sector has responded to the challenges posed by the rise in food bank use, and examined some of the ways in which this has led to an evolution of food insecurity responses which encompass broader concerns with strengthening local food systems.

It is apparent that the empirical evidence and critical academic debate regarding food bank use, and the implications of the growth of charitable food aid for social welfare policy, are

limited in welfare states where such provision has only recently developed. The empirical part of this thesis seeks to address these gaps by examining to rise of charitable food aid within both Scotland and Finland. These are examples of two different welfare state regime types which have experienced an expansion of charitable food aid provision in recent decades. Before focusing on the specific contexts of these case studies, Chapter Four considers the role of food as an aspect of welfare state intervention across different regime types.

Given the discussion in the food aid literature in which food banks are presented as indicators of the retrenchment of the welfare state and the transfer of responsibility for meeting people's basic food needs to the voluntary sector, the chapter examines where this responsibility has historically been located within welfare regime theory. Understanding how the role of food might be defined within welfare regime theory provides an important framework for the international comparative analysis element of the thesis, and is essential for addressing the over-arching aim of the research which is to consider the implications of the rise of charitable food aid for the role of the welfare state.

Chapter Four: The Place of Food within the Welfare State

4.1 Introduction

Food is essential for human survival and health, yet it is also highly personal, associated with individual tastes and preferences. Moreover, as discussed in Chapter Two, food plays a significant social and cultural role; it conveys social status and is central to religious and secular celebrations and festivities. Food is the basic market commodity and freedom to buy and eat what we want is central to our identities as consumers in a global capitalist society. At the same time, protection from hunger, and ensuring citizens are "free of want" (Beveridge, 1942, cited in Harris, 1997), is a fundamental principle of the UK welfare state. The discussion in this chapter follows exploration in Chapters Two and Three of the nature and drivers of food poverty in countries of the Global North, and of contemporary policy and charitable food aid responses to it. It is apparent that food aid has expanded in the context of national policies of austerity and retrenchment of social security across different welfare states. Many international commentators have argued that the rise of charitable food aid represents a shift in the roles of the state and the voluntary sector, and ultimately a delegation of responsibility by the former to the latter (Pfeiffer et al., 2011; de Armino, 2014).

The overall aim of this chapter is to set this contemporary debate within the context of welfare regime theory and provide a comparative overview of how food has featured as an aspect of welfare state intervention across different welfare regime types. Such theorisation is necessary to advance critical engagement with the implications of the rise of food aid for the changing role of the welfare state.

Given its multiple roles and functions, the place of food in relation to the welfare state is highly complex and yet one which has been subject to surprisingly limited analysis. This chapter addresses this, examining how the role of food varies by welfare regime type and seeking to characterise different food contexts in which the welfare state might intervene. This analysis applies Esping-Andersen's (1990) welfare regime theory and therefore Section 4.2 of the chapter seeks to summarise his approach. It also considers how a gender approach to welfare regime theory might be useful for considering the role of food within the welfare state. The chapter also explores how the role of the voluntary sector varies across regime type and in relation to food in each context. The chapter identifies key arenas of food-based welfare state interventions: survival; health; children's welfare; and

adult's care. Through comparative analysis between welfare state regime types and across food intervention contexts, the intention is to develop understanding of the aims and impacts of welfare state interventions regarding food. The theoretical analysis presented in this chapter provides an important point of departure for the empirical work of this thesis which aims to understand the implications of the growth of food aid for the welfare states in both Scotland and Finland. Explanation of the selection of the case study countries is provided in Chapter Six.

4.2 The 'food gap' in welfare state analysis

Among the earliest state interventions in the welfare of citizens and provision of social services were policies involving food. In the UK, concern for the health and nutritional condition of the population and its ability to defend national interests at home and in international conflicts led to policies such as the *Education (Provision of School Meals) Act 1906*. This allowed (but did not compel) local authorities to provide school meals to 'necessitous' children. According to Burnett (1994: 55), interventions of this sort received particularly strong ideological opposition at the time: "feeding was regarded by many as in a different category from housing, clothing or educating: it was the most fundamental responsibility of parenthood". Such state intervention was considered a threat to the family, weakening the basic unit of society. Given the level of opposition it received, Burnett (1994) suggests that this early school meals policy should be recognised as being far more significant in the development of the British welfare state than its limited provision suggests. Elsewhere school meals were also an early feature of state intervention in citizens' welfare. Finland, for example, while generally recognised as a laggard in terms of its development as a Nordic welfare state, was the first country in the world to introduce universal free school meals in 1948 (Finnish National Board of Education, 2008).

While food has not been considered a central 'pillar' of the welfare state and today is rarely identified explicitly as a priority for welfare policy, food interventions were significant features of the social reconstruction plans in Western Europe following the Second World War. According to Burnett and Oddly (1994: 5), this period of post-war consensus:

"assumed universal provision by governments of welfare foods or dietary supplements, statutory fortification of some foods thought important in the diet of poorer sectors of the population, and state provision of subsidised meals".

However, despite this apparent early emphasis on state intervention in food, it is housing, social security, health and education which constitute the four pillars of the welfare state, and examination of the different ways in which these pillars are organised has formed, to varying degrees, the focus of much comparative welfare research.

Kemeny (2001) considers that of the four pillars, housing, which is rarely universally publically provided, occupies an ambiguous position within the welfare state. Kemeny's thesis on this ambiguity is particularly useful for analysing the place of food within the welfare state. This is because the challenge for such analysis might be seen as similar to that which Kemeny identifies in his discussion of the role of housing, which he argues has a: "high degree of 'embeddedness' in social structure" (Kemeny 2001: 56). Clear parallels with food might also be drawn when he suggests of housing that: "its pervasiveness in terms of influence on life styles, urban form, welfare and patterns of human consumption make it at the same time central to understanding welfare yet conceptually elusive" (2001: 56). Reflection on the 'embeddedness' and 'pervasiveness' of food, yet also its 'elusiveness' in understanding the welfare state is important in an attempt to bring more clarity to the role of food in comparative welfare state analysis.

As discussed in Chapter Two, analysis of food and nutrition has always played a central role in poverty research and building the evidence base for policy interventions. Yet as Lang et al. (2009) highlight, the question remains as to whether food requires specific welfare responses beyond those of wider social and economic policies. For them, it is important to recognise the connection between the two. Table 4.1 is their adaptation of Gordon's (2003) summary of the connection between the overall objectives of anti-poverty policy and the aims of food policy across Europe, and how these have changed over the past four centuries.

Table 4.1 Aims of European anti-poverty policies and food policy for the poor, 17th to 21st centuries

Century	Purpose of anti-poverty policy	Food Policy for Poor
17th and 18th	Relief of indigence	Prevent starvation but setting minimalist standards.
19th and early 20th	Relief of destitution	Economic production/physical efficiency. Prevent idleness.
20th	Alleviation of poverty	Nutritious diet for subsistence. Prevent hunger.
21st	Eradication of poverty	Inclusive diet. Prevent exclusion.

Source: Lang et al 2009: 263, adapted from Gordon (2003)

The table highlights how priorities of food interventions have evolved in line with changing approaches to poverty, suggesting a progressive trajectory from interest in relieving only the most extreme end of poverty and hunger, to an inclusive, preventative approach. As Pratalla et al. (2002) also point out, early, highly selective, philanthropic attitudes to food for relief from extreme hunger changed in the early 20th Century as governments became more concerned with the fitness of their industrial and military workforce. Following the Second World War, welfare state models founded on universalistic principles began to develop across European nations, and food interventions were associated with such welfare programmes. The universal provision of free meals to all school pupils introduced in Finland in 1948 is an example of this.

However, unlike Lang et al. (2009) who suggest the priority of the 21st Century has been an 'inclusive' approach to food – tied to the aim of eradicating poverty, Pratalla et al. (2002) emphasise the shift to a more selective model since the 1970s, with many national governments cutting high-cost universal interventions. Such changes in approach to food interventions were reflective of wider changes in the welfare state. Notably in the UK Margaret Thatcher's role in abolishing free school milk while Secretary for Education in 1971 was an early and iconic example of the welfare state reforms of her later career. Commenting on the ideological shift regarding the nature and purpose of the welfare state which occurred in the late 1970s, Burnett and Oddly (1994: 5) highlight:

"the citing of choice became a new rationale which enabled governments to limit high-cost universal services to selectively targeted groups, to introduce optional provisions and to begin considering ways of dismantling their welfare states".

This historical perspective is a helpful starting point for more detailed comparative analysis of the role of food across different welfare state types and summarising the objectives of food interventions by the state in different contexts. A more nuanced analysis of different welfare regime types and how their approaches to food and poverty have changed over time is attempted below.

4.3 Welfare regime theory

Welfare regime theory seeks to group different national welfare state systems into distinct categories. Perhaps the most widely recognised typology is that developed by Esping-Andersen (1990) who identified three key welfare systems: liberal, corporatist and social democratic. His 'three worlds of welfare capitalism' presents a typology of 18 Organisation of Economic Cooperation and Development (OECD) states based on key principles of: decommodification (the extent to which an individual's welfare is reliant upon the market); social stratification (the role of the welfare state in breaking down social divisions); and public-private mix (the relative roles of the state, the family, and the market in welfare provision) (Bambra, 2007a). This analysis was designed to allow for comparisons and classification of the overall configurations of welfare states:

> "one interpretation of Esping-Andersen's work holds that all welfare states consist of three basic components – a universalistic component providing benefits as a matter of citizens' rights, a social-insurance component linking benefits to employment and a means-tested social-assistance component – and that the types of welfare state are essentially distinguished from each other by the relative weight that they assign to these three components" (Clayton and Pontusson, 1998: 329)

To provide a very brief summary of Esping-Andersen's (1990) typology, a liberal welfare state can be identified as one in which means-tested social-assistance is the most significant component of the welfare state. The market is considered the main source of security, with the state stepping in when the market fails through the provision of modest, targeted, cash or in-kind benefits. Esping-Andersen (1990) classifies the USA, Canada and the UK as liberal welfare states. In liberal welfare states, redistribution is low and inequalities are maintained.

In corporatist welfare states, social-insurance is dominant – a model based on occupational rather than citizenship status (Meier Jæger, 2012). Within this type France and Germany

are examples of corporatist welfare states. In this earnings-related model, the welfare state reproduces inequalities produced in the labour market. Social assistance typically excludes non-working wives, and family benefits encourage motherhood (Esping-Andersen, 1990). Esping-Andersen's third category is the social democratic welfare state. The Nordic countries of Sweden, Norway and Finland are identified as examples of social democratic welfare states. This model is recognised for its principles of universalism based on the idea of social rights, extensive public services, high levels of vertical redistribution, and resultant large degree of equality of outcomes among citizens. According to Rothstein (1998: 160), the Nordic universal welfare state is therefore not premised on the question of what should be done about 'the poor', but rather on the question of what constitutes general fairness in respect to the relation between citizens and the state. In this context, the welfare state is seen as a robust safeguard against poverty.

While this typology is a hugely valuable starting point, for the purposes of comparing the role of food across welfare regime types, it is recognised that classifications which seek to extend the scope of Esping-Andersen's analysis and provide a more holistic interpretation of the welfare state are necessary. Following others who have taken an explicitly gendered approach to comparing welfare regimes (for example Van de Velte et al., 2014), a four-fold typology, which includes a Southern regime type within its categorisation, is chosen for this study. Southern welfare states include Italy, Spain and Greece. Here the family plays a central role in welfare provision given the traditionally strong role played by the Church in promoting family-oriented values and beliefs that state intervention should only occur when the capacity of family members to protect each other had mutually failed (Esping-Andersen, 1990). In such contexts where there are high levels of informal care work, mostly from women within the extended family, state provision of care services and female employment are generally low (Lewis et al., 2008). As Van de Velte et al. (2014: 1228) explain, this four-fold analysis considers how welfare regimes differ with respect to:

> "the main source of financing for care (private purchase, income taxation, pay-roll taxation), the main place where care takes place (private services, public services, the family), and the amount and the channels of resources directed to the needy (cash transfers or transfers in kind by the state and private intra-family transfers)".

The concept of defamilisation provides a gendered analysis of welfare state regimes and considers the extent to which the welfare state supports women's independence from the family. Defamilisation is often defined as: "the degree to which individual adults can uphold a socially acceptable standard of living, independently of family relationships,

either through paid work or through social security provisions" (Lister, 1997: 173). Given that the traditional role of women as providers of care within the home is what has historically limited that independence, this approach to categorising welfare states based upon how care services are provided is particularly useful. As food and nourishment are central features of care, and strongly associated with the domestic sphere, it is appropriate to apply this approach to classifying welfare state regimes which foregrounds this gendered analysis, a perspective which has been recognised as lacking in Esping-Andersen's (1990) initial thesis.

Another recognised gap in welfare regime literature is consideration of the role played by the voluntary sector (Lewis, 1999). The nature and purpose of the voluntary/community/third sector or civil society - as forms of endeavour existing outside of both the public and private spheres might be differently identified, has changed over time, just as the welfare state has come to mean different things in different social, political and historic contexts. Given the objective of this thesis to understand the implications for the welfare state of the rise of voluntary sector activity through emergency food provision, it is clearly necessary to consider the voluntary sector's wider role in welfare state development and comparative analysis. Analyses which seek to account for voluntary effort in comparative welfare research, including those of Alber (1995) and Sipila (1997), emphasise the role of the voluntary sector in the provision of welfare services. Lewis (1999: 257) suggests that it is because welfare regime theory has largely focused on social security payments, rather than the provision of services, that the role of the voluntary sector has tended to be over-looked, given that it is in this domain which the sector "plays its most significant welfare role". It is important to recognise that the voluntary sector, with its origins in philanthropic activities of communities, individuals, and religious groups, pre-dates the welfare state and, in different regimes, has played a role in shaping it.

Various theories exist as to the reasons why the voluntary sector has survived and thrived in modern day welfare states. On the one hand are economic arguments which consider the sector an outcome of state and market failure – i.e. having developed in response to demand for public goods or services not being met by either government or the market (Weisbrod, 1977). This perspective of voluntary organisations as resulting from the failure of both the market and the state to solve socioeconomic problems in society led to the term 'third sector' being used in reference to such organisations. Such demand-based theory would assume that the more extensive the state provision of social welfare services, the

smaller the third/voluntary sector (Salamon and Anheier, 1998). According to Salamon and Anheier then:

> "depending on the political persuasion of the observer, the extensive presence of the non-profit sector is therefore seen as a boon to liberty or a denial of basic social protections and hence a source of persistent inequality" (1998: 25)

On the other hand, this narrow "paradigm of conflict" (Salamon, 1995: 87) has been widely criticised for failing to acknowledge the more complex and varied nature of relationships between state and voluntary sector which often exist, and the different social and political contexts in which they have emerged. Salamon and Anheier (1998) highlight contexts of interdependence and partnership between the state and the voluntary sector. For example they suggest that the two sectors may work closely together when lack of popular or political support limits the potential for direct state action but there is still significant demand to address a particular social problem. Another explanation for the voluntary sector suggests that the work of such organisations is the first response to new social problems and that the sector is able to innovate and react more quickly than the public sector, developing services which can later be adopted by the state. Salamon (1987) also extends the 'failure' thesis to consider the limitations which he identifies as inherent in the voluntary sector – insufficiency, narrow focus, paternalism and amateurism – which forces the sector to forge close partnerships with the state (Elvers and Laville, 2004).

Such explanations for the voluntary sector do not, however, account for the ways in which the development of the voluntary sector varies between countries. Indeed empirical study has found that economic theories cannot account for the ways in which the voluntary sector has emerged in different welfare state contexts. The relative roles of the state, the market, and the voluntary sector in the provision of social welfare, are, as Salamon and Anheier (1998: 228) assert in their argument for a 'social origins theory' of the voluntary sector, "heavily constrained by prior patterns of historical development that significantly shape the range of options available at a given time and place". Indeed Leibfried and Mau (2008: xvi) consider an important aspect of welfare state variation exists in relation to the third sector, "reflecting contrasts in historical policy legacies, legal traditions, and prevailing ideologies". 'Social origins theory' proposes that the historical development of social, political and economic state–society relationships in a country result in different roles for the voluntary sector which Salamon and Anheier (1998: 228), drawing on Esping-Andersen's (1990) categorisation of welfare states, identify in four distinct "non-profit

regimes": liberal, social democratic, corporatist and statist, characterised by a particular state role, and a particular position of the third sector.

In this framework, countries with liberal voluntary sectors typically have low government spending on social welfare and greater responsibility for such provision is placed on non-state actors, including the voluntary sector. In social democratic countries where state spending on goods and services is high, the voluntary sector largely exists outside the realm of those welfare state provisions that are considered essential, such as health care, education and social benefits (Weipking and Handy, 2015). Historically, in social democratic regimes the voluntary sector's primary role was to exert social pressure by acting as a channel to voice demands and mobilse networks for the delivery of services which were held to be the responsibility of the state to provide. Such functions could be associated with the 'critical voice' role of the third sector identified by (Wijkstrom, 2004). The social democratic voluntary sector is also recognised for its important role in promoting social integration and political participation (Salamon and Anheier, 1998).

Countries with a corporatist voluntary sector have both high government spending on social welfare and a large voluntary sector. In these countries the state and voluntary sectors work together in the provision of public goods and services (Weipking and Handy, 2015). In such contexts the state acts as funder and guarantor, setting rules for the delivery of service by voluntary sector providers. Evers and Laville (2004) note the development of large conglomerates of third sector organisations in corporatist regimes, often attached to churches or political parties and close to government, increasing their role in service delivery and blurring the lines between state and third sector. In southern regimes, voluntary organisations are key welfare actors in areas not covered by the state, and the church in particular has a prominent role in welfare provision.

The historic nature of the relationship between the church and the state, the role of the church in social welfare provision, and how these have changed over time, are also significant in understanding the differences between voluntary sectors across welfare states. According to Göçmen (2013) the evolution of the church-state relationship has been a decisive factor in the types of welfare states which have emerged across Europe, and also in determining the role of the church as a welfare provider. In the Nordic countries the Lutheran majority churches historically have a close relationship with the state (Pessi et al., 2009). In Finland and Sweden where the formal ties between church and state have been abolished, welfare activities of the church are classified as voluntary sector, in Norway where the state-church links are maintained, the church is officially a statutory body (Pessi

et al., 2009), however their activities are generally regarded as located within the voluntary sector. According to Pessi et al. (2009) social democratic welfare states, following principles of value neutrality, have been traditionally critical of welfare provision based on religious ideology. In the context of the spread of neoliberal ideology within social democratic regimes and contractions in national state welfare spending, the church has been identified as having taken on a greater role in welfare provision.

In comparing the changing role of faith-based organisations across different welfare state systems, Göçmen (2013) considers the level of hostility between religious and liberal forces at the time of nation-state forming in determining the future nature of the relationship between church and state. In parts of continental Europe, for example, the church and the modern nation-state waged bitter conflicts over which should be the central agent of socialization – such as over the provision of education in France and the Netherlands – which had a profound effect on the formation of the welfare state (Manow and Van Kersbergen, 2009). Göçmen (2013) considers that in the UK religious organizations historically worked in partnership with the state to provide for those in need and that as a result of the peaceful settlement between state and religion, the long tradition of charity as a support to the state provision of social welfare in the UK has been maintained up to the present day.

It is widely acknowledged that since the "neoliberal turn of the European welfare states" (Göçmen, 2013: 499) begun in the 1980s, significant changes have occurred in the positions of the state, the private sector and the voluntary sector in social welfare provisioning (Göçmen, 2013; Hogg and Baines, 2011). At this time interest in 'welfare pluralism' and New Public Management approaches within the statutory sector sought to diversify provision and apply market principles to welfare delivery. While it is suggested that the role of the voluntary sector as provider of goods and services in liberal regimes is very limited, with private sector and the family considered the primary welfare providers, in discussing the UK context Evers and Laville (2004: 32) also note that the voluntary sector has come to play a strong role in covering some of the shortages left by the state and local authorities. Child care and community care services are noted as particular areas where third sector actors have emerged as key service providers, filling gaps in state provision. In the context of political and ideological shifts in understanding the relative roles and responsibilities for social welfare provision, the voluntary sector in the UK moved from the periphery, considered complimentary to the state as primary agent, to the centre, and in many areas of social policy it has become the main provider (Göçmen,

2013). In the case of social democratic regimes where traditionally the space for service-delivering voluntary organisations has been highly constrained, in recent decades there has been significant growth of cooperatives in delivery of social services, designed primarily to increase involvement of service users in the organisation of services (Evers and Laville, 2004). The dominance of cooperatives is particularly notable in child day care services in Sweden, for example.

The growth of charitable food aid which has occurred in the context of cutbacks in welfare state spending (as discussed in Chapter Three) might be considered a particular form of third sector activity, often but not always driven by church and faith-based groups, to cover gaps left by the welfare state. A central focus of this thesis is how such voluntary sector social welfare activity might have emerged differently in different types of welfare states, informed by social, political and cultural differences in understanding the roles of the state and non-state actors in different areas of provision of public goods and services. Therefore an understanding of the wider role of the voluntary sector and its historical and theoretical development within the welfare state, and in welfare regime theory, is vital.

At this point it is important to acknowledge that when using any typology, it is clearly necessary to be aware that such regime categories are, as Bambra (2007a: 1101) highlights ''ideal types'', and also that "in practice, welfare provision varies extensively between countries of the same regime type". Certainly in her analysis of welfare regime theory, Bambra (2007a) suggests that some welfare states are more heterogeneous in their policy profile membership depending on the policy area being examined. In their presentation of non-profit sector regime types, Salomon and Anheier (1998: 228) also highlight that such groupings are "heuristic devices intended to demarcate broad tendencies. Significant variations can therefore exist among countries which fall in any particular grouping". In addition, it is important to highlight that differences in approaches to welfare provision exist even within individual welfare states. The most salient example of this is the National Health Service (NHS) in the UK, a universalistic approach to welfare services which appears more characteristic of a social democratic, rather than a liberal regime. Therefore, it is important to remember these limitations of broad categorisations when applying welfare regime theory to close analysis of welfare policy within specific countries, as is the case with this study which focuses on the welfare states of Finland and Scotland.

4.4 Applying welfare regime theory to the role of food

Esping-Andersen's (1990) widely cited welfare regime typology, plus the addition of the southern regime type, is a useful tool to begin to consider the basic features and functions of the welfare state as these might relate to food. As noted above, his typology classifies welfare states based on three criteria: de-commodification; stratification; and the arrangements between state, market, and family. In addition, the role of the voluntary sector is recognised as a key feature of different welfare regimes. De-familiaisation is added as a fourth classification criterion given our interest in the impact of the welfare state on gender relations. Table 4.2 aims to summarise the features of these four different welfare regime types. In the final row, the table draws connections with the overall approach to food which is expected to exist within the welfare state for each type, based on the literature examined in this chapter. Andersen

Taking these four welfare state classification criteria in turn, it is possible to consider how they might relate to food. First, de-commodification might be understood as the extent to which individuals and households can access food, independent of the income they acquire through the labour market. Government intervention in this context might involve subsidisation of household income or provision of food-specific in-kind benefits or food vouchers. De-commodification of food may also be done through food price controls. The level, and intended purpose, of such de-commodification of food is hypothesised to vary between different welfare regimes. Social democratic welfare regimes that have a significant universalistic component and emphasise statutory support as a matter of citizens' rights, tend to have a high-level of de-commodification, ensuring citizens' welfare is less dependent on market forces. In such contexts de-commodification of food, as with other services, is likely to be high, aimed at reducing inequalities and maintaining universal rights. By contrast, liberal welfare regimes characterised by more selective, targeted policies may de-commodify food through the provision of in-kind benefits, such as food vouchers rather than cash, as a means of restricting the spending of social security recipients. For example, the Supplemental Nutrition Assistance Program (SNAP) – previously food stamps – is the primary form of social assistance provision in the USA.

The second of Esping-Andersen's (1990) welfare state criteria is stratification. As Hoekstra (2003: 60) highlights, stratification can be both economic and social, and the ways in which the welfare state distributes services has consequences for the hierarchy in society. In the context of housing, state intervention to affect this hierarchy is seen in the process of

housing allocation (Hoekstra, 2003). The food we eat, and where we shop for it are highly socially stratified, and yet the welfare state does not tend to intervene to affect this stratification. Food buying and consumption are generally expected to directly reflect the economic stratification which already exists in a society.

Examples of where the welfare state might be seen to intervene to affect stratification in the context of food include the universal provision of free school meals. Such a policy might aim to reduce social hierarchy regarding food through ensuring universal access to a healthy meal regardless of the child's family's ability to pay. As an education policy this could also be viewed as effort to reduce the attainment gap between pupils from different economic backgrounds, and thus reduce stratification in society as a whole. By contrast, targeted, means-tested school meals policies have been argued to reproduce, rather than reduce, inequalities. In their discussion of the role of food and nutrition in state policies, Prattala et al. (2002: 106) highlight: "selectivist interventions have been criticised for not diminishing the differences between higher and lower socio-economic groups". They refer to a study by McIntyre et al. (1999) of nine different selective children's feeding programmes in Canada which were found to contribute towards stigmatisation of poorer children and that, overall, the programmes reproduced rather than reduced inequalities. Free school meals policies, as examples of state intervention in food as an issue of children's welfare, in the two case study countries selected for this thesis study are explored in more detail in Chapter Six.

According to Esping-Andersen's third criteria, it is the arrangement between the state, market, and the family in the provision of welfare services that is important in distinguishing between different welfare regimes. Such arrangements are also clearly central to food and in determining what is eaten, by whom, and in what way. Broadly speaking, food has tended to be a matter of private (family and market) rather than public (state) interests. As discussed in Chapter Two, intra-household distribution – specifically from women to children and men in the family – is also important to understanding how food is allocated. Moreover, sociologists have explored the way in which women have been historically constructed as 'gatekeepers' of food consumption in the home (McIntosh and Zey, 1989). In this context, a gender-based analysis of welfare regime types is valuable given that food planning, shopping and cooking tend to be the work of women within the household.

Table 4.2 Welfare state regimes and the expected role of food

Regime type Example country	Liberal UK	Social Democratic Sweden	Corporatist Germany	Southern Italy
Decommodification (the extent to which welfare services are removed from the market)	Low Means-testing, targeted benefits	High Universalistic approach to social rights	Quite high Social insurance based on occupational status	Low
Stratification (levels of social and economic inequalities in society)	High, mainly based on income	Relatively low	High, based on social status State support reflects inequalities in labour market	High
Mix of state, market and family	Dominant position of the market in most spheres	Dominant position of the state	Role of family important Supports male breadwinner model	Dominant position of family, including extended family
Role of the voluntary sector	Traditionally marginal role in service delivery.	Primary role in advocacy rather than service delivery. Increasing role for cooperatives in care services.	Central partners in social welfare provisioning	Catholic Church plays prominent role in welfare provision
Defamilisation (extent to which welfare state enables independence from the family)	Relatively low Limited child care subsidies	High Promotes gender equality in labour market and in care work	Low Female labour market participation discouraged	No guarantee of minimum income outside the labour market Female employment low
Overall position of food w/i welfare state	Market as main provider Means-tested social security payments at minimal levels to prevent starvation	Food as a public good General recognition of food as matter for state intervention on a universal basis	Food largely a private (family, the market) matter	Food strongly located within family/domestic sphere

Source: Author's analysis, adapted from Esping-Andersen (1990)

Bambra (2007a) is particularly concerned with role of the welfare state in ordering gender relations and with the absence of this analysis from much established welfare regime theory. Here the concept of defamilisation is important. As discussed in Section 4.3, from this perspective preference is given to typologies which consider welfare services, including childcare and social services, of vital importance in terms of defamilisation, as

well as cash transfers in its classification of welfare regimes (Van de Velte et al., 2014). In the context of food, it is arguable that a gender-based analysis should also consider the extent to which a welfare state's approach to food might achieve or undermine defamilisation.

As Daly (2012: 86) highlights, feminist scholarship on the welfare state has illustrated how:

> "the boundaries between what is accepted as a public responsibility and that which is consigned to the private sphere vary across states but are closely shaped by welfare state policies within countries".

In welfare state contexts where food is seen as a private matter, to be provided by family and market transactions, women's 'place in the kitchen' is reinforced, and as such the ability of the woman to act independently of the family is limited. The duty to provide decent, healthy meals for one's family therefore comes to be viewed largely as the responsibility of the woman within the home. By contrast, where food is recognised as a public good, defamilisation is promoted. In terms of policy examples it might be possible to consider state subsidised canteens in the workplace as a way in which the public, rather than the domestic, responsibility to ensure a well-fed workforce is recognised. Such policies exist in Nordic countries, whose approach to service provision by the welfare state has been recognised as promoting equality (Lister, 2009).

Government intervention regarding food that is focused at the family itself, such as Healthy Start vouchers for expectant mothers and infants in the UK, while they may have an indirect effect on women's independence, do not directly decrease the economic importance of the family in women's lives. Welfare policies which approach women on the basis of their family status reflect what some feminist analysis of the welfare state has identified as a highly gendered dual system in which men are socially constructed as paid workers and women as unpaid workers within the home (Sainsbury, 1993).

The role of the voluntary sector is particularly important when looking at food within the welfare state. While in the pre-welfare state context food charity was the first line of defense against destitution and starvation, it has since retained an important role regarding food. The focus and purpose of the food role of the voluntary sector varies depending on the relative strength and scope of private and state forces between regime types and within individual countries. For example in Catholic countries of southern welfare regimes such as Spain and Italy, churches and faith-based organisations providing food charity has been

a much longer established feature of the welfare state than in Nordic countries and in particular where the majority churches have been strong supporters of a comprehensive welfare state system (Pessi et al., 2009). In liberal welfare regimes, such as the UK, the voluntary sector has used food as an important vehicle for community development, emphasising the social meaning of food. It has also been used in the context of health promotion and education among deprived communities. Food growing and cooking activities, particularly in deprived urban contexts, have aimed to improve food knowledge and skills, reduce social isolation and improve community cohesion (Wreiden et al., 2007; Caraher and Dowler, 2007). As described in Chapter Three, as the nature and extent of statutory support and provision has changed over recent decades, the role of the voluntary sector in relation to food has also had to change in order to meet changes and increases in demand for their services.

4.5 Food contexts of welfare state intervention

The discussion in section 4.4 above makes reference to different contexts in which the welfare state might intervene in relation to food. With reference to welfare state classification criteria, the section also indicates how the nature and objectives of welfare state intervention in different contexts is likely to vary across welfare state regime type. For example, higher levels of universal state intervention aimed at enabling full participation in society would be anticipated to feature in the social democratic welfare states of the Nordic countries. Table 4.3 below identifies and summarises four different contexts in which food-based interventions by the welfare state might occur, and suggests examples of the types of state interventions, and their objectives, which might exist in these contexts. The examples given focus on social democratic and liberal regime types, as the case study countries examined in the empirical part of this thesis belong to these two regime types. It is interesting to directly compare social democratic and liberal regimes as the principles of universalism and selectivism which underpin each respectively are diametrically opposed as approaches to welfare state intervention. An explanation of the case study country selection is provided in Chapter Six.

Table 4.3: Contexts of food based interventions by the welfare state

Context of food intervention	Regime type	Objectives	Examples of state activity
Basic sustenance	Liberal	Prevent starvation Direct social security spending towards food	Setting of cash benefits at subsistence levels Provision of food vouchers
	Social democratic	Enable full participation in society Ensure all have the means of accessing sufficient food	Generous social security payments Subsidised workplace canteens
Health	Liberal	Improve individual food behaviours	Public health campaigns, eg promotion of healthy eating
	Social democratic	Preventative public health Nutritional health of the population	Product supplementation/fortification Production of nutritional guidelines for public sector food provision
Children's welfare	Liberal	Poverty mitigation	Means-tested free school meals
	Social democratic	Nutritional and social education Nutritional health of the population	Universal free school meals
Adults' care	Liberal	Nutritional health of the individual	Food in care settings
	Social democratic	Nutritional health of the population	Food in care settings

Source: author's analysis

This broad summary suggests how the position of food as public good within social democratic welfare state regimes - as defined in Table 4.2 - might have implications for the nature and purpose of state interventions regarding food in different contexts. By contrast, in liberal regimes where the market is the main provider of food, the state has a less direct social welfare role regarding food. Having identified the social security system as the primary mechanism through which the welfare state intervenes to ensure people's basic food needs are met, this provides important theoretical underpinning for the exploration of the implications of the growth of food aid across different welfare state regime types.

4.6 Conclusion

This chapter has sought to locate food within the welfare state. Through the application of welfare state regime theory, it has considered how processes of decomodification; stratification; defamilisation; and interactions between the state, the market, the family and the voluntary sector might inform the role of food across different regime settings. A framework is proposed for examining the position of food within the welfare state, and for considering how food features as an aspect of welfare state intervention. Four key areas of food-related welfare state intervention are identified: basic sustenance; health; children's welfare and adults' care. The nature of such interventions, their objectives and where responsibility is located, have implications for the experience of food poverty as the multifaceted phenomenon described in Chapter Two. For example, where food has a strong position as a public good within the welfare state and policies such as universal free school meals are promoted, multiple dimensions of food poverty are impacted on, in particular the affordability of food and also the social participation role of food. The rise of charitable food aid potentially challenges the traditional place of food, and the location of responsibility for preventing food poverty, within different welfare state contexts.

This conceptualisation of food contexts of welfare state intervention is drawn upon in Chapter Five which provides an overview of the case study countries explored in this thesis. It applies the theoretical framework presented in this chapter to explore the role of food in the welfare states of both Scotland and Finland. It considers how relevant welfare state policies regarding food in both countries have changed over time and their implications for understanding the rise of food aid in each country.

Chapter Five: Case Study Overview

5.1 Introduction

The purpose of this final literature-based chapter is to provide an introduction to the case study countries selected for examination in the empirical section of this thesis. First, a brief overview of the welfare states in both Finland and Scotland (as examples of social democratic and liberal welfare regimes respectively) is provided, considering their historical development and focusing in particular on how they have changed in recent decades following recession and the rise of "neo-liberal logic of austerity" (Taylor-Gooby et al., 2017a: 11). The chapter then goes on to examine the role of food as a welfare state intervention, drawing on the conceptualisation of different contexts in which such interventions might occur, as outlined in Chapter Four. The chapter compares the role of food in these contrasting welfare regime contexts by focusing on school meal policies as an example of state intervention through food. Given the central role of social security systems to ensuring people are able to meet their basic food needs, the chapter also compares the current systems in both Scotland and Finland, highlighting recent changes to these systems and the implications of these for the protection, or otherwise, from food poverty.

As explored in Chapter Three, the rise of food aid across European countries in recent decades has been recognised as a symptom of the retrenchment of the welfare state and the weakening of statutory social protection. This chapter considers briefly the rise of food aid in both Finland and Scotland, and how it has been related in the literature and in political discourse to changes within the welfare states in both countries. This discussion provides an important context for Chapter Nine of this thesis which considers the implications of the research findings on the rise of food aid for the role of the welfare state in both Scotland and Finland. The extent to which there might be convergence or divergence in respect to the nature and development of food aid provision in these two settings provides an interesting and important indication of the ways in which different welfare states are responding to contemporary global economic, social and political pressures. The chapter ends by stating the research questions to be examined in the empirical part of the thesis.

5.2 Scotland's Welfare State

As a devolved nation within the United Kingdom, Scotland is recognised as part of a liberal welfare state. The UK welfare state is characterised by moderate levels of welfare state spending, substantial reliance on the private sector for provision, and significant targeting and means-testing for access to benefits and services (Taylor-Gooby et al., 2017b). Control over certain key areas of the welfare state are devolved to the Scottish Government – including housing, education and health – while the majority of social security legislation and spending remains reserved to the UK Government. The extent to which there is any real social policy divergence between Scotland and the rest of the UK has often been challenged, despite claims to Scottish social welfare distinctiveness (Mooney and Poole, 2012). This discussion as it applies to current social policy development in Scotland is touched upon in this section.

The early post-war years of the 1940s saw considerable social reforms in the UK and a significant increase in the role of the state in responding to social needs. Following the Beveridge Report of 1942, an extensive package of services across education, health, housing and social security promoted the principle of universal state provision (Clarke and Langan, 1993). In this period the development of welfare policies was driven by popular pressure not to return to the hardship of the 1930s (in which liberal, laissez-faire policies had dominated) and to compensate for the sacrifices of wartime. At the same time there was a need to balance social investment with the demands of capitalism and the need to strengthen and grow the free market economy. Although the emphasis was on expansion of state support, overall such services were not intended to replace the family or the market as the first line of protection for individuals, but to pick up where they failed (Clarke and Langan, 1993).

Despite the limitations of British 'universalism', the UK welfare state experienced a sustained period of development and expansion following the post-war settlement. Yet subsequently, as Taylor-Gooby et al. (2017b: 49) state: "the UK welfare state has moved away from the bipartisan consensus on a basic adequate level of protection which endured from 1945 up to the later 1970s". Retrenchment of the UK welfare state began in earnest in the 1980s when neoliberal values took hold of mainstream politics, promoting the reduction of state social expenditure, and invoking the creation of provider markets (Burden, 1998).

In the context of the Global Financial Crisis of 2008 and the ensuing period of global recession, a Conservative-Liberal Democrat coalition government came to power in 2010 championing the "neo-liberal logic of austerity" (Taylor-Gooby et al., 2017a: 11), promising significant welfare reform and cuts to public spending in order to restore the UK economy. In the period 2010-2012, with a strong commitment to austerity as a means of managing down the nation's deficit while keeping taxation low, roughly two-thirds of Government spending cuts was directed at welfare state provision. This programme of severe reform created, according to Kersbergen (2014: 891), the impression of: "a thorough-going restructuring of the British welfare state towards a highly inegalitarian form of liberalism".

Rather than a source of protection from social risks, current policy discourse frames the UK welfare state as part of the problem. In the 2010 green paper on welfare reform, *21st Century Welfare*, the Department for Work and Pensions (2010: 9) asserted that: "the welfare state has become a vast, sprawling bureaucracy that can act to entrench, rather than solve, the problems of poverty and social exclusion". It is this discourse of the politics of individualism which has come to dominate social policy making in the UK, in which a morality of individual responsibility combines with diminished support for collective provision, thus further weakening the solidarities between middle and working classes on which collective welfare is based (Taylor Gooby et al., 2017b).

Scotland has limited self-government within the UK. Through the process of devolution, some executive and legislative powers have been devolved to the Scottish Government and the Scottish Parliament since 1999. The UK Parliament retains control over reserved matters specified in the Scotland Act 1998, including UK taxes, social security, defence and international relations and broadcasting. The Scottish Parliament has legislative authority for all other areas relating to Scotland. Powers over taxation and social security were significantly expanded by the Scotland Acts of 2012 and 2016. The majority of the Scottish Parliament's finances come from a block grant from the UK Government.

In certain areas of social policy Scotland has sought to emulate approaches taken by governments in the Nordic region, particularly in relation to education and public health. The financial settlement which followed the establishment of the Scottish Parliament in 1999 allowed for the development of a welfare state much closer to the social democratic model than the rest of the UK (Cairney and Widfeldt, 2015). Since its establishment, the Scottish Parliament has been led by social democratic parties, first under a Labour-Liberal Democrat coalition, and since 2007 by the Scottish National Party (SNP). Examples of

universal coverage in Scotland include: 'free personal care' for older people; the abolition of prescription and eye test charges; and the re-introduction of free higher education brought in by the SNP Government following its election in 2007. These changes occurred at a time when many charges in England were increasing (such as tuition fees) or means-tested (such as personal care) (Cairney and Widfeldt, 2015: 13). Yet despite these high-profile universal policies, other commentators noted disappointment at the relatively limited progressive policy making under the first ten years of devolution, particularly in relation to the lack of tax reform (see for example Jarvis and Gardner, 2009). Subsequently, the Scotland Act 2012 brought key tax raising and borrowing powers to Scotland, and following the referendum on Scottish independence in 2014, a further package of powers was devolved from the UK to the Scottish Government by the Scotland Act 2016. These new powers include control over the delivery of eleven different welfare benefits, which make up 15 per cent of the overall social security budget for Scotland. Scotland's approach to social security policy in recent years, in particular measures the Scottish Government has taken to mitigate the impacts of the Welfare Reform Act of 2012, also suggests a divergence from UK Government policy and is discussed in more detail at section 5.6.2 below.

The Scottish Government has nurtured a reputation for having a distinctive approach to developing policy. The 'Scottish approach', Cairney et al. (2016) suggest, refers to the Scottish Government's consultative and cooperative style when it makes and implements policy in devolved areas. This includes engagement with a range of groups and stakeholders outside of government (such as the voluntary sector; trade unions; professional bodies) to gather information and support. This collaborative approach may, Cairney et al. (2016) also suggest, be in part due to the scale of the Scottish Government which allows for closer working across departments, and calls for greater reliance on external expertise in the policy making process than is the case for the UK Government.

Child care, and early years education more broadly, is an example of an aspect of social policy to which the Scottish Government has taken a distinct approach to the rest of the UK. Here, Mooney and Scott (2016) suggest that the Scottish Government has taken an approach more akin to the Nordic model of children's and parents' rights. However, since devolution, Cairney et al. (2016) argue that there is little evidence that Scottish policymaking differences have produced major differences in policy outcomes. For example, some critics have pointed to evidence that inequalities in areas such as education, health and crime remain stubbornly high, despite government interventions (Mooney and

Poole, 2004; Law and Mooney, 2006). There is certainly a risk, as Cairney et al. (2016) warn, of over-claiming the potential of the 'Scottish approach' to policy making, given that the UK Government still largely determines the Scottish Government's budget, and key policies – including economic, (most) social security, and employment.

As Mooney and Scott argue: "the debate around Scotland's constitutional future has rarely been in isolation from arguments around the shape and future trajectory of social welfare" (2016: 241). Indeed in the context of the Scottish independence referendum of 2014, the SNP and others in favour of a 'Yes' vote, drew on concepts of civic nationalism and imaginings of possible welfare futures in their arguments for independence. The symbolic role which the growth of food banks has come to play in this debate regarding Scotland's welfare state identity is explored in detail in Chapter Nine.

5.3 Finland's Welfare State

Comparisons of general government spending as a percentage of GDP highlights the differences in levels of investment in delivering public goods and services and providing social protection between different countries. According to 2015 figures, government spending in Finland (with a total population of 5.5 million people) was the highest across all OECD countries, at 57.1 per cent (OECD, 2018a), suggesting a strong public sector commitment to the welfare state, while the UK was in 18th place at 42.4 per cent. According to Scottish Government figures, public sector expenditure in Scotland was 46.6 per cent of GDP (excluding North Sea revenue) (Scottish Government, 2016a).

Income inequality in Finland is the fourth lowest in the OECD, with a Gini coefficient of 0.26, while the UK is in 20th place with a Gini coefficient of 0.36 (OECD, 2018b). Finland regularly scores highly in comparative measures of subjective wellbeing of the population, and was ranked first in the UN's 2018 *World Happiness Report* (Helliwell et al., 2018). It is widely considered that these high levels of happiness and well-being are associated with high levels of national public spending, strong social protection systems, and low inequality (Helliwell et al., 2018; Wilkinson and Pickett, 2009).

Finland's welfare state was developed from the 1960s onwards, later than in the other Nordic nations. Agriculture dominated in Finland for longer than other countries in the region, and social security policies remained under-developed during the first half of the twentieth century. The country experienced rapid industrialisation and urbanisation in the

decades following the Second World War, and by the 1970s, Finland had transformed from an agrarian to an industrial and service society (Kettunen, 2001). The welfare policies adopted were largely copied from those already in place in Sweden, with the state taking on entire responsibility for health care and social welfare, and the development of comprehensive earnings-related benefits for the employed and flat rate benefits for individuals outside the labour market. The Finnish welfare state continued to expand, and in the late 1980s income inequality in Finland was the lowest in the industrialised world (Hiilamo, 2014).

It is important to note that while the analysis presented in this thesis locates Finland's welfare state within the social democratic regime type, given its cultural origins and affiliation with universalist regimes elsewhere in the region as described above, its place within welfare regime typologies is contested. While in some commentary it is located among the other Nordic states of Sweden, Norway and Denmark as a social democratic regime (including in Esping-Andersen's (1990) original typology as discussed in Chapter Four), elsewhere the Finnish state is categorised as a corporatist or conservative regime, or separated out as something of a hybrid on account of the traditional role of NGOs and the Church in social welfare provision. For example Bambra's (2007b) summary of welfare regime typologies, and Ebbinghaus' (2012) analysis of typologies highlight the inconsistency with which Finland is classified. Furthermore, reforms that have occurred over the past 15 to 20 years have served to undermine Finland's status as a social democratic welfare regime.

In the context of the economic crises of the 1990s which affected Finland and Sweden in particular, the neoliberal critique of the Nordic welfare model gained traction and, "the welfare state was no longer looked upon as a solution to but rather as a source of the crisis" (Kuhle and Hort, 2004: 14). Indeed, when severe economic crisis hit Sweden and Finland in the early 1990s, such thinking began to penetrate the heartland of the Nordic welfare state itself. As Bambra (2013) argues, the Nordic countries have not been immune to the processes of globalisation, neo-liberalism and welfare reform which have resulted in rising social inequality. Therefore, the extent to which these welfare states still represent the social democratic ideal has been widely contested.

According to Hilamo (2014), the case of Finland is illustrative of such tension within the Nordic welfare state model. Following the 'golden years' of the Finnish welfare state during the 1980s, it was here that the impact of the economic crisis between 1990 and 1993 was felt most severely. Finland was the only OECD country for which the crisis of this

period was worse than that of the Great Depression of the 1930s (Kuhle and Hort, 2004). This recession resulted from a combination of factors, including the collapse of a housing and credit bubble caused by deregulation of the banking sector, as well as the fall of the Soviet Union which had been a key trading partner of Finland. The rate of unemployment in Finland rose from around 3 per cent between 1989 and 1991, to around 18 per cent at the beginning of 1994 (Jonung et al., 2008). Although the economy began to recover in 1994, austerity measures introduced during the period of recession were not reversed and inflation eroded social security levels even further. Persistent unemployment and widening income inequality emerged as new problems in Finland (Kuivalainen and Niemelä, 2010). Stagnation of social security payments at the recession level, and taxation policy which favoured those at the top, contributed to growth in inequality in Finland from the mid-1990s until the global financial crisis in 2008 at a faster rate than in any other OECD country (Silvasti, 2015: 472). While the impacts of the global recession were noticed in Finland, they are said to have been minor compared to the experiences of the early 1990s.

In this context the issue of poverty rose up the political agenda and new policy responses were sought. For Kuivalainen and Niemelä (2010) it was this new interest in poverty and the development of targeted, selective welfare policies and interventions which marked a decisive move away, what they term 'a paradigm change', from the traditional universalist approach of the Nordic welfare state in Finland. The publication of a report – among other statistics of rising poverty levels - showing that some 100,000 people in Finland were experiencing hunger (Heikkilä et al., 1994, cited in Kuivalainen and Niemelä, 2010) brought poverty onto the agenda of many civil society actors, and new ideas about how to deal with the problem emerged (Kuivalainen and Niemelä, 2010). The Finnish Lutheran Church established a pressure group, named the Hunger Group, which called on the government to take action to directly address the newly identified problems of poverty and hunger in the country.

The idea of selectivism was translated into policy instruments in 2001 when the government, a broad coalition lead by the Social Democratic Party leader Paavo Lipponen, launched an anti-poverty programme known as a 'package for the poor'. According to Kuivalainen and Niemelä (2010: 270):

> "These targeted measures diverge considerably from the core idea of universalism, whereby benefits are intended equally for all citizens and benefit levels in general are to be kept at a high enough level to obviate the need for targeted measures".

It was within this context of rapid growth in unemployment, and new policy concern for targeting the needs of 'the poor', that charitable food aid emerged on the welfare landscape in Finland. The nature of its development, the social and political responses at the time, and the connections to a changing welfare state identity, are examined at 5.7.2 below.

Hellman et al. (2017) review how ideas of the welfare state have been articulated within Finnish Government programmes since 1950. They highlight the period between 2000 and 2015 as a time of increasing estrangement from universal notions. The election of the 'six pack' coalition led by the centre-right National Coalition Party heralded an increased role for the third sector, with the language of citizens gradually changed to that of 'client' or 'consumer' in government policy. However it is the election of the most recent government – a coalition between the National Coalition Party, the populist nationalist Finns Party and led by the Centre Party – on a conservative manifesto of austerity and debt-reduction which Hellman et al. (2017: 17) note as "a real character change in Government Programmes". Emphasis is placed on the "responsibility" and "capacity" of "autonomous citizens" and the provision of choice in service delivery. In this context, Hellman et al (2017) suggest that ideas of universalist solutions have been side-lined in Finish social policy. The ways in which Finnish social security policies have changed in recent decades, and the extent to which they reflect a fundamental shift away from the principals of universalism, and therefore from a social-democratic welfare regime identity, are discussed further at 5.6.1 below.

5.4 Food as a Welfare State intervention in Finland

Chapter Four distinguished the role of food within different welfare state regime types, noting that while in liberal regimes food is predominantly a market commodity, in social democratic welfare states, the role of food as a public good remains important. Contexts in which the state might intervene in relation to food as a matter or social welfare, as identified in Chapter Four, are: basic sustenance; health; children's welfare; and adult's care.

The most significant context of direct welfare state intervention through food across all regime types is in schools. Differences in models of school meal policies reflect key differences in welfare state functions and ideology. From universal to means-tested provision, and from regulated, state-provided food to school meals as a competitively

tendered, market-driven activity. Comparing school meals policies highlights key differences between universal and selectivist approaches to welfare state intervention. School meals are an interesting example of the role of selectivist welfare state interventions in reproducing stratification. This is also emphasised by Hartog in his review of Dutch school meal programmes, arguing: "a food policy measure associated by the beneficiaries with social stigma will have no lasting effect" (Hartog, 1994: 113). Such discussions of targeted food interventions reflects wider debates regarding the relative aims and impacts of selectivism and universalism as approaches to welfare state design and delivery.

The provision of universal free school meals has a long history in Finland compared with other aspects of its social services and is a core feature of the welfare state. The system is unique worldwide and a source of significant national pride (Pietinen, 2010). Since 1948 municipalities in Finland have been legally obliged to provide school meals to all primary school pupils, a law which was extended to all school pupils in 1957. In 1979 subsidised meals for university students were also introduced. As several commentators have highlighted, this form of mass catering is a crucial way in which nutrition policy and dietary guidelines are implemented in Finland (Roos et al., 2007; Raulio et al., 2010).

The universal social welfare aim of school meals in Finland is central. While not the case in all Nordic countries, Kainulainen et al. (2012) highlight that in Finland the responsibility of the school, over that of the parent, to provide meals is emphasised. The impact of the Finnish school meals system on improving children's diets, increasing intake of fruit and vegetables and improving nutritional knowledge has been widely reported, as has the role of school meals in explaining Finland's dominant position in in the OECD's Programme for International Student Assessment surveys (Tikkhanen and Urho, 2009). What is particularly distinct about the Finnish school meals system internationally, including among the Nordic states, is its integration within the school curriculum. The school meal in Finland therefore occupies a central position within the welfare state with complementary nutritional, health, education and social welfare objectives.

Workplace catering has long been a significant feature of the Finnish welfare state and plays an important part in the implementation of national nutrition policy and improving health (Roos et al., 2002; Pietinen et al., 2010). Catering in the workplace began in Finland in the 1970s when, according to Raulio et al. (2010) those who had been the first to grow up with universal free school meals entered the workplace. Meal provision was written into trade union agreements in both the public and private sectors and it was recommended by

the Finnish Institute of Occupational Health that it should be possible for every employee to eat properly during the working day (Raulio et al., 2010). While the economic support given to workplace meals has diminished since the peak years of the 1980s, workplace canteens and restaurants continue to be supported by different tax agreements and subsidies to promote their use among employees (Pietinen et al., 2010; Raulio et al., 2010). This model of state-provided catering is an important example of defamilisation within the Finnish welfare state. Where the state takes responsibility for ensuring children and workers have daily access to a nutritious meal, this increases the independence of women who would otherwise be seen to be responsible for feeding their families. It also underlines the strength of the ideological position of food as public good within the Finnish welfare state which has endured despite substantial shifts away from universalism in recent years as described elsewhere in this chapter.

5.5 Food as a Welfare State intervention in Scotland

As discussed in Chapter Four, food has not had a traditionally strong social welfare role within liberal welfare regimes, and has tended to be positioned within the private, domestic sphere. Dowler (2002: 699) suggests that "the construction of the British welfare system largely bypassed issues of food availability and access". Where the state has intervened through food such action has been targeted at specific groups. This section provides a brief overview of changes in the provision of school meals within the UK welfare state, considering how the changing approach to food in this context might reflect wider changes in the role of the welfare state.

The changes in school meal policies which have occurred in the UK since the post-war era are indicative of wider changes in the role of the British welfare state. The provision of meals to children in schools was among the earliest of state interventions in welfare in the UK during the late nineteenth and early twentieth century. School meals expanded considerably in Britain during the Second World War, becoming a universal rather than a targeted service under rationing. The 1944 Education Act made it a duty of all local education authorities to provide a school meal service as an integral part of education provision (Burnett, 1994: 65). However, what Gardner (1985) describes as a "war-time dream of a universal service", he argues, was never fully realised. Milk was provided free for all pupils but school meals were only ever free to those children whose parents could not afford the fee. At their height in 1975 school meals fed 75 per cent of school children

(Burnett, 1994). Standards for school meals were also regularly revised up until the mid-1970s and were obliged to take into account the possibility of deficiencies in a child's home diet (Evans and Harper, 2009). School meals were considered an integrated part of the education system and an important area of welfare state intervention in food as a matter of children's health and wellbeing.

The election of a Conservative Government in 1979 on the promise of radical reductions in public spending quickly threatened the future of school meals in the UK. Nutritional standards and national pricing were abolished (Evans and Harper, 2009). While the school meals service in the UK has always carried some level of means-testing, Evans and Harper (2009) argue that the Social Security Act of 1986, which limited the right to free school meals to those children whose parents received supplementary benefit, marked a significant shift from the previous welfare state approach to school meals which aspired to (although never fully realised) provision of a universalist, national system.

Changes to school meals policy in the 1980s were symptomatic of a broader strategy to dismantle the welfare state and deregulate the market, with emphasis placed on the importance of competition and choice. Concern regarding the standard of school meals grew during the 1980s and 1990s. In the early 2000s, each devolved administration in the UK began to develop its own food and nutrient-based standards or guidelines for school meals beginning with Scotland in 2003 following the strategy laid out in *Hungry for Success*, the report of the Scottish Executive's Expert Panel on School Meals (Scottish Executive, 2003). It is notable that at this time the Scottish Parliament also considered a fully universal free school meals policy as proposed in the *School Meals (Scotland) Bill* (Scottish Parliament, 2001), although this was not adopted.

According to Sahorta et al. (2013), in the context of rising child poverty levels and growing concern regarding health inequalities, school meals took on increased significance as an area in which the government could impact on the nutritional health of disadvantaged children. The impact of stigma on the uptake of free school meals was recognised by policy makers and effort was made to reduce this by anonymising the process, for example through the introduction of a cashless card payment system. In September 2014 the Coalition Government introduced universal free school meals for infant school children and which was closely followed by similar legislation in Scotland. Such moves suggest a return to a state financed and state regulated school meals system which was largely dismantled in the 1980s. At the same time, within the context of cuts and restrictions in other areas of the welfare state, the role and purpose of school meals appears to be

changing. Current media and policy attention on the issue of 'holiday hunger' in the UK (see for example Frank Field MP's recent *School Holidays (Meals and Activities) Bill 2017-19*) suggest the increased significance of the social welfare role of school meals and that they are now seen as an important source of protection for children in households experiencing food poverty.

Compared to Finland, then, where national nutrition is seen to be the responsibility of the welfare state, in Scotland the welfare state does not recognise the same level of responsibility for food provision. Where the state does intervene through food – such as in the school setting – it is largely as a targeted, means-tested, anti-poverty strategy.

5.6 Social security systems

Chapter four identified the social security system as the principle mechanism used by the welfare state to ensure people are able to meet their basic food needs. Here, following definition from the International Labour Organisation, social security (synonymous with social protection) is taken to mean the economic security which society offers when people are faced with certain risks and to cover certain contingencies. These include: survival after a certain age (pensions); responsibility for the maintenance of children (child benefits); inability to engage in paid work due to a long-term condition (disability benefit); suspension of earnings due to in ability to obtain suitable employment (unemployment benefits), pregnancy (maternity benefit), or temporary illness (sickness benefit). Social security can be contributory - earnings-based social insurance which is financed by employer and employee contributions, or non-contributory, which includes universal or means-tested benefits. Non-contributory systems are generally funded through taxation and provide lower levels of payments than insurance-based benefits to unemployed workers who either do not qualify for contributory benefits or have exhausted their entitlement to unemployment insurance benefit (International Labour Organisation, 2014).

Social security systems in social democratic welfare states tend to be more universal in nature and aimed at poverty prevention, while liberal welfare regimes are selective, involve greater means-testing and focus on poverty alleviation. This section considers the nature and impact of social security systems in Finland and Scotland as examples of these two contrasting welfare regime types, and considers how changes in these systems over recent decades have protected people from, or exposed them to, food poverty. Such analysis also

helps us to consider the ways in which developments within the social security systems of both countries may have precipitated an environment in which charitable food aid could emerge and become established.

5.6.1 Social Security in Finland

The social security system in Finland is largely premised on the universal Nordic model, whereby all those permanently resident in the country are entitled to a minimum income and the Finnish Constitution guarantees everyone the right to basic social security. Most social security benefits in Finland exist in both contributory and non-contributory forms. Non-contributory social security is available to people in Finland in the form of basic assistance and labour market subsidy, both of which are administered by the Social Insurance Institution (Kela). Basic unemployment assistance is not means-tested and is paid weekly to job-seekers of working age for up to a maximum of 500 days. Labour market subsidy is a means-tested benefit paid to those who are unemployed once they have received basic assistance for the maximum period. Pensions are paid to people unable to work due to old age, disability, or the death of a provider (European Commission, 2013).

Social assistance is a last-resort, minimum income benefit. Such assistance has generally been considered a marginal form of social security in the Nordic context. Scholars have noted this marginal role to be in part due to the tradition of nearly full employment and the accomplishment of an encompassing welfare state that together reduced the demand for means-tested protection (Lødemel, 1997). Traditionally, the distinguishing features of Nordic social assistance schemes have included: highly localised administration systems (allowing for significant local discretion); considerable means-testing; and close links with social work. It is suggested that this link with social work is because those requiring social assistance tended to be the poorest and most marginalised groups who would often also have broader social and health problems and therefore already have social work involvement. This traditional profile of social assistance clientele might explain why Nordic social assistance has tended to be more controlled, discretionary and, it has been argued, more stigmatised than corresponding schemes in other countries (Lødemel, 1997).

As examined by Tayor-Gooby et al. (2017a), there are different schools of thought regarding the extent to which nation states' responses to contemporary political, economic

and social pressures have resulted in fundamental shifts in the nature of their welfare states. In her discussion of changes to the welfare state in Finland and Sweden following the recession of the early 1990s, Timonen (2003: 7) argues that "restructuring was defensive and designed to carry the system over a crisis period, not dismantle it". However, at that time several universal welfare policies which were removed altogether. For example in Finland the universal sickness benefit was eliminated in 1996, a measure which has been identified as a major step away from universalism in Finnish social policy (Ritakallio, 2001). Timeonen (2003) also notes areas in which the Finnish welfare state developed features of both the corporatist and liberal welfare state models. For example social security in Finland became increasingly tied to employee contributions, as is the case in Central European countries such as Germany and France. In other areas the focus of social policy on increasing work incentives and the rise in conditionality of income transfers reflects movement towards a more liberal model of welfare state (Timonen, 2003). For example, rehabilitative working activity was introduced in Finland in 2001, and a policy of sanctions enacted against people not accepting activation offers was put forward in 1996 and further strengthened in 1998 (Kuivalainen and Nelson, 2011).

In the context of financial recession and rising levels of longer-term unemployment, pressure on means-tested benefits in social democratic welfare states has increased in recent decades. As a result, the localised and discretionary character of Nordic social assistance has changed. There has been a trend towards centralisation and standardisation of the basic scale rates, thereby making eligibility less dependent on local and professional judgements. Finland is noted as a forerunner among the Nordic countries in this regard (Kuivalainen and Nelson, 2011).

As levels of long-term unemployment in Finland grew during the mid to late 1990s, spending on means-tested social assistance rose significantly. Silvasti (2015) highlights that at this time social assistance became the primary source of basic security for a growing proportion of the out of work population in Finland. A total of 413,200 persons received unemployment benefits at year-end 2014, which represents 12 per cent of the Finnish working age population. Of them, 54 per cent were in receipt of a basic unemployment benefit (National Institute for Health and Welfare, 2015).

While it has been argued that the Finnish welfare state was successful in safeguarding people's wellbeing during the recession, the dramatic increase in relative poverty rates post-recession is recognised to be a result of the reduced redistributive effects of social security (Uusitalo, 2000). As Silvasti (2015: 473) argues, Finnish social policy

developments of the last twenty years have increasingly left people with insufficient income for minimum subsistence and states that "minimum social security in Finland has been repeatedly shown to be too low for decent living". According to a Finnish public opinion survey similar to the Minimum Income Standard calculated in the UK, in 2014 a household reliant on unemployment benefits received enough income to cover 66 per cent of the costs considered necessary for an adequate standard of living (National Institute for Health and Welfare, 2015). Drawing on Finnish household survey data from 2014 which identified that 20 percent of people living on income support had also relied on food aid, Silvasti (2015: 472) concludes: "changes in social policy have meant the social security system now fails to guarantee food security for the most vulnerable people in Finland".

There has been much international interest in the Finnish Government's recent pilot of a universal basic income. A policy which has long been promoted by left-wing parties in Finland as an anti-poverty measure, was introduced by a centre-right Government elected in 2015 on the basis that it would reduce bureaucracy and work disincentives which they argued were significant problems within the existing Finnish social security system. The experiment involved providing an unconditional basic income to 2,000 randomly selected unemployed people across Finland in 2017-18 (Kangas, 2016). Concern has been raised, however, that to replace existing social security benefits with a modest basic income, as is the case with the Finnish experiment, could serve to increase poverty levels (Pareliussen et al., 2018). Indeed the Finnish Government has been criticised for the limited scope of its experiment which will make it difficult to draw any hard conclusions as to the potential impacts of an expanded scheme (Jauhiainen and Mäkinen, 2017).

Figure 5.1 uses data from Eurostat to compare rates of unemployment and long-term unemployment (over twelve months) among the economically active populations of Finland and the UK, and also considers levels of poverty and severe material deprivation in both countries, and compares these figures to the EU average. The data shows that while unemployment is much higher in Finland than in the UK, the reverse is true for levels of poverty and deprivation. This suggests that the social security in Finland, despite the recent changes and short-coming described above, provides a more effective safety net than the current UK system. The following section discusses the social security system in the UK, how it has changed in recent decades, and draws out aspects of the system which might be distinct in Scotland.

Figure 5.1 Unemployment and poverty rates (%) in UK and Finland in 2016
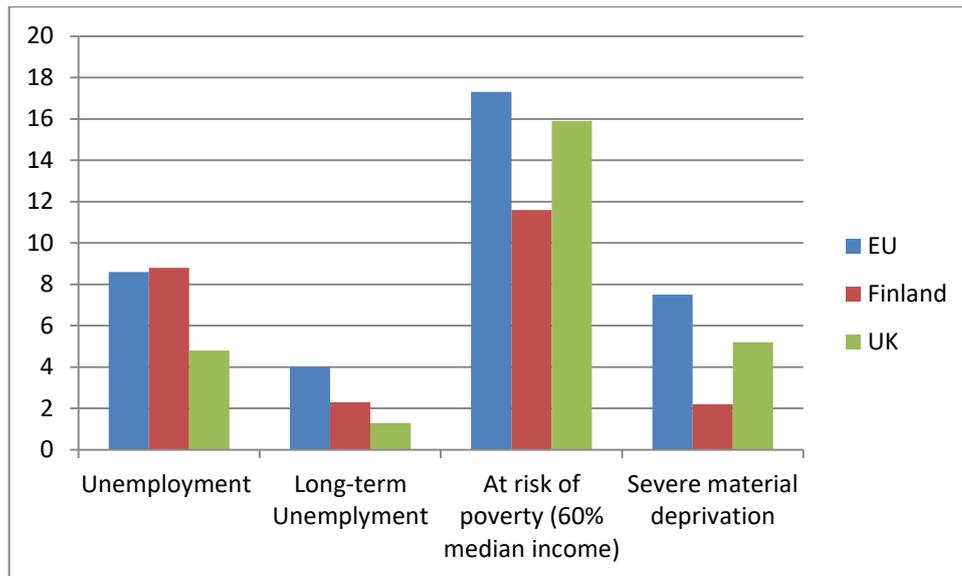
(Source: EuroStat, 2016, *Unemployment statistics*: Figure 2 and Figure 5, and *People at risk of poverty or social exclusion*: Figure 1 and Figure 4)

5.6.2 Social Security in Scotland

In the UK, social security payments are made to those temporarily or permanently excluded from the labour market. It has been claimed that Beveridge's original proposals for a social security system were mainly the result of his long-term aversion to the Poor Law, selectivity and all forms of means-tested benefits, and that in his vision such methods would take a minimal and declining role in the British welfare state (Harris, 1997). Indeed Beveridge is suggested to have influenced the Scandinavian post-war welfare developments (Kuhnle and Hort, 2004). However, perhaps contrary to his vision, means-testing and residual benefits featured in many parts of the British welfare system from the outset and were never disposed of.

As described above, the rise of neoliberal ideology within UK politics from the 1980s onwards marked a decrease in support for collectivist policies and shift in the location of responsibility from the state to the individual. In the context of social security policy, the introduction of Job Seekers Allowance (JSA) in 1996 marked "a pivotal change" in the nature of social security benefits and which intensified the monitoring of unemployed claimants' job-seeking behaviour (Watts et al., 2014). As a liberal welfare state regime, the UK social security system is characterised by a high level of means-testing and conditionality, under-pinned by a morality of individual responsibility which has come to

dominate ideological arguments and approaches to welfare policy making in recent decades.

Power over social security legislation and budget setting across the UK's devolved nations remains predominantly reserved to the UK Government. While some elements of the UK benefits system have been devolved to the Scottish Government under the *Scotland Act 2016* and are outlined in the *Social Security (Scotland) Act 2018* (pending royal assent), the principal income replacement benefits are administered by the UK Government's Department of Work and Pensions (DWP) across each of the devolved nations. Specifics on the devolved areas of the social security system in Scotland are outlined below.

Under the Coalition Government (2010-2015) a radical programme of restructuring was pursued across a wide range of areas of welfare state provision, including the social security system, which, according to Taylor Gooby et al. is indicative of "a determination to achieve a major and permanent shift in UK state welfare" to be characterised by a very small, highly liberalised public sector (2017b: 54). This has continued under subsequent Conservative Governments of 2015 and 2016. A number of benefit cuts and freezes have meant that levels have lagged behind living standards. A benefit cap was introduced in 2013 which limits the amount of money one household can be awarded, regardless of need or family size. Universal Credit, which is currently being rolled out across the UK (aimed to be fully established by 2021), was the Coalition Government's flagship welfare reform policy and marks a major change in the operation of the social security system. It involves the replacement of six different means-tested benefits and tax credits with a single benefit paid monthly and intended to be "like work" (Millar and Bennet, 2017). While it is beyond the scope of this thesis to discuss the policy in detail, the design and delivery of Universal Credit have been widely criticised. It is estimated that the policy will push 1.2 million more children into poverty by 2021 (Schmuecker, 2017). The UK currently operates among the strictest of sanctioning policies in the developed world, and one which will be further extended under the roll out of Universal Credit. Describing the new requirements and stringent sanctions under Universal Credit, including the extension of conditionality to include in-work claimants, Dwyer and Wright (2014: 33) argue that the policy: "represents a fundamental change to the principles on which the British welfare state was founded".

The Scottish Government has implemented a number of measures designed to mitigate the impacts of the UK Government's welfare reform policies. These have included the introduction of substantial exemptions from the 'bedroom tax', whereby housing allowances were restricted for households who were under-occupying their property. In

addition, following the UK-wide abolition of the Social Fund (a discretionary fund payable for exceptional needs but which was abolished in 2013) the Scottish Government chose to introduce a new national scheme called the Scottish Welfare Fund, a locally administered discretionary fund which awards crisis grants in cases of emergency or disaster (Scottish Government, no date).

Following the passing of the *Social Security (Scotland) Bill* by the Scottish Parliament in April 2018, a new Scottish social security agency will be established to deliver eleven newly devolved benefits (which represent 15 per cent of the total benefits budget for Scotland). The new legislation is framed in the language of human rights and proposes to put dignity and respect at the heart of social security in Scotland. However, the Scottish Government has also been challenged for failing to use this new policy to top up existing benefits (Child Poverty Action Group in Scotland, 2018). The extent to which the implementation of this new legislation will prove to be a significant shift in Scotland's welfare state identity is yet to be fully determined.

5.7 The role of food aid in the comparator countries

Having examined the welfare states of both Scotland and Finland, focusing in particular on recent changes to the social security systems in each context, this section briefly considers the role of food aid in each country. While Chapter Three explored the rise of food aid across the Global North, focusing on the UK evidence base in particular, here the nature of food aid provision and the political and policy responses to it in the case study countries are highlighted. This provides important background for the comparative analysis presented in Chapter Nine.

5.7.1 Food aid in Scotland

Chapter Three provided an overview of the growth of food aid in the UK and a summary of recent research evidence on the scale, drivers and impacts of its use. The picture in Scotland is largely similar, although with some clear differences in the nature of the political debate surrounding it. Early studies commissioned by the Scottish Government sought to map provision, better understand the types of services on offer, and their relationships with statutory services (Sosenko et al., 2013; MacLeod, 2015). Recent

mapping of food banks in Scotland shows there are around 120 food bank outlets affiliated with the Trussell Trust, and over 70 which are identified as 'independent' (i.e. not affiliated to the Trussell Trust) (Independent Food Aid Network, 2017).

In 2015 the Scottish Government commissioned an independent working group to investigate food poverty and produce a series of recommendations for addressing it. In its final report, the group concluded food poverty to be a problem of income and the rise in food bank use driven by problems with the benefits system, as well as insecure and low-paid work (Independent Working Group on Food Poverty, 2016). It also identified the indignity of the food parcel hand out, and along with a series of recommendations to improve the adequacy and security of people's incomes, the group called for investment in the community food sector – including support for food banks to 'transition' to "more dignified forms of food access", including community meals and pay what you can community cafes.

In 2014 the Scottish Government launched its Emergency Food Fund which provided £500,000 of funding to the food redistribution charity Fairshare, and a further £500,000 in grants to individual food banks and other emergency food projects. Unlike the UK Government which has not provided direct funding to food banks, the Scottish Government suggests that it aims to support such projects as part of its attempt to mitigate the impacts of UK welfare reform measures. It is important to note that, unlike the UK Government, the Scottish Government is clear in its recognition that austerity measures and welfare reforms have driven the increase in food bank use. Indeed launching the initial Emergency Food Fund, the First Minister used the growth of food banks as a symbol of the damage caused by Westminster policies and sought to assert Scottish social policy difference in stating: "only an independent Scotland will have the full powers we need to protect people from poverty and help them fulfil their potential in work and life" (Scottish Government, 2014a). In their response to the recommendations of the Dignity report, the Government also made a commitment to consider enshrining the Right to Food within domestic law (Scottish Government, 2016b).

Drawing on the recommendations from the report of the Short Life Working Group on Food Poverty, the second round of this fund – renamed as the Fair Food Transformation Fund – sought to fund projects that "give a more dignified response to food poverty and help to move away from emergency food aid as the first response" (Scottish Government, 2016c). This version of the fund was also aligned to ongoing efforts to develop Scotland's food policy, and framed as a means of helping achieve the aim of becoming a 'Good Food

Nation' (Scottish Government, 2014b). The Scottish Government has also supported the development of a resource aimed at promoting dignity within the community food sector, which the report considers: "well placed to respond to current crises and promote and restore dignity at a local level" (Bloemen et al., 2018: 1). It is important to note that community food initiatives in Scotland are not new; indeed in 1996 the Scottish Community Diet Project (now Community Food and Health Scotland) was established to promote and focus community action on food and diet within low income neighbourhoods (Dowler and Caraher, 2003). What is new, however, is a more direct focus on community food activity as a response to the food bank phenomenon. Such shift in focus is reflective of the sorts of responses to the rise of food banks which have occurred elsewhere, as discussed in Chapter Three, whereby local community responses to food insecurity develop to include a wider range of social and environmental concerns. The extent to which this current policy focus in Scotland on "dignified food access" might be considered as an "improve the food bank" response to food insecurity (McIntyre et al., 2016) is explored in detail in Chapter Nine.

5.7.2 Food aid in Finland

Charitable food aid expanded in Finland in the context of economic recession and rapid growth in unemployment as described at 5.3 above. Food aid provision in Finland is commonly referred to as the "breadline", literally referencing the queues of people waiting to receive bread and other items of food aid, but also used in the Finnish literature, as Salonen (2017: 220) states, "in a broad sense to refer to the places that provide charitable food assistance for people living in weak social and economic situations".

It was the Lutheran church in Finland which was the first to speak out on poverty during recession years and bring the issue of hunger to public attention (Hilamo, 2012). Food aid, or breadlines, began to proliferate in 1997 when they were included in church's annual Common Responsibility Campaign. The role of food aid in Finland was further strengthened with the application to the EU's Food Distribution programme for the Most Deprived Persons (MDP), which was supplemented with donations from local stores and food industry. Again the church gained a dominant position in the coordination and distribution of the EU food aid provision.

According to Hilamo (2012), the church assumed its food bank project of 1997 would be a temporary measure that would not be required after a few years. However, as economic

conditions improved some food banks did close but they remained in most deprived areas, an indicator that: "general economic improvement no longer guaranteed that people would be lifted out of poverty" (Hilamo, 2012: 408).

The recession of the 1990s clearly prompted a significant change in the social welfare role of the church in Finland. However, it is important to note that the church has a long history of providing social welfare support in Finland and which, contrary to welfare state regime theory, did not die out following the establish of a social democratic system of welfare support. Indeed the position of the Lutheran Church in Finland remains strong, and in 2012 almost 80 per cent of the population were members. Its poverty alleviation work is maintained though church taxes paid by the membership and delivered by professional nurses and social workers trained and employed by the church. According to Pessi and Grönlund (2012), the role of parish nurses and social workers extended considerably during the recession period from their previous focus on the provision of pastoral care for elderly parishioners, to provide increasing practical and financial support for working-age people. Interestingly, according to Pessi and Grönlund (2012), in contrast to the complementary role played by the church's pastoral, or diaconal activities in the other Nordic countries, in Finland such work serves the necessary role of filling in the gaps and deficiencies in public social security.

Evidence of the scale of food aid provision across Finland, the nature of use, and the characteristics of recipients is very limited. Ohisalo et al. (2013, cited in Salonen (2017)) whose recent work has sought to survey the populations of food aid recipients, estimate that food aid operates in over 220 municipalities throughout the country and serve over 20,000 people on a weekly basis. There is no national coordination of provision and food aid is generally provided without means-testing or recording any information about recipients (Salonen, 2017).

Commentary on the growth of food aid in Finland has focused on its symbolism in relation to the changing role of the welfare state and the apparent failures of the social security system. For example, Silvasti and Karjalainen (2014: 80) comment on the "entrenchment of emergency food aid in Finland as mission of churches and charity". Similarly, Salonen (2016) suggests that food aid in Finland has become "a permanent secondary social safety net for the deprived". Echoing critics from North America, the UK and elsewhere, Salonen (2014: 11) suggests that such a system creates divisions in how food is consumed; rendering those accessing these services as "secondary consumers". She highlights how people in poverty are excluded from culturally acceptable forms of consumption and that

within a consumer society they are relegated to function as "objects of charitable giving and as users of seasonal surplus".

5.8 Conclusions

This final chapter of the literature review section of the thesis has brought together the themes explored in the previous literature chapters to consider how they might be playing out within the case study countries selected for this research. The chapter has examined the development of the welfare states in both Scotland and Finland, as examples of contrasting regime types, considering how ideological shifts and policy changes have led to a weakening of the welfare state in both contexts. In the case of Scotland, the welfare state has been shaped by retrenchment and reform driven by the UK Government and the current social security landscape is one of far-reaching conditionality and stringent sanctioning. In this welfare state context food is largely considered a private matter and the example of school meals policy is consistent with the nature of food interventions in liberal welfare regimes. As outlined in Chapter Four, such interventions tend to be means-tested, anti-poverty measures. The rise of food aid has been associated with this retrenchment of the welfare state and its further withdrawal from responsibility for ensuring household food security. The case of Scotland however, as a devolved nation within the UK, suggests the potential for distinct political and social policy development in response to food poverty. Indeed the Scottish Government's engagement with the growth of food banks has been used to emphasis their ambition for a distinctive approach to social welfare and concern to move beyond the current model of food banking, but to one which retains a central role for the community sector in responding to food poverty.

In Finland, it is clear that food plays an important role as a public good, and welfare state interventions through food are significant ways in which values of the social democratic welfare state are upheld - the Finnish school meals system being an often cited example of universalism in action. This approach to food stands in contrast to the wider context of austerity and shift towards neoliberalism within Finnish politics and policy making. Indeed from the limited literature available on the subject, the rise of food aid in Finland has been closely associated with national social policy reforms and the gradual retreat from principals of universalism.

This overview poses important questions about the significance of food aid to welfare service delivery and policy development, and its implications for the nature of the welfare state in both countries. While the following chapter provides a justification for selecting Scotland and Finland as the comparator cases, this chapter has set the policy context for the two countries under investigation in this study. It has also highlighted the relevance of Glasgow as an appropriate setting for examining food poverty and food aid experiences. Before moving on to discuss the methodological approach in detail, it is necessary at this stage of the thesis, having reviewed the relevant aspects of the literature, to outline the research questions to be examined in the remaining part of the thesis.

5.9 Stating the research questions

Chapter Two examined the nature of food poverty, identifying the need for both a structural framing of the problem and an appreciation of the multidimensional nature of the experience. The chapter also identified the need for greater evidence on the scale, drivers and experience of food poverty, and the role of food aid in that experience. This context gives rise to the first research question, and set of sub-questions to be addressed in the empirical part of this study:

Research Question 1: ***What does* food poverty *look like in deprived neighbourhoods?***

1a) What is the scale of food poverty, how has this changed over time, and who does this affect?

1b) What factors are associated with an increase in food affordability difficulties?

1c) How is food poverty differently described by those reporting difficulty affording food, and those delivering welfare state services in the same neighbourhoods?

Chapter Three examined the rise of food aid across the Global North, considering the different political, economic and other policy drivers behind its development in different contexts. The chapter identified the need for greater empirical evidence of, and more critical engagement with, the role of food banks in welfare state contexts where they have only recently become established. The second research question and related sub-questions looks to address this gap by asking:

Research Question 2: What does* food bank use *look like in deprived neighbourhoods?

2a) What is the prevalence of food bank use?

2b) What are the characteristics of those who use food banks and what factors are associated with use?

2c) How are food banks experienced and perceived by those reporting difficulty affording food, and those delivering welfare state services in the same neighbourhoods?

Given the over-arching aim of the thesis to understand the role of food aid in relation to the changing nature of the welfare state, Chapter Four took a step back from the contemporary debate surrounding food aid provision to engage with welfare regime theory and provided a framework for considering the role of food as an aspect of welfare state intervention across different regime types. Different contexts in which the welfare state might intervene in relation to food were identified. Chapter Five has then considered: how the welfare states of two contrasting regime types- Scotland and Finland have developed; the role of food in each welfare state; and the implications of social security changes for exposing people to food poverty. A brief overview of the growth of, and policy response to, food aid in each setting, gives rise to the final set of research questions addressed in this study:

Research Question 3*: How is food aid challenging and changing the welfare states of Scotland and Finland?*

3a) What are policy actors' understandings of food poverty, and the role of food aid in both countries?

3b) What is the place of food within the welfare state and what are the implications for this of the rise of food aid?

3c) How are the different roles and relationships of food aid and the welfare state being played out?

The following chapter presents the methodological approach taken to answering these research questions.

Chapter Six: Methodology

6.1 Introduction

The empirical research carried out for this study involved both quantitative and qualitative methods. The quantitative part of the study involved cross-sectional and longitudinal analysis of an existing household survey of 15 deprived neighbourhoods in Glasgow (the GoWell study). The objective was to examine the scale of both food poverty and food bank use. Binary logistic regression modelling was used to examine the relationship of these outcomes with socio-demographic, health, and financial variables. The qualitative fieldwork involved a total of 51 semi-structured interviews. These included interviews with a sample of the GoWell study participants (n=12); service providers in Glasgow (n=12); and policy actors across Scotland (n=9). Fieldwork in Finland involved interviews with policy actors and individuals working in statutory and voluntary services (n=18).

The purpose of this chapter is to present the methodological approach taken to answering the questions outlined at the end of Chapter Five. It provides an overview of the research design, outlining the multi-methods approach and use of an international comparator case. The chapter goes on to explain the research processes which were followed for each aspect of fieldwork, presenting the rationale and theoretical understanding of the methods used. Ethical considerations and procedures which were followed in order to manage risk and minimise harm are also examined. Finally, the chapter offers an overview of the processes involved in analysing the different forms of data included in this study.

6.2 Methodology and research design

6.2.1 Methodological approach

All research is informed by a set of philosophical assumptions, or basic beliefs about the nature of knowledge and how it might be acquired. Such beliefs provide a foundation for inquiry and shape the design and delivery of research. Cresswell and Plano Clark (2018) identify four philosophical orientations, or worldviews, which might inform the practices of mixed methods researchers. The research design for this study was influenced by what Cresswell and Plano Clark describe as a "pragmatist worldview" which is focused on solving a particular problem using whichever methods are appropriate (2018: 37). While

recognising that all research, and therefore the selection of methods, to be informed by the worldview of the researcher, it is also possible to adopt research methods which might be traditionally located within very different epistemological paradigms in order to address a particular research problem. Rather than considering quantitative and qualitative approaches to lead to binaried, incompatible ways of knowing the world, from an epistemological perspective, "pragmatism breaks down the hierarchies between positivist and constructivist ways of knowing in order to look at what is meaningful from both" (Shannon-Baker, 2016: 326). In the research process then, both deductive and inductive thinking may be combined as both qualitative and quantitative data is gathered and analysed as the study proceeds (Cresswell and Plano Clark, 2018).

According to Creswell (2009), in taking a pragmatic approach to research "instead of focusing on methods, researchers emphasize the research problem and use all approaches available to understand the problem" (Creswell, 2009: 231). This approach is often used in applied, policy related research. A pragmatic approach is suited to the research questions addressed in this thesis as the problem is a real world, highly topical issue and is relevant to current social policy concerns.

In carrying out research on what is a largely new, under-researched social problem in the UK and across other European welfare states, adopting a pragmatic approach is appropriate in order to allow multiple aspects of the same phenomenon to be investigated. In taking this approach, it has been possible to produce different forms of new knowledge in order to help advance theory, policy and practice in relation to food aid and its place within the welfare state. While employing a mixed methods design, it is important to note that the quantitative element of the study plays a largely secondary role in the overall study which gives greater space to the qualitative data and the interpretivist analysis of those findings. The quantitative analyses provides important context to the explanatory details of the multiple perspectives offered in the qualitative data in this study.

The applied nature of the research problem under investigation in this study means that the importance of quantifiable data for policy makers and practitioners is recognised, particularly given that existing data of this nature in the UK is very limited. The GoWell Community Health and Wellbeing Surveys (discussed in detail at section 6.3.2 below) provided a unique opportunity to generate new quantitative data on food bank use and food insecurity as self-reported measures, and insights into the factors which might be associated with these experiences. This statistical analysis also provided important context to the qualitative elements of the study which offered an examination of multiple

perspectives on the topic and insights into the lived experiences of individuals which helped to explain the 'why' of the research problem under investigation. The quantitative data was also vital in identifying groups and individuals for the qualitative research. Details of the mixed methods research design are explored in the following section.

6.2.2 The mixed methods design

As discussed above, the growth of charitable food aid in Scotland and the UK more widely is a largely under-studied but emergent area of research interest. Given the lack of quantitative empirical evidence of the scale and drivers of the problem, as well as the need to advance theoretical understandings of its implications for society, a mixed methods approach offered an opportunity to develop the evidence base and also make a contribution to theory in this field. Richie and Ormston (2014) recognise the usefulness of mixed methods to social policy research. Bringing together distinct kinds of evidence, they suggest, can offer a powerful resource to inform and illuminate policy or practice. Given the motivation behind this study to produce research which might provide such a useful resource to policy makers and practitioners looking to develop responses to food poverty, a mixed methods research design was an appropriate choice.

The pragmatic approach to mixed methods research considers there to be great value in bringing together different types of data in order to yield different forms of intelligence about the phenomenon under investigation. As Cresswell (2009) argues, the researcher can gain broader perspectives as a result of using multiple research methods. Using multiple methods enables different aspects of the growth of food aid within the welfare state to be explored. It also allowed for the production of data which has the potential to answer different research questions and sub-questions related to the over-arching aim of the thesis.

There has been much written about the ways in which quantitative and qualitative methods can be brought together in a single study. Cresswell and Plano Clark (2018) offer a typology for classifying different approaches, and this study was informed by what they identify as an explanatory sequential design. This approach is typically used to explain and interpret quantitative results by collecting and analysing follow-up qualitative data. In this study, as explained in more detail below, a key role of the secondary analysis of quantitative data was to enable the sampling of participants for one aspect of the qualitative research. Cresswell and Plano Clark (2018) describe this as the participant selection model

of the explanatory mixed methods design. The processes involved in this are described at section 6.3.3.1 below.

6.2.3 Using an international comparator

In addition to combining quantitative and qualitative research methods, this study included a further element of comparison by conducting some fieldwork in an international setting. While the majority of the fieldwork was completed in Scotland (principally in Glasgow), the short piece of international fieldwork was carried out in order to enhance understanding of the implications of the rise of food aid for the welfare state by examining the issue from a different welfare state context. From the examination of different welfare state typologies, and the role of food within those different contexts presented in Chapter Four, it was important to be able to compare how food aid has developed within Scotland, as a liberal welfare state regime, with a contrasting regime type.

Finland was selected as the comparator case because it is often typified as an example of a social democratic welfare state, but is also a country in which food aid has emerged over recent decades as discussed in Chapter Five. From a public policy perspective, the Scottish Government has often looked to the Scandinavian countries for learning, with Finland in particular identified for emulation in areas of education and public health policy. In 2017 the Scottish Government introduced the Baby Box scheme, modelled on a similar scheme which has been in place in Finland since 1938 (Scottish Government, 2017a). It was therefore recognised that drawing comparisons between Scotland and Finland in relation to policy responses to food aid would be of particular interest to public policy makers in Scotland. The similarities between Scotland and Finland in terms of population size (approximately 5 and 5.5 million respectively) and geography (both have populations concentrated in urban centres and large, sparsely populated rural areas) also suggest the two countries as appropriate cases for comparison.

According to Hantrais and Mangen (1996: 10) cross-national research projects may "sharpen the focus of analysis of the subject by suggesting new perspectives". By travelling to Finland, it was possible for me to learn how the research interests of this study apply in a different setting and have particular assumptions and 'taken for granted' understandings of how the world works challenged by stepping into a different social and cultural context. For example, early on in the fieldwork I discovered that the food bank is not a used term in Finland, and I learned about the iconic breadlines. Visiting these long

lines of people waiting for food in the early hours of the morning was a shocking experience, challenging my preconceived ideas about what food aid in a social democratic welfare state might look like. A photograph I took at one of the breadlines is at Appendix A. In addition, being asked by research participants how the situation in Finland compared to that in Scotland forced me to reflect on my own context in a way which would not have been possible had I stayed at home. Through this process, it was possible for me to consider the situation in Scotland from an outsider's perspective.

This experience was invaluable in providing the critical distance necessary to address the central theoretical question of the study. It is important to note that in undertaking the international comparative element of the study, the aim was not to identify exact equivalence or to measure differences directly, but instead gain some insights into the role of food aid within a contrasting welfare state regime, and provide a critical vantage point from which to reflect upon the situation in Scotland.

6.2.4 The role of the external advisory group

As discussed in Chapter One, I came to this study from a role within the third sector and I was motivated to ensure that the focus of my thesis was informed by the priorities and interests of those looking to develop policy and practice in response to the growth of food banks in Scotland. Moving from the third sector into academia I was keen to retain the links I had developed through my initial research project with local services, national campaign groups, civil servants, and like-minded academics from other institutions. I wanted to provide them with the space to reflect on the 'bigger picture' of these issues, and hoped that engaging them in my research process might also help inform their work. Early on I established a small external research advisory group made up of individuals from a broad spectrum of job roles who shared a common professional interest in matters of food poverty and food bank use. This group of five met on four occasions over the course of the study. They acted as a helpful sounding board for my research questions, participant recruitment plans, pieces of writing, and early analysis. Their feedback helped shape my thinking, provided practical advice, and gave me a space to discuss my work outside of my supervisory team.

In conducting social policy research, I am motivated to produce evidence which can influence decision-makers and be of use to those working in policy and practice roles. I believe that this can be best achieved by working in a dialogical manner throughout the

research process, rather than simply delivering findings as an end product to external stakeholders. Involving those who might benefit from my research early on and at key stages during the study, I believe helped to maximise the impact and utility of my study for those working in more applied settings.

6.3 Research methods and processes

This section of the chapter outlines the methods used in the study and the processes involved in accessing and gathering different types of data. It explains the source of the quantitative data which was analysed, and then details the approach taken to qualitative interviewing – outlining the sampling strategies involved, and how different groups of participants were recruited.

6.3.1 Study Context - Glasgow

The city of Glasgow in Scotland was chosen as the setting for the parts of the study which address the first and second research questions, namely to examine the scale, drivers and experience of food poverty and food bank use. Glasgow is Scotland's largest city with a population of approximately 600,000. This post-industrial city contains the largest share of deprived areas of any town or city in Scotland. According to the 2016 Scottish Index of Multiple Deprivation (SIMD), over one third of Glasgow's residents live in areas which fall within the 10 per cent most deprived neighbourhoods in Scotland, and almost half live in the 20 per cent most deprived (Scottish Government, 2016c).

Glasgow has been recognised as one of the areas of the UK worse affected by the UK Government's recent welfare reforms, and the hardest hit within Scotland on a per capita basis (Beatty and Fothergill, 2016a; 2016b). Here, it is anticipated that by 2020-21 the post-2015 welfare reforms will result in a loss of £167 million a year, equivalent to £400 a year for every adult of working age in the city (Beatty and Fothergill; 2016b). At a UK national level, Glasgow is the area which is estimated to be worse affected by changes to Employment and Support Allowance (disability benefit) given the high concentration of disability benefit claimants in the former industrial city (Beatty and Fothergill, 2016a). As with other places which have been identified for research on food bank use (see Garthwaite et al 2015's work in the North East of England), Glasgow is also noted for its significant

health inequalities, with a 15-year gap in life expectancy between residents of the richest and poorest parts of the city (McCartney, 2011). Glasgow has long been recognised for its seemingly intractable problems of poverty and deprivation, ill health and excess mortality (McCartney, 2011; Walsh et al., 2016). It has also been concluded that Glasgow, as a post-industrial, deprived city, has been particularly vulnerable to the impacts of economic and social policies since the 1980s which have increased inequality in the UK. The impacts of local economic and planning decisions, and the outcomes of significant processes of urban change, are also considered key factors in explaining the 'Glasgow effect' whereby the city has far worse health outcomes than comparable UK cities of Liverpool and Manchester (Walsh et al., 2016).

It is important to recognise that by focusing on Glasgow, this study is not representative of the population of Scotland as a whole. It is likely that differences in food aid provision and use would have been identified had the study been conducted in different parts of the country. Indeed May et al. (2018) have highlighted particular rural experiences of, and responses to, food poverty and how these might differ from an urban setting. However, a focus on deprived areas within the city of Glasgow provided a valuable opportunity to consider food poverty and food bank use in a context of considerable poverty, poor health outcomes, and disproportionate impacts of welfare reforms- factors recognised in Chapters Two and Three as highly relevant to the phenomena under investigation in this study. In addition, Glasgow also hosts the highest concentration of asylum seekers and refugees in Scotland, groups known to be particularly vulnerable to food poverty and therefore of thematic interest to this research (Scottish Government, 2017b). The choice of Glasgow also made it possible to avail of the unique data available through the GoWell study, which is described at 6.3.2.

6.3.2 Quantitative data source: the GoWell Study

The quantitative data set which was analysed for this study came from the GoWell Study's Community Health and Wellbeing Surveys of (at baseline) approximately 6,000 households across 15 different areas of Glasgow. The overall aim of the GoWell Study was to investigate the effects of regeneration on the health and wellbeing of residents (Eagan et al 2010). The project was a collaboration between Glasgow Centre for Population Health (GCPH); University of Glasgow; Glasgow Housing Association (GHA); Scottish Government; NHS Health Scotland; and NHS Greater Glasgow and Clyde. The

neighbourhoods involved in the study, which began in 2006, were each due to under-go different types of regeneration interventions over the lifetime of the project. Each of the 15 areas sits within the 15 per cent most deprived data-zones in Scotland, according to the Scottish Index of Multiple Deprivation.

The survey consists of a structured questionnaire (completed with a fieldworker) asking respondents about their feelings regarding their health, personal circumstances, overall wellbeing, and their perception of the community and neighbourhood and issues surrounding their home. Of specific relevance and interest to this thesis, some of the questions within these surveys pertained to the respondent's experience of difficulty affording different household items – including food. While not the main focus of the GoWell Study, the project occurred at a time of significant economic and social policy change at a national level, notably the recession and subsequent austerity agenda and changes to a number of social security benefits following the *Welfare Reform Act 2012*. These changes were recognised by the GoWell Board to be of relevance to their study. Therefore, in the 2015 survey wave additional questions were included to identify which specific welfare reforms respondents had been affected by. Crucially for this study, a question was also added regarding experiences of accessing food banks or similar services, as well as a follow-up question determining reasons for non-use.

The survey had a repeat cross-sectional design with a nested longitudinal cohort and involved four separate survey ways over a 10 year period. Addresses were selected at random from the Royal Mail postal address file and one individual per household was approached to complete the structured questionnaire (Eagan et al., 2010). The surveys achieved response rates of 50.3% (6003) in 2006, 47.5% (4688) in 2008 and 45.4% (4175) in 2011. The 2015 survey achieved a response rate of 47 per cent (n=3,614).

The GoWell survey data therefore provided a unique opportunity to examine the extent of food insecurity among deprived populations in Glasgow, and to exploit the longitudinal component of the study in order to identify how this has changed over time. Crucially, the survey also provided the first evidence of food bank use as a self-reported measure and, at the time of data analysis, was the first study to be able to identify the characteristics of food bank users and drivers of use beyond the monitoring data gathered by Trussell Trust food banks.

To complete the analysis for the quantitative element of this study, the cross-sectional data sets for each survey wave were made available to the researcher, as was the longitudinal

data set for the 2011-2015 surveys. This longitudinal data set was made by retrospective name and address matching, carried out by the statistician within the GoWell team. Longitudinal analysis comparing changes over more than two survey waves was considered beyond the scope of this thesis given the complexity of the statistical tests involved. Furthermore, given this study's interest in the changing role of the welfare state, the 2011 to 2015 time period was considered of particular theoretical importance because of the potential for the impacts of UK Government welfare reforms introduced over this time to have been felt at an individual level. However, four individual cases were identified by the GoWell statistician where the individuals had reported food bank use in 2015, and also taken part in all four survey waves. A data set of specific variables for these individuals was made available to the researcher for specific analysis which is presented in Chapter Eight. Details of the statistical tests applied in order to analyse the quantiative data are presented in the relevant findings chapters.

6.3.3 Qualitative interviews

In total four different groups were interviewed as part of the overall study: GoWell participants; service providers working in these neighbourhoods; policy actors in Scotland; and policy actors, service providers and other relevant individuals in Finland. Sections 6.3.3.1 through to 6.3.3.5 of this chapter explain the approach taken to interviewing each of these groups and provide an overview of the interviewees in each group.

According to Denzin (1978), asking who can provide a different perspective on a topic by nature of their role can be just as important as asking how many people are needed to answer the question. In this way the research seeks to contribute to building a framework of multiple realities (Thomas, 2009) and highlight connections and tensions between these realties in order to better understand the growth of food banks and their implications for the welfare state. Such an approach is described by Denzin (1978) as data triangulation through the use of multiple perspectives on the phenomenon of interest.

This study is interested in exploring the subjective ways in which the research participants understand and experience food poverty and food banks, yet it is also recognised that such meanings are actively negotiated between the researcher and the researched in the interview process (Holstein and Gubrium, 2004). The interview is interactive in nature and a generative process in which new knowledge or thoughts are likely to emerge as the interviewer directs the discussion down avenues which may have not been previously

explored (Legard et al., 2003). Such processes were evident in a number of the interviews in this study, and directly commented on by the interviewees on some occasions. For example, when questioned on why he thought some individuals he worked with might refuse a referral to a food bank, Stuart, a housing support worker in Glasgow, commented:

"*I suppose it is a kind of pride barrier. I am just trying to think how I would feel, 'cos I've never actually been asked, there's a lot of these questions you're asking and I know exactly what I dae when I'm up there wi' them, but I'm trying to put myself in their shoes, and I know that's probably how I would feel*"

The advantage of the semi-structured interview is the ability to combine structure with flexibility. Each interview was based on a topic guide that also allowed for full probing on key areas, and the ability to follow-up on issues which spontaneously emerged.

6.3.3.1 Interviews with GoWell participants

A central objective of this study was to better understand the experiences of people who struggle to afford food, and in particular to explore why people might not use food banks. Existing qualitative research on food banks in the UK had involved people who use food banks, often interviewing or observing them at the food bank itself (see for example Perry et al. (2014) and Garthwaite (2016a)). As discussed in Chapters Two and Three, it is widely recognised in the literature that many barriers exist to food bank use, and food poverty is experienced by a much larger number than those who are attending food banks. Given the overarching aim of this thesis to understand the implications of food banks for the experience and delivery of the welfare state more broadly, it was important to examine the role of food banks from the perspective of those struggling to afford food but who may or may not access them. By using the survey data results as a sampling framework, it was possible to identify a sample of individuals to approach for interview from what is otherwise a 'hidden', or hard to reach, population.

The sample of individuals approached for interviews was drawn from the population of respondents to the 2015 GoWell survey who had reported difficulty affording food (n=614). Richie et al. (2003a) comment on how a survey sample can offer an effective sample frame for qualitative studies and is particularly useful when the study group is a small population or when defined on the basis of sensitive information. Initially a sample of 20 respondents was identified from the data set, including an even number of men and

women and ensuring representation from particular groups of interest including those reporting disabilities, lone parent households, single households, refugees and asylum seekers, and individuals both in and out of work. Some had and some had not reported having used a food bank. Names and addresses for 18 of these respondents were shared via a password protected file (two of the addresses were unavailable). The individuals were then sent a letter, outlining the aims of the project, asking them if they would be interested in participating, indicating that the researcher would follow up with a phone call and providing contact details for further information.

A total of twelve interviewees took part for this part of the research. Four initial interviews took place in December 2015 and served as the pilot cases. Following these interviews, key thoughts and reflections on the interview process and content of the discussions were written up. This allowed the interview schedule to be adapted where particular lines of questioning were proving challenging. These pilot interviews were followed by a further seven interviews, following the same process for identifying and recruiting participants as used in the pilot phase. In one case it was the survey respondent's wife who agreed to be interviewed, as her husband was working long hours and unable to find a convenient time to be interviewed. In another case, the interviewee's wife chose to join the interview. Given the extent of her contributions to the interview, she is listed as an interviewee in her own right. An outline of the characteristics of the twelve interviewees is presented in Table 6.1 below. The interviewees were given pseudonyms which were considered to be broadly in keeping with their age, nationality and religion.

The approach taken to securing a sample of interviewees was time-consuming and labour intensive. Contact numbers for several individuals in the sample had expired, and several failed attempts to meet with potential interviewees despite making arrangements over the phone. Despite these challenges, it was important to persevere in order to achieve the objectives of the research.

The interview schedule explored general experiences and practices related to food shopping, cooking and eating in the household, before examining more specifically experiences of financial difficulties, and coping mechanisms and strategies adopted in order to access sufficient food when faced with such difficulties. The interview schedule also covered experiences and perceptions of food banks, and sought to relate these to experiences and perceptions of statutory services and forms of support. The full interview schedule is available at Appendix B. The interviews varied in length between approximately 30 and 60 minutes.

Table 6.1: Interviewees - GoWell Participants

Participant	Sex	Age	Household type	Citizenship	Employment status	Long-term health condition	Food bank use*
1. Martha	Female	35-39	Lone parent, four children	Refugee	Unemployed	Yes	Yes
2. Jim	Male	55-59	Couple, no dependent children	British	Recently signed off work due to ill health*	Yes	Yes
3.Karen (Jim's wife)	Female	Unknown	Couple	British	Unknown	Yes	Yes
4. Colin	Male	60-64	Widowed (lives with son and grandson)*	British	Retired	Yes	No
5. Sonia	Female	35-39	Lone parent, two children	Refugee	Unemployed	No	No
6. Makeen	Male	30-34	Married, one child	Refugee	Working part-time	No	Yes
7. Arthur	Male	50-54	Widowed	British	Out of work due to long-term illness or	Yes	No

					disability		
8. Tony	Male	55-59	Single	British	Out of work due to long-term illness or disability	Yes	No
9. Richard	Male	40-44	Single	British	Out of work due to long-term illness or disability	Yes	No (had been given food from a food bank by a friend on one occasion)
10. Jennifer	Female	25-29	couple, two children	British	Unemployed, partner works full-time*	No	No
11. Tahir	Male	35-39	couple, three children	Refugee	Working full-time	No	No
12. Moira	Female	Unknown	couple, four children	British	Working-part time*, partner works full-time	No*	No

Source: 2015 GoWell Survey, except all fields marked * - source: qualitative interviews

6.3.3.2 Interviewing in the home

Conducting semi-structured interviews in-situ has been discussed as a way to ensure participants are more comfortable and in control of the interview setting. This approach also enabled access to participants who might otherwise be considered 'hard to reach'. Given the sensitive nature of some of the topics covered in the interviews, the home environment provided the space for interviewees to feel more comfortable discussing such aspects of their personal lives. Food practices are deeply connected to home, therefore conducting these interviews in participants' homes provided opportunities for deeper insights into such practices and experiences. For example, during their interviews two interviewees spontaneously chose to open cupboards and freezers to point out meals and food items which helped to illustrate their answers to particular questions. Such rich detail and additional context provided much greater insight into these individuals' experiences than would have been possible in a different setting.

However, a significant challenge of interviewing in the home is that the interviewer has less control over the environment and has to be able to adapt to unexpected interruptions and background noise from televisions, children and pets. In several cases other family members were present during some or all of the interviews. In one instance, although unplanned, the interviewee's wife also took part in the interview (Jim and Karen). In Jessica's interview, due to lack of other space in their home, her partner was present throughout the interview. It was apparent that in some areas of questioning this will likely have influenced her responses, particularly when she described her previous experiences of living as a single parent.

6.3.3.3 Qualitative interviews with service providers in Glasgow

The aim of this element of the qualitative data gathering was to interview a range of professionals working in frontline service delivery roles who interact with people who struggle to afford food, and who may or may not make referrals to food banks. As discussed in Chapter Three, most food banks operate a system whereby access to them is only possible via referral from another agency. It was recognised that perceptions and experiences of food banks from such service providers was important to gather, as they appear to play an important role in integrating food banks within 'mainstream' welfare services. Key service types identified to include in the sample were: primary care; housing; social work; and welfare rights advice. Following the interviews with residents, refugee

support services, and mental health services were also identified as important to include. This approach is described as purposive, where members of a sample are selected on the basis of key criteria.

The aim was to recruit professionals working within Glasgow and the GoWell neighbourhoods in particular, so that their experiences would be more likely to reflect those of the residents interviewed. A strategic approach to recruiting participants was used, which involved recruitment via both personal and professional contacts, including from my previous research on emergency food aid. Interviews were largely held at the interviewee's place of work, although two were held in their homes. A summary of the characteristics of the service provider interviewees is presented at Table 6.2 below. Again, all have been given pseudonyms.

These interviews focused on how interviewees approach the issue of food affordability with clients, their strategies for supporting someone who did not have money for food and how these might have changed over time. Experiences, perceptions and views on food banks were then discussed, aiming to understand the place of food banks within the wider context of welfare and social security services and their impacts upon the wider landscape of welfare service provision. The topic guide used for these interviews is at Appendix C.

Table 6.2 Interviewees: Service Providers in Glasgow

Participant	Job or role	Employer
1. Stuart	Housing support worker	Voluntary sector (national)
2. Sarah	GP	NHS
3. Alan	Legal advice provider	Voluntary sector (local)
4. Liam	Housing officer	Housing association
5. Julian	GP	NHS
6. Pauline	Dietician	NHS
7. Eleanor	Dietician	NHS
8. Katherine	Practice Nurse	NHS
9. Denise	Support worker	NHS
10. Laura	Social worker	Glasgow City Council
11. Gail	Mental health worker	Third sector (local)
12. Gemma	Refugee and asylum seeker services manager	Third sector (national)

6.3.3.4 Fieldwork in Finland

The fieldwork in Finland was carried out over a two week period in September 2016. International fieldwork funding was awarded by the ESRC to cover the cost of this research visit. Most of the data gathering took place in Helsinki, with two visits made to a small town north of the capital. Prior to the visit, contact was made with an academic researcher at the University of Helsinki who has been studying the role of food aid in Finland. A third sector organisation involved in anti-poverty campaigning was also engaged via existing relationships with anti-poverty organisations in Scotland. These initial contacts helped with identifying other relevant interviewees and provided important practical support in organising aspects of the study visit.

The sampling strategy used for identifying participants in Finland involved a mix of both purposive and snowballing approaches. From initial engagement with key individuals, contact was then made with others whose knowledge and experience were likely to be relevant to the research topic. An advantage of using this method was that it revealed a network of contacts, minimised issues regarding access, and ensured that those most likely to offer significant insight into the chosen research topic were included in the study. Given the importance of trust between researcher and the researched in qualitative studies (Savvides et al., 2014), this snowballing strategy helped build confidence among potential interviewees in the study as they were invited to participate via a trusted colleague. On the whole interviewees were willing to take part and participated with interest during the interviewees. A possible advantage of being a 'foreign' researcher was the interest which this generated among potential interviewees. Interviewees were keen to understand the motivation behind selecting Finland for the study, and were therefore perhaps more willing to participate in the study of a visiting researcher, than they might have been in work done by someone local.

The aim was to engage a range of individuals within research and policy roles related to charitable food aid, poverty and the social security system in Finland more broadly. It was also important to interview a sample of individuals working in statutory and voluntary sector social services to gain insights into the significance of food aid for their job roles. An overview of the participants from fieldwork in Finland is presented at Table 6.3 below and the interview schedule for these interviews is at Appendix D.

Table 6.3: Interviewees – Finland

Participant	Job or role	Employer
1. Jiri	Senior social policy researcher	University
2. Juha	Senior civil servant (social security)	National Government
3. Benjamin	Senior academic	University
4. Heidi	Food aid charity manager	Third sector
5. Anna	Social worker	Public sector – local government
6. Tiina	Academic researcher	University
7. Leena	Government social policy researcher	National Government
8. Milla	Academic researcher	University
9. Katja	Government nutritionist	National Government
10. Jenni	Government nutritionist	National Government
11. Anneli	Social work manager	Public sector – local government
12. Kirsi	Food aid provider	Third sector
13. Lotta	Coalition Party Councillor	Local government (elected member)
14. Maria	Left Alliance Councillor	Local government (elected member)
15. Susanna	Food aid provider	Third sector
16. Mikael	Unemployed workers association director	Third sector
17. Johannes	Unemployed workers association coordinator	Third sector
18. Tuukka	Third sector manager	Third sector

6.3.3.5 Qualitative interviews with policy actors in Scotland

Following the research visit to Finland, a sample of policy actors in Scotland was recruited for interview. The sample included those in key roles involved in setting the direction of policy and practice related to food poverty and food banks in Scotland. Suitable interviewees were identified from my existing networks and knowledge of the field, and also from recommendations given by the research advisory group. The sample included civil servants, policy advisors and leaders of national third sector organisations. Interviews

were held at the interviewees' place of work and lasted between 45 and 60 minutes (although one interview lasted over two hours). An overview of the interviewees involved is outlined at Table 6.4 below and the interview schedule is at Appendix E.

Conducting these interviews after the other pieces of fieldwork had been completed, allowed for early analysis of findings from other aspects of the data collection, including initial reflections from the research in Finland, to be explored through discussion with those already closely engaged with the topic in Scotland. These interviews sought to understand the perspectives of those in key positions on the nature of food poverty, the role of food banks, and the future direction of policy and practice responses in Scotland. Together with the fieldwork in Finland, this set of interviews answer the third research question of the thesis which considers how food banks might be challenging and changing the welfare state.

Table 6.4: Interviews – Scotland policy makers

Participant	Job or Role
1. Elaine	Social and public policy specialist
2. Natalie	Local government manager
3. Alasdair	Director of third sector organisation
4. Mark	Faith leader
5. Sandra	Senior civil servant
6. Jane	Civil servant
7. Clive	Food charity manager
8. Jacqui	Food charity director
9. Susan	Public health manager

6.4 Ethics

Before beginning the fieldwork, ethical approval for this study was obtained from the University of Glasgow's College of Social Science Ethics Committee. Permission to use GoWell survey data in order to access interviewees was sought through application for an amendment to the GoWell project's ethical approval. The NHS Research Ethics Committee approved this study as a minor variant on the original GoWell project research

proposal. GoWell's main programme of study received ethical approval from NHS Scotland B MREC committee in 2005 (no. 05/MRE10/89).

6.4.1 Informed consent

Denscombe (2002: 98) states that, "informed consent is a benchmark for social research ethics". It is vital to ensure that participants are made fully aware of the purpose of the study, what participation will involve for them, who is carrying out the study and how the data will be used – particularly in relation to anonymity and confidentiality. Given the sensitive nature of the topics covered in the interviews with the GoWell participants, it was important to use the participant information sheet to present the study in a way which would avoid potentially stigmatising or offensive wording but which was also up front about the aims of the research and the topics to be covered in an interview. The participant information sheet is available at Appendix F and the consent form at Appendix G.

Participants in the GoWell household survey had previously given their consent to be contacted for follow-up interviews as part of the consent process for the GoWell survey. Participant information sheets were sent to potential interviewees in the post (or via email in the case of the service provider and policy actor interviews), and hard copies were also provided at the start of the interview. As a token of appreciation for their time, the GoWell participants received a £10 shopping voucher. This approach was used following advice from the GoWell team where a similar incentive had been used in previous qualitative research with GoWell survey participants.

Interviews were audio recorded, and recordings and transcripts were stored separately. Both direct and indirect attribution of quotes and comments in the write-up of research findings was avoided through the use of pseudonyms, as well as generalised place names and other potentially identifiable characteristics such as the names of particular health conditions and employers of national policy actors in Scotland.

6.4.2 Risk to subjects

Some of the topics covered in the interviews with GoWell residents were particularly personal: coping with financial difficulties; managing household food budgets; using a food bank. As such there was a recognised a risk that participants may become distressed

during the course of the interview. To minimise this risk, as described at 6.4.1 above, informed consent was gained and participants were made aware that they were free to refuse to answer any of the questions or to stop the interview at any time. It was also recognised as important that should participants become worried or upset by the topics covered in the research, provision would be in place to sign-post towards professional, confidential sources of support. A list of contact numbers for local advice/support services, specific to the area where the interviewee lived, as well as national helplines, was made available. Details of local welfare rights and Citizens Advice agencies were considered likely to be particularly useful for interviewees experiencing financial difficulties and potentially impacted by recent changes to the benefits system.

6.4.3 Risk to the researcher

To minimise risks pertaining to conducting interviews alone in participants' homes, a procedure was followed whereby the researcher carried a telephone and ensured that a key contact had information of their location when carrying out fieldwork. The researcher checked-in with the key contact before and after each interview. This third party was provided with the precise times the interviews were expected to start and finish, and addresses of interviewees were shared via a password-protected file.

6.5 Qualitative data analysis

The approach taken to qualitative data analysis in this study was predominantly inductive, whereby analysis is largely data driven. Interviews were transcribed and analysed in groups in the order in which they were collected. This started with the interviews with the GoWell participants. As described above, emergent themes from these interviews, as well as results from the quantitative data analysis, were used to inform the interview schedules and sampling frameworks for the service provider and policy actor interviews. Starting data analysis during data collection and moving back and forth between data gathering and analysis allowed for on-going refinement and reflection upon the interview and wider research questions.

The process of thematic analysis was an iterative one and involved different stages. The process was informed by the framework approach to qualitative data analysis described by

Richie et al. (2003b). This involves reviewing and sorting the raw data, developing descriptive accounts through categorising and classifying the data, before applying a further level of reflective analysis to create explanatory accounts from the themes in the data. For this study, the transcripts were initially reviewed for descriptive themes, alongside the development of a mind-map to brainstorm connections between different themes and note reflections from the interview process. From this initial process of data analysis, a working draft analytical framework was developed.

The next stage involved close coding of the data using NVivo software for qualitative data analysis. Codes were applied to all transcripts in a systematic way ensuring that all of the data was fully interrogated and explored for meaning. Through this process the analytical framework was revised and adapted. The same analytical framework was used for coding each of the different groups of interviews, however in cases were codes only pertained to one particular group these codes were labelled accordingly. For example, 'household budgeting' was a descriptive theme which was identified from the analysis of the residents' interviews. A related theme of 'poor money management' then emerged from the interviews with service providers and coded as a sub-theme of 'household budgeting'. Developing a coding framework which brought together the data from these different groups helped to identify tensions, contradictions and corroborations within and across the different interviewee types. An early version of the coding framework produced as a word document is at Appendix H.

While the interview schedule was divided into sections related to specific topics, the process of thematic analysis did not rely solely on pre-conceived ideas, but codes also emerged from interactions with the data. For example, the role of the family emerged as an important theme in relation to questions on strategies for coping with food insecurity, but also appeared in wider discussions on food budgeting, shopping and cooking. Thus the importance of food for sense of belonging and identity within the family emerged from the data as a key finding, and which did not directly relate to any specific section of the interview schedule. Thus the process of moving from coded data to findings involved both more theory-led approaches to identifying answers to the research questions, drawing on the literature to enhance the analysis, as well as more bottom-up engagement with the data to identify common experiences and perceptions which emerged and were considered pertinent to the broader interests of the study.

6.6 Summary

This chapter presented the methodological perspective of the study, outlining the mixed methods research design and gave an overview of the different methods chosen for the study. The chapter explained the origins of the quantitative data set which was analysed, and the approach taken to qualitative interviewing with different groups. The different interview participants were introduced by their pseudonyms and different characteristics of relevance to the aims of the study. The approach to ethics taken in the design and delivery of this study was also presented. In addition, this chapter outlined the processes involved in analysing both the quantitative and qualitative data sets.

The following section of the thesis presents the research findings. This is divided into three chapters. The first discusses the quantitative and qualitative findings in response to the first research question: *What does* food poverty *look like in deprived neighbourhoods?*

The second findings chapter focuses on food bank use, and again presents quantitative and qualitative results in order to answer the second research question of the thesis: *What does* food bank *use look like in deprived neighbourhoods?*

Finally, the third findings chapter draws together the findings from the fieldwork in Finland, together with analysis of the interviews with policy actors in Scotland to consider the question: *How is the rise of food aid challenging and changing the role of the welfare states of Scotland and Finland?*

Chapter Seven: Understanding food poverty in Glasgow's deprived communities

7.1 Introduction

This is the first of three findings chapters presented in this thesis. The chapter examines food poverty from multiple perspectives and through analysis of several different data sources, including both quantitative and qualitative results. In doing so it addresses the first research question as outlined at the end of Chapter Five, namely: *What does food poverty look like in deprived neighbourhoods*?

As discussed in Chapter Two, evidence on the scale and nature of food poverty experiences in the UK is highly limited and several researchers have concluded the need for routine, systematic monitoring of the problem. As Loopstra et al state: "such monitoring is vital to understand how changes to income support, employment, and other macroeconomic trends impact on vulnerability to hunger" (2016: 8). In the absence of such measurement among the general population, this chapter presents analysis of the scale of food affordability difficulties among residents of deprived neighbourhoods in Glasgow. At section 7.2 in this chapter, both cross-sectional and longitudinal analysis of the GoWell survey data allow examination of aggregate level changes in the scale of the problem, as well as consideration of factors associated with increased difficulties affording food over time for individuals. These quantitative findings provide unique evidence regarding demographic, socio-economic, and health drivers of entering food affordability difficulties using a self-reported measure.

At Section 7.3, qualitative findings enhance the quantitative results by offering insights into the lived experience of food poverty; exploring the range of contexts in which it is encountered; how and why it occurs; coping strategies adopted; and the impacts it has on the individuals affected. An important contribution of this data is the insight provided into the social dimensions of food poverty - its impacts on emotional wellbeing, sense of self, and on family life.

Insights from households experiencing food poverty are contrasted with the perspectives of individuals working in front line roles within local services. Perceptions of, and responses to food poverty among service providers offer vital understanding of the role of the welfare state regarding food as a matter of poverty. Such insights raise important questions about

the relative and changing roles of statutory and voluntary sector services in engaging with the problem, and thus how the recent rapid growth of food banks as community-led responses to food poverty might be shaping the role of the welfare state as provider of a social safety net. These broader questions are addressed in Chapter Nine, where the thesis' overall aim of understanding the implications of food aid for the changing role of the welfare state is considered in more depth.

7.2 The extent of food poverty in Glasgow's deprived areas and how this has changed over time

This section of the chapter examines the extent to which residents of deprived communities in Glasgow report difficulty affording food and how this has changed over time, both at an aggregate level and for particular sub-groups. Cross-sectional analysis of the four waves of the GoWell household survey data (2006, 2008, 2011 and 2015) provides these insights. Exploitation of the longitudinal aspect of the data set allows factors associated with entering food affordability difficulties at an individual level between 2011 and 2015 to be examined.

There are key advantages to examining both cross-sectional and longitudinal data in the same study. In particular, this triangulation of data helps to reduce some of the limitations of each source including the effects of sampling and retention bias. The latter, while not an issue when comparing cross-sectional data, is a particular risk in longitudinal studies whereby the retained sample differs systematically from the baseline. It has been noted that the address-matching approach to creating the longitudinal data set in the GoWell study means respondents are less likely to know they have been 'retained', thus reducing the chances of retention bias (Curl et al., 2017). The longitudinal data also allows control for participant characteristics which helps address sample bias which can occur in cross-sectional studies.

An important advantage of longitudinal analysis is that it provides greater capacity to make predictions and monitor changes due to individual attributes than comparing changes within cross-sectional data sets (Yee and Niemeier, 1996). The use of repeat measures also helps to remove recall bias in participants (Caruana et al., 2015). The approach taken to both cross-sectional and longitudinal quantitative data analysis in this study, and their findings, are presented below.

7.2.1 Measure of food poverty

Chapter Two discussed food poverty measurement, highlighting the value of using self-reported data in order to understand food poverty from the perspective of those experiencing it. The chapter also emphasised an understanding of food poverty as driven by financial constraints. While not designed to measure food poverty, the GoWell study considered the level of financial difficulty experienced by survey respondents in relation to food, alongside that of a number of different items. At all four survey waves they were asked: *'How often do you find it difficult to meet the costs of the following things? Rent or mortgage; repairs, maintenance or factor charges for your home; gas, electricity or other fuel bills; food; council tax'*. Response categories were: *often, quite often, sometimes, never, don't know, and prefer not to say.* While limited in its ability to assess the full spectrum of the food insecurity experience as outlined in Chapter Two, given that this thesis is interested in food poverty as an experiential phenomenon driven by financial constraints, this measure was considered valuable as a proxy indicator of food poverty.

For the cross-sectional analysis, a binary variable was created which denotes whether or not respondents report ever experiencing difficulties affording food. For the longitudinal analysis which examined changes in food affordability difficulties between 2011 and 2015, a variable for movement into and out of food affordability difficulties was created. This allowed rates of entering; leaving; staying in; and staying out of food affordability difficulties between the two survey waves to be measured.

7.2.2 Independent variables

This section explains which independent variables were selected for analysis and why. Independent variables of interest examined in this study included key socio-demographic variables including: gender; age; household type; housing tenure; citizenship status; and employment status. For longitudinal analysis a change in employment status variable was created. The categories used for these variables are shown in Table 7.4 below. These variables were included because of a general need to better understand who is affected by food poverty, and to identify which social groups may be particularly vulnerable to it.

Given the relationship between ill health and food insecurity identified in the literature and discussed in Chapter Two, independent variables related to mental ill-health, and self-reported general health, were included in the analysis. In relation to their mental health,

respondents were asked whether they had a problem of stress, anxiety or depression lasting twelve months or more. Elsewhere in the survey they were asked if they had spoken to a GP in the past twelve months about being anxious or depressed or about a mental, nervous or emotional problem (including stress). A single variable for 'mental health problems' was constructed from these two questions where the presence of mental health problems was defined as an affirmative answer to either of these questions.

The longitudinal data allowed for analysis of the relationship between improving and worsening health, and movement into and out of food affordability difficulties. For the longitudinal analysis a change variable was constructed from the 'mental health problems' variable to identify whether mental health improved, got worse, or stayed the same between 2011 and 2015. General health was measured according to whether respondents indicated that in general their health was: excellent, very good, good, fair or poor. Again, for the longitudinal analysis a change variable was created in order to report whether general health got better, worse, or stayed the same between the two survey waves.

As discussed in Chapters Two and Three, the social security system has an important role to play in shaping food poverty experiences. Recent changes to the UK system have been identified as key in increasing levels of food poverty. In order to determine the extent to which a range of recent changes to the UK social security system have impacted respondents, they were asked: "*Over the last four years, has your income been affected by any of these welfare reforms? Under-Occupation Deduction ("Bedroom Tax"); Other Housing Benefit changes; Personal Independence Payment/Disability Living Allowance changes; Working Tax Credit changes; Employment Support Allowance (ESA) changes; Benefit sanctions.*" A count variable was created denoting whether respondents have been affected by none, one, or two or more of the welfare benefit changes.

7.2.3 Analysis

First, cross-sectional data from the four survey waves were analysed descriptively to show the trends in food affordability difficulties over time. These trends are presented for the whole sample, and also for sub-groups according to household type and employment status. The data was analysed to consider whether there had been a significant change in food affordability difficulties across each survey wave, for both the whole sample and particular sub-groups of interest. These results are presented at Table 7.1 and Figures 7.1 and 7.2.

1036 individuals took part in both Wave 3(2011) and Wave 4(2015) of the survey. These cases form the longitudinal sample for analysis. Descriptive analysis shows the rate of change in difficulty affording food between the two waves, and also movement into and out of difficulties, which are presented at Tables 7.2 and 7.3. The relationship between movement into and out of difficulties and a range of socio-demographic variables was investigated using chi-square statistics. Pearson's chi-square test is used when investigating whether there is a relationship between two categorical variables (Field, 2009). This approach also allowed variables for inclusion in the analysis of the longitudinal data using logistic regression modelling to be identified. The results of the chi-square analyses are presented at Table 7.4.

Given the categorical nature of both the outcome variable (entering food affordability difficulty), and the independent variables of interest, binary logistic regression was applied in this study. Following analysis of the chi-squared statistics, the relationship between entering food affordability difficulties and socio-demographic; health; and financial variables was then analysed using a binary logistic regression model for the longitudinal cohort.

The model was developed in four stages. First, using entering food affordability difficulty as the outcome variable, key demographic variables were included as predictor variables: age; gender; and household structure (all at Wave 4). The age group variable was collapsed into a binary variable comparing those under and those over 55 which represents two similar sized groupings within the longitudinal sample. Second, to analyse the potential relationship between changes in health and entering difficulties, variables representing change in mental health and change in general health were added to the model. Categories for these variables were: got better; got worse; and stayed the same. Third, citizenship status and employment status (both at Wave 4) were added to the model. A version of the model using the change in employment status variable was created, however this was rejected due to the small numbers in several of the groupings and replaced with the employment status variable at Wave 4. While citizenship status was not found to be significantly related to food affordability difficulties in the chi-square analysis, this variable was retained for the regression modelling due to its theoretical importance. Indeed asylum seekers and refugees are recognised to be particularly vulnerable to food poverty given the limited protection they receive from the social security system in the UK, and the experiences of destitution among their number (Fitzpatrick et al., 2016). Finally, a binary

variable indicating whether or not a respondent's income had been impacted by welfare reforms was added to the model.

7.2.4 Changes in food affordability difficulties: Cross-sectional results

The change in rate of food affordability difficulties at the aggregate level across the four survey waves is presented in Table 7.1. The results suggest a slight decrease in level of difficulty over time, although survey wave is not a significant predictor of the odds of reporting difficult (OR=0.9, 0.743, 1.102), suggesting that the change is not significant.

Table 7.1: Percentage reporting affordability difficulties at each survey wave

Survey wave	Percentage reporting difficulties
2006 (n=5956)	18.5
2008 (n=4863)	15.4
2011 (n=4178)	18.9
2015 (n=3785)	17.0

While cross-sectional analysis does not reveal a significant change in food affordability difficult at the population level, examining the data according to particular sub-groups suggests some interesting trends. The increases over time for people out of work due to long term illness/disability (Fig. 7.1), and also for single adults (Fig. 7.2), appear particularly striking. Regression analyses on the relationship between food affordability difficulties [difficulty v. no difficulty] and survey wave for each of these sub-groups showed that both single adult households and those out of work due to long-term illness or disability did experience a significant increase in food affordability difficulties over time. For single adult households, in comparison with 2006, respondents in 2011 (OR= 1.326, p<0.00) and 2015 (OR= 1.465, p<0.00) were more likely to report difficulties affording food (2008 results were not significant). Focusing only on those reporting being out of work due to long-term illness or disability, the trend towards increased difficulty affording

food is even greater (2011: OR= 1.385, p<0.02; 2015: OR=1.549, p<0.00) (again, the results for 2008 were insignificant).

People who are out of work due to illness or disability have been identified elsewhere as having been particularly adversely affected by recent changes to the UK social security system (McNeill et al., 2017; Beatty and Fothergill, 2013). These findings which indicate a trend towards increased food poverty among these groups also raise particular concern given that the full impacts of the move to Universal Credit are yet to be felt, a change which is projected to increase poverty levels in the UK (Hood and Waters, 2017).

Figure 7.1 Percentage of respondents reporting difficulty affording food at each survey wave by employment status
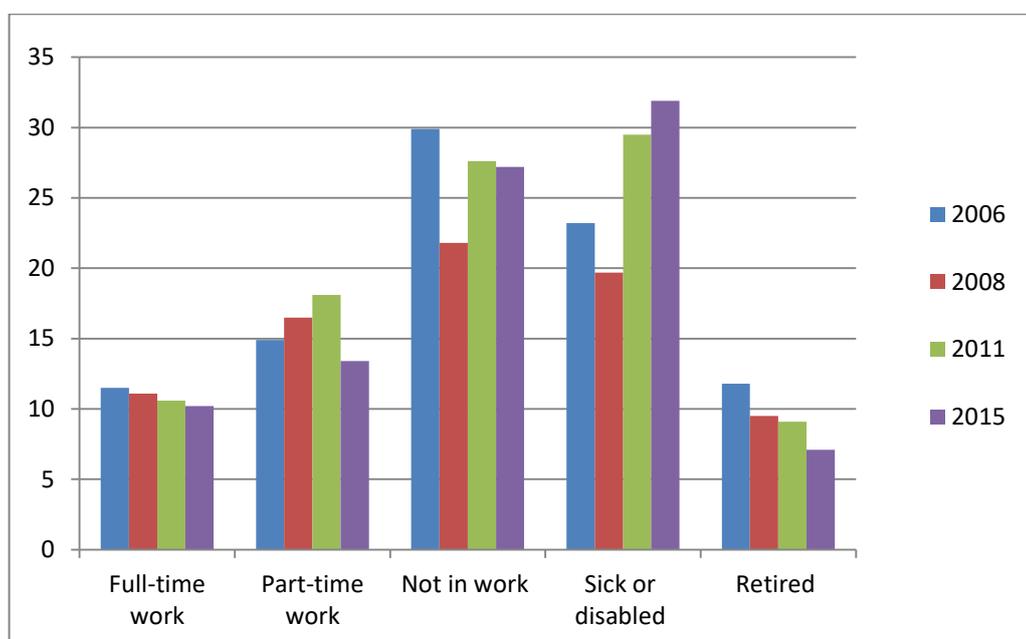
Figure 7.2: Percentage of respondents reporting difficulty affording food at each survey wave household type
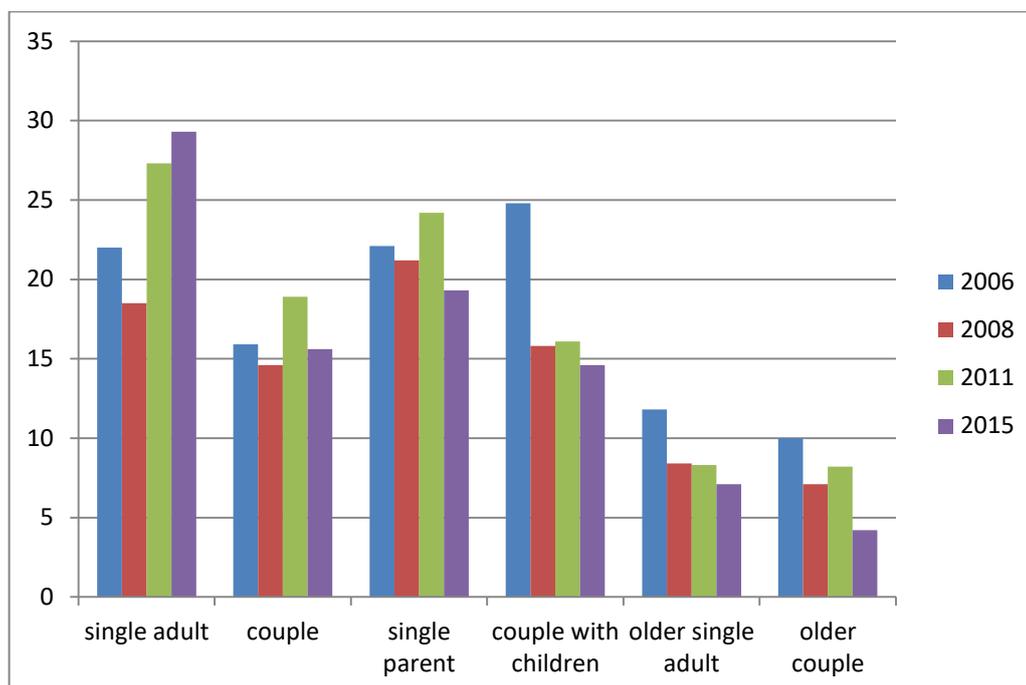
7.2.5 Changes in food affordability difficulties: Longitudinal results

The cross-sectional analysis presented above suggests there has not been a significant change in food affordability over time, but that certain sub-groups of the population have experienced a significant increase in difficulty, while for others these difficulties appear to have lessened. However, it is not possible to draw conclusions from this analysis as to individual level changes in food affordability difficulties. In order to understand the factors associated with changes in food affordability difficulties, it is necessary to examine the longitudinal sample within the dataset. Table 7.2 indicates that 11.4 percent of respondents in the longitudinal sample reported an increase in their levels of difficulty affording food between 2011 and 2015. This change is identified through a repeated measure whereby respondents were asked at each survey wave about the frequency of experience of food affordability difficulties.

Table 7.3 looks at movement into and out of difficulty affording food. It shows that 130 people stopped having difficulty affording food, while 103 moved into difficulty affording food between 2011 and 2015. Therefore, while at an aggregate level, food poverty appears to have "got better", this masks the experiences of things getting worse for particular sub-

groups which are investigated here and in the qualitative findings discussed later in the chapter.

Table 7.2 Rate of change in difficulty affording food between 2011 and 2015

	Frequency	Percent
no change	769	74.2
less difficulty	149	14.4
more difficulty	118	11.4
Total	1036	100

Table 7.3 Rate of entering & leaving food affordability difficulty between 2011 and 2015

	Frequency	Percent
stayed out of difficulty	740	71.6
entered difficulty	103	10
left difficulty	130	12.6
stayed in difficulty	61	5.9
Total	1034	100

Table 7.4 below presents movement into and out of food affordability difficulties according to different socio-demographic variables. The findings indicate particular movement between food affordability difficulty statuses for single adult and single parent households, while older adult households appear most likely to have remained without difficulties over time. According to change in employment status, over a fifth of those who moved out of work between 2011 and 2015 entered food affordability difficulties. Elsewhere unemployment has been identified as a key trigger of movement into food insecurity (Loopstra and Tarasuk, 2013).

Table 7.4: Movement into and out of food affordability difficulties according to different demographic variables (%)

	stayed out of difficulty	entered difficulty	left difficulty	stayed in difficulty	χ^2, (p)	n
Gender					3.9 (<0.5)	
Male	69.2	11.4	12	7.4		367
Female	72.9	9.1	12.9	5.1		667
Age					73.2(<0.01)	
16-24	66.7	33.3	0	0		6
25-39	65.2	14	14	6.7		164
40-54	61.9	13.2	14.7	10.3		273
55-64	64.2	9.9	17	9		212
65+	85.5	5.5	8.2	0.8		379
Household type					111.9(<0.01)	
Single adult	51.5	17.2	17.6	13.7		233
Multiple adult	70.3	7.7	13.8	8.2		195
Single parent family	59.1	15.5	18.2	7.3		110
Multiple adult family	78.1	9.6	9.6	2.6		114
Older single adult	85.4	6.3	7.5	0.8		240
Older multiple adult	87.3	3.5	9.2	0		142
Tenure					39.8(<0.01)	
Owner-occupier	89.3	2.8	7.9	0		178
Social renter	68.2	11.4	13.1	7.2		830
Private renter	60	12	24	4		25
Citizenship					32.3(<1.0)	
British Citizen	71.9	9.8	12.6	5.8		972
Refugee/Asylum seeker	68.6	14.3	8.6	8.6		35
Other Migrant	65.2	13	13	8.7		23

Change in employment status					111.3(<0.01)
stayed in work	81.9	9.7	5.6	2.8	144
stayed out of work	55	13.7	17.9	13.4	329
stayed in retirement	84.9	5.9	8.4	0.8	371
moved into retirement	68.2	8.2	17.6	5.9	85
moved out of work	64.5	22.6	9.7	3.2	31
moved into work	65.6	9.8	19.7	4.9	61

Table 7.5 shows the proportion of respondents who entered food affordability difficulties according to the number of welfare reforms they reported having been affected by. Whilst only 7.2 per cent of those *not* affected by welfare reforms entered food affordability difficulties, this was the case for 11.6 per cent of those affected by one welfare reform, rising considerably to 41.3 per cent of those affected to two or more welfare reforms. Thus, where multiple welfare reforms affected a household, the impact on food affordability difficulties was greater.

Table 7.5: Rate entering food affordability difficulties by experience of welfare reforms (%)

	Number of welfare reforms		
	0	1	2 or more
Entered difficulties	7.2	11.6	41.3
N	(834)	(86)	(63)

* χ^2 (p) = 116.9 (<0.01)

7.2.6 Regression results: Factors associated with entering food affordability difficulty

Table 7.6 presents the results of logistic regression analysis which sought to identify factors associated with entering food affordability difficulty between the 2011 and 2015 survey waves. The results show that those under 55 had over twice the odds of entering food affordability difficulties than older people, controlling for gender and household type, although this association became insignificant once health variables were added to the model. In terms of household type, adults living alone had almost three times the odds of entering food affordability difficulties compared with other households, and the odds of single parents having increased difficulty was found to have near significance (OR 2.479, 0.989 – 6.216). The relationship between household type and entering food affordability difficulties was weakened by the inclusion of status variables in the model.

The strong relationship between the changes in health variables and entering food affordability difficulties is a particularly striking finding. These results are in line with evidence from North American research which identifies a relationship between household food insecurity and poor health (Heflin et al., 2005; Carter et al., 2011; Tarasuk et al., 2013). In this study, those whose self-reported general health was worse in 2015 than in 2011, had almost twice the odds of entering difficulties than those who experienced no change in their general health. This relationship was attenuated, but remained close to significance, on the inclusion of the welfare reforms variable. It is also important to recognise, as noted in Chapter Two and highlighted in other studies, that poor health may also be an outcome, as well as a driver of food insecurity. Indeed the qualitative findings presented later in this chapter suggest that, for some, food affordability difficulties can make it very difficult to eat a diet necessary to maintain good health, particularly for those with existing health conditions. Interview data also provides examples of where the deterioration of health led to financial difficulties because of having to give up paid employment.

The relationship between deteriorating mental health and entering food affordability difficulties identified in the logistic regression model was significant, even after controlling for employment status and the impact of welfare reforms. Respondents who developed mental health problems between 2011 and 2015 had two and a half times the likelihood (OR 2.551, 1.430 – 4.548) of entering food affordability difficulties than those whose mental health remained stable, all other factors considered.

While it is not possible from this analysis to determine the direction of the relationship between entering food affordability difficulties and worsening mental health, the anxiety, distress and reduced social participation related to struggling to afford food identified in the qualitative findings suggest entering difficulties is likely to have a detrimental effect on mental health. Further, the implication that those with poor health and poor mental health in particular, are vulnerable to food insecurity is an important finding of this analysis. Certainly ill-health was a central feature of the experiences of many of the food insecure interviewees examined in the qualitative findings discussed later in this chapter. The qualitative findings therefore suggest that the relationship between entering food affordability difficulties and worsening health identified in the quantitative analysis is bi-directional.

Controlling for all other variables in the model, respondents whose income had been affected by any welfare reforms were just over three times more likely to enter food affordability difficulties (OR 3.014, 1.730-5.251). This finding is concerning in its suggestion that the retrenchment of the benefits system is pushing people into severe financial difficulties. Indeed a recent analysis of the role of social security in mitigating the impacts of rising unemployment on food insecurity levels across European countries, the authors conclude: "There is a risk that food insecurity will become a permanent feature of countries in places where social protection continues to undergo further spending reductions" (Loopstra et al., 2016: 49).

This quantitative analysis provides important new evidence of the scale and drivers of food insecurity. Taking into account the limitations of the data in terms of generalisability to the wider population given its focus on deprived neighbourhoods, and also of the food insecurity measure used as discussed above, these findings add to an emerging evidence base of food insecurity in the UK. The longitudinal findings are particularly valuable given their ability to identify change over time for particular individuals. Given the interest of this study in the changing role of the welfare state, the increased probability of entering food insecurity for those whose income had been affected by welfare reforms, is especially striking. The vulnerability of those out of work due to long-term illness or disability to entering food insecurity between 2011 and 2015, a group historically better protected by the social security system, is perhaps also indicative of the extent to which the roll-back of the safety net function of the welfare state for this group is having detrimental impacts on food security.

Having considered the nature of food poverty in deprived areas of Glasgow from a quantitative perspective, section 7.3 explores the qualitative findings from interviews with individuals living and working in these same areas. As discussed in Chapter Six, bringing together quantitative and qualitative data allows different aspects of the same phenomenon to be examined. The qualitative findings help to consider the lived experience of some of the key results from the quantitative analysis, but also reveal new dimensions and perspectives which may not have emerged from the statistical findings, and in this way answers to research questions 1b) and 1c) are provided.

Table 7.6 Odds Ratio (95% Confidence Intervals) of entering food affordability difficulty between 2011 and 2015 using logistic regression (bold values = p<0.05)

	Model 1	Model 2	Model 3	Model 4
Demographic variables				
Gender (at 2015): female	1.499 (0.894 – 2.513)	1.602 (0.903 – 2.929)	1.583 (0.930-2.695)	1.583 (0.922 – 2.719)
Age (at 2015): >55	**2.032 (1.005 – 4.109)**	1.999 (0.970 –4.120)	1.836 (0.871-3.874)	1.917 (0.891 - 4.124)
Household type (at W4): (older person(s))				
Single adult	**2.972 (1.569 – 5.630)**	**2.983 (1.563– 5.690)**	1.732 (0.670 – 4.481)	1.439 (0.560 – 3.698)
couple/multiple adult	1.653 (0.761 – 3.595)	1.793 (0.816 - 3.940)	1.047 (0.365 – 3.005)	0.953 (0.333 – 2.730)
single parent with children	2.479 (0.989 – 6.216)	2.271 (0.884 – 5.829)	1.212 (0.359 – 4.089)	1.167 (0.345 – 3.950)
couple/multiple adult with children	1.626 (0.601 – 4.396)	1.617 (0.584 – 4.475)	0.879 (0.245 - 3.153)	0.735 (0.200 – 2.699)
Health variables				
Change in Mental Health: (no change)				
Mental health improved		0.828 (0.373-1.842)	0.843 (0.374 – 1.897)	0.825 (0.361 – 1.886)
Mental health got worse		**2.578(1.463-4.544)**	**2.565 (1.451 - 4.532)**	**2.551 (1.430 – 4.548)**
Change in self-reported general health: (no change)				
General health got better		1.626(0.903-2.929)	1.650 (0.911 – 2.990)	1.579 (0.865 - 2.880)

General health got worse		**1.858(1.023-3.375)**	**1.829 (1.002 - 3.338)**	1.660 (0.900 – 3.061)
Status variables				
Employment status (at 2015): (retired)				
Working			1.912 (0.677 – 5.405)	1.818 (0.644 – 5.136)
Not working			2.272 (0.804 – 6.421)	2.087 (0.741 – 5.881)
Long-term sick/disabled			1.970 (0.775 – 5.003)	1.741 (0.691 – 4.387)
Citizenship status (at 2015): (British Citizen)				
Asylum seeker/refugee			1.158 (0.349 – 3.841)	1.447 (0.418 – 5.009)
Other migrant			0.828 (0.165 – 4.157)	0.866 (0.164 – 4.576)
Financial factors				
Impacted by welfare reforms (at 2015): (not impacted)				**3.014 (1.730-5.251)**
Constant	0.052	0.03	0.029	0.027
R^2	0.063	0.104	0.112	0.148
n=1065				

7.3 "we got used to that, we just always ate breakfast for lunch and lunch for dinner" qualitative insights into the lived experience of food poverty

This section presents the qualitative findings of the particular contexts and sets of circumstances which may have led an individual to struggle to afford food, enhancing and enriching the quantitative results discussed above. The findings also reveal the different ways in which people respond to this experience and the various coping strategies adopted. The implications of food affordability difficulties for health, family life, and sense of identity are each examined.

Insights from those experiencing food poverty are contrasted with findings from interviews with service providers working in deprived neighbourhoods in Glasgow. Presenting the finding from residents and service providers together helps to demonstrate where their views and experiences may reinforce each other, and where there may be contradictions between perspectives on food poverty of those providing front line welfare services, and the lived experience of the issues. These findings also suggest differences in understandings of food poverty between those occupying different sorts of job roles which have implications for how they respond to the problem. Such comparison is helpful for examining the role which the welfare state might be playing in relation to food poverty.

7.3.1 Who experiences food poverty and why?

While the quantitative data presented in section 7.2 suggest the household types more likely to experience food poverty, the qualitative data foreground the wide range of circumstances in which food poverty may occur and suggests that the problem can be driven by many different and overlapping factors. Single person households were identified in the above quantitative analysis as more likely to experience difficulties, and increasingly so, and certainly four of the eleven households interviewed were men living alone. Arthur, a single man claiming Employment and Support Allowance, commented on the cost of cooking for one:

> "*They don't sell food for single people really, and if you do get single people's stuff it's they wee tins and they're just as dear as the big tins*" (Arthur, GoWell participant)

The importance of having others to cook for as motivation to eat well and prioritise spending on food was also recognised as a reason why single households might not eat adequately. Several service providers suggested that single people would be perhaps more likely than other household types to struggle to afford food and suggested reasons why this might be the case. For example Stuart, a housing support worker, commented that this could be because of the limited financial support available for single people on social security benefits:

> "*if you've got kids you've got your child tax credits, you're getting your child benefit, you know there is a lot more scope to budget. A single person on JSA? Having to do everything that they do for £115 a fortnight?*"(Stuart, housing support worker)

Among GoWell participants however, families with children were a group that seemed to particularly struggle and many described feeling under constant financial pressure to meet household costs and concerned about being able to feed their children adequately. Two of the interviewees were lone mothers, and a third, Jennifer, described a time when she had been living as a lone parent as when she struggled most acutely to afford enough food. Having children was mentioned as a reason why ability to afford food had got worse - children brought new and increasing financial pressures as they grew up. Sonia, a lone parent and refugee, commented:

> "*It's more money. Because when my children young it's no too much eating, no too much change the dress, but now it's more, more. It's cooking more. No the same before*" (Sonia, GoWell participant)

Prioritising children when it came to food budgeting was mentioned by all of the families interviewed and none suggested that their children ever had to go without. However Stuart, a housing support worker, highlighted that he was aware of cases where children arrived at school hungry, and this was confirmed by Laura, a social worker, who indicated that child hunger was not uncommon in her case load:

> "*you sometimes get referrals as well saying that the kid's presented as hungry and there's no food in the family home and that's something that comes to us quite a lot*".
> (Laura, social worker)

The impact of food poverty on family life is discussed in more detail at 7.2.4 below.

While the quantitative analysis did not identify a significant relationship between citizenship status and food insecurity (this may well be because of the low numbers of

refugees, asylum, seekers and those with other migrant status in the sample), several of the interviewees in the qualitative sample had experience of living as asylum seekers and this was recognised to involve chronic experiences of food poverty. For example Tahir, a refugee living with his wife and three children, described that while seeking asylum he and his wife would regularly skip meals in order to save money and ensure their children had enough to eat: "*we got used to that, we just always ate breakfast for lunch and lunch for dinner*". Martha, a lone parent with four children, explained how she had to rely on food banks while she was living as an asylum seeker. Service providers also identified asylum seekers as particularly vulnerable to food poverty. Gemma, a manager of a third sector refugee and asylum seeker service described the frequency with which asylum seekers would present with no money for food, and identified administrative errors by the Home Office as causing particular problems. She commented: "*destitution is built into the asylum system*".

Resident interviewees described different reasons why managing to afford sufficient food was a struggle. Some had experienced a particular change in circumstances, such as losing a job, which had reduced the amount of money they had to spend on food. For example Jim, a man in his 50s who had recently stopped working due to ill-health, described how this had impacted on his ability to cope financially: "*just after I went on the sick, a year. Your budget just changes completely. Everything changes*".

Makeen worked as a security guard but was not able to find a job with full-time hours and was struggling to meet regular household costs, including food. He spoke about how different his situation was compared with five years ago:

> "*[it] was better, maybe 70 or 80 per cent but now I am married, there's not enough job and I just support my wife and my son, my wife not got anything, no job seekers, no anything at all, I just support everything*" (Makeen, GoWell participant)

Reflecting on a previous experience of accessing the Jobcentre during a period of unemployment, Makeen also indicated that government cuts now made it more difficult to cope:

> "*before there's a lot of things you can get kinda help but now there's a lot of things the government make a kinda cuts, they make it very difficult to get the kind of support you need, this is very difficult honestly*" (Makeen, GoWell participant)

When discussing why it was more difficult to afford food now than in the past, other residents spoke about a general sense that the price of food and other costs had gone up over recent years, thus making it more difficult to afford food. Moira described the increased cost of a weekly food shop for her family of six:

"*I mean we could go a weekly shop before and be about 70, 80 pound. And now, a weekly shop is about 120, 130 pound, and you look at it and you think – really, what have I got*" (Moira, GoWell participant)

Service providers interviewed for this study generally recognised the financial drivers of food poverty, although the extent to which they foregrounded these issues appeared to depend on the type of job role they were in. Alan, a legal advisor who supports people to challenge DWP decisions, commented on the inadequacy of social security payments: "*if your benefit income is barely enough to cover your fuel costs, then there's a problem with the benefit levels*". Other problems with the benefits system identified as driving people into food poverty included: benefit delays and sanctions; the 'bedroom tax'; and people not claiming benefits they are entitled to. While some service providers did suggest a lack of skills and knowledge as reasons why people might not be affording sufficient food, Stuart, a housing support worker, commented that from his experience the primary drivers of the problem tended to be outwith an individual's control:

"*I reckon about 75 per cent of people I have come into contact with who are struggling to make ends meet, no that their budgeting and stuff like that cannae be supported or cannae be worked on, but generally it is like you know sanctions, bedroom tax*" (Stuart, housing support worker)

Low wages and high prices were also recognised by service providers as reasons why people in work might struggle to afford food. Sarah, a GP, commented: "*to eat well is expensive… so people who don't have enough money can't afford a good diet*". The affordability of a healthy diet is discussed further at section 7.2.3 below.

For the residents interviewed, food poverty involved chronic struggles to afford enough food, anxiety about being able to do so, as well as experiences of going hungry or running out of food entirely. Two interviewees described specific occasions when they had run out of food because they had no money to buy more. For Jennifer, living with her partner and disabled daughter, a recent experience of moving house and having to pay "double rent" in the first month had caused them to run out of money to buy food. Moira, living with her partner and four children, described how an unexpected change in her partner's pay date

had meant she had to borrow money from her mother in order to buy food to cover the gap. She described the constant struggle of getting to the end of each pay cheque: "*you go to the bank and you're like that – argh – no money. We manage; we get by sort of thing, but only just… and no more.*" Such experiences left interviewees with a constant feeling of worry that it might happen again.

These lived experiences of food affordability difficulties and perceptions of the reasons for an increase in the problem are confirmed by, and bring to life, recent comparative analyses of European level statistical data. Loopstra et al. (2016) identify that rising food insecurity within European countries has been closely linked to rising unemployment, and falling wages. Illustrated by Makeen's account of his experiences as described above, the authors express concern as to the weakening of the protective role of social security in the context of public spending cuts. A further study found the growing gap between food price inflation and wage stagnation to be a determinant of food deprivation (Reeves et al., 2017). The study concludes that the poorest households, who tend to spend the greatest proportion of their income on food, are worst affected. Indeed the findings presented in this section suggest that households in deprived areas were feeling the impacts of reduced social protection, low pay, and rising food costs on their ability to afford food. Furthermore, the households interviewed for this research reveal a wide range of experiences and degrees of severity of food affordability difficulties for people in various situations. Sudden changes in circumstances such as job loss or moving house where noted as having particular impact on ability to afford food. The different ways in which people respond to these experiences in order to get by and the coping strategies adopted by those interviewed are now examined.

7.3.2 Strategies for coping with food poverty

Several interviewees described having a restricted food budget and feeling that they were able to afford to spend less on food than they had done in the past. For many this experience meant having reduced and restricted choice in the sorts of foods they were able to buy and the sorts of shops they were able to use. Makeen described being much more limited in the places he was able to go to buy food:

"*A couple of years ago I didn't think about…I can just buy from Asda or Morrison whatsoever but now I can just buy from Lidl, honestly, I have only one shop just Lidl honestly!*" (Makeen, GoWell participant)

Some interviewees described a loss of enjoyment in food and eating as a result of this lack of choice and variety, as Jim articulated:

> "*Now I just buy anything cos you're just filling your stomach to be honest. It's no' as if you can be fussy when you're on 70 pound a week*" (Jim, GoWell participant)

As well as changing where people shopped, trading down to cheaper own-brand products was also described as a strategy for coping on a limited food budget. While suggesting a limitation in food choices, this decision to switch to cheaper products for some brought new discoveries and wasn't necessarily an entirely negative experience. For example Moira described introducing her children to different products:

> "*you always buy your Heinz tomato sauce and your Hellman's mayonnaise, but I've switched brands to cheaper ones, it's Aldi one's actually, and they seem to prefer they ones…now it's like, "well we'll try that see what it's like". Sometimes they don't like them so you won't buy them again, but nine times out of ten they are changing*" (Moira, GoWell participant)

Managing food budgets appeared to generally be the role of women within the households interviewed. Women interviewed often described complex food budget management strategies. They had detailed knowledge of the prices of specific items in different supermarkets; the different special offers available in different stores; and when particular foods, such as expensive items like fresh meat, might become reduced. It was apparent that such practices of the different supermarkets played an important role in shaping the diets and food choices of those interviewed. The work of managing a limited food budget in this context appeared tremendously time-consuming, requiring significant planning and money management skills. Martha, a lone parent and refugee with four children, described how she would shop around to get the best price for different items:

> "*Or I go to Morrison's, just to look at the prices, if I see that, "oh this price is good". Just like yesterday I was going through Asda, there are this drink I bought in Morrison's 2 for £2. In Asda, they sell 2 for £2.50…so I didn't buy it, I tell my daughter, "no, don't put it in the basket, I won't buy that, instead I'll go to Morrison's, to buy their £2 for 2, so at least I save 50p" *" (Martha, GoWell participant)

Interviewees also described strategies for making food last and ensuring that they did not waste food. Jim spoke about how his shopping habits had changed since he had recently stopped working:

"*Things that will maybe last a couple of days – a packet of mince you can half it in two, and use it one night then leave the rest in the freezer and use it another night. It's all things like that. There's no, there's nae luxuries*" (Jim, GoWell participant)

While living as an asylum seeker it had been very important for Tahir and his family to make food last as long as possible:

"*What we do is sometimes cook more and keep for the next day. Rather than cooking and eating for one meal, make sure you keep and share for the next meal. So the quantity we eat would reduce and could do two meals*" (Tahir, GoWell participant)

Martha also described buying meat in bulk and making small amounts stretch over several meals:

"*sometimes I will just go to Iceland and buy 3 for £10, 4 for £10, because I know this one it will last me very long time…one packet I can finish it for one week. When I am cooking food I just take one, defrost and chop pieces, tiny tiny, just to make to food have some taste. And they* [her children] *understand everything, so they don't argue with me. I say, "this is what we have to eat", they say "mummy this is small". I say, "yes we have to manage it"* (Martha, GoWell participant)

Martha explained how she would save for several months in order to go to a large, wholesale supermarket and bulk buy certain food and other household items. By contrast, having only recently experienced a significant reduction in their income, Karen (Jim's wife) described how they could no longer afford to bulk buy or do regular food shops as they had done previously: "*we cannae dae that now, it's just a struggle tae buy a loaf and make it last*".

Some of the service providers interviewed recognised how hard it could be to manage a very limited food budget and were well aware of the effort people went to in order to get by. Denise, a support worker, identified similar strategies for coping on a limited food budget as were described by the households interviewed:

"*you're going to stock up your freezer from Farmfoods and Iceland, with non-perishable items so you know there's food on that table at the end of the fortnight when you're down to your last button. That's what you're going to do, that's the reality of living on nothing*" (Denise, support worker)

Pauline and Eleanor, two dieticians interviewed, explained the sorts of strategies they would recommend to patients who were struggling to afford an adequate diet*:*

> *"it would just be supermarket own make, it would be the frozen, the tinned. So it would be advice tailored to that person to try and save them money so they can eat well on a budget"* (Eleanor, dietician)

However service providers often suggested that people struggling to afford food might lack budgeting and money management skills. As Pauline, a dietician, suggested, "*You do get patients that say they can't afford, but they are spending their money on lots of other things",* and later indicating the reasons why patients might not eat well: *"so it's cookery skills, it's knowledge and confidence".* Stuart, a housing support worker, also commented on cases where families would "*eat the wrong foods*":

> "*instead of budgeting to buy two weeks' worth of shopping they send their kids round to Greggs or phone in a Chinese or gie their weans money to get fish and chips*" (Stuart, housing support worker)

While households often described food poverty as being about a lack of choice, some service providers suggested it was more to do with making bad or wrong choices. Interviews with households revealed that food poverty was often experienced in the context of well-developed strategies for cooking and budgeting on a restricted income. It is striking that those service providers working within health services appeared less aware of these experiences than others. Healthy eating, nutritional knowledge, and the relationship between food poverty and health are now explored.

7.3.3 Food poverty and health

Eating well is clearly essential for good health and experiencing food poverty means it is very difficult to eat a healthy diet. The quantitative findings of this study presented at section 7.1 of this chapter identify a relationship between worsening health and entering food poverty. The qualitative findings provide further evidence of the relationship between these two experiences.

Households interviewed often described how restricted food budgets made it difficult to make the sorts of healthy food choices they wanted to and knew they were supposed to make. At its most acute, food poverty also meant an inability to make food choices which

were necessary in order to keep healthy. Jim recognised how his limited income made it very difficult to afford to eat healthily or to meet the dietary requirements dictated by the particular health conditions which both he and his wife Karen suffered from:

> "*she's* [Karen] *no supposed to eat a lot of dairy food but sometimes that's what you buy because that's the easiest to get, you know what I mean. What do you dae noo? The health diet is out the window, to put it that way. I used to go and buy the low fat cheese…all the different butters and what have you, but now it's whatever you get*" (Jim, GoWell participant)

For Jim, having had to give up paid work, it had been his deteriorating health which had led to his food affordability difficulties, and struggling to afford food in turn appeared to have exacerbated his and Karen's existing health conditions. Indeed while the quantitative findings indicate that worsening health might be a predictor of entering food affordability difficulties, these qualitative findings suggest the relationship to be bi-directional. Interviewees articulated awareness of dietary guidelines and recommendations regarding how to eat healthily, but identified the pressures of being able to meet these expectations while living on a very limited budget. Moira described how the challenge of eating healthily was driven by financial barriers rather than a lack of skills or knowledge:

> "*Sometimes you're talking about 10, 12 pound for a bit of meat, which is ridiculous, sort of thing, when they're wanting you to eat fresh meat. You know how and whatever, and try to make homemade meals, but the price of that is sometimes...*" (Moira, GoWell participant)

Jim and Karen also reflected upon the price of food and the difficulty of meeting guidelines for healthy eating:

> "*Take five a day, you cannae afford a bit of fruit.*" (Karen) "*And then they complain about hospitals getting filled up with people – it's down to them isn't it? They're the ones that price the food*" (Jim, GoWell participant).

Concern about the quality of cheap food was mentioned, and parents expressed desire to be able to feed their children good food. As Jennifer, living with her partner and disabled daughter, commented, "*I think about how much meat's actually in processed food. That's what I think about. Cos I don't like gieing them junk*" (Jennifer, GoWell participant)

For Tony, living alone and claiming ESA, rather than citing problems of affordability, it was his physical disabilities which dictated the sorts of foods he would cook and eat. He

described not being able to stand long at the oven and so choosing things he could put in the microwave or cook quickly, pointing out instant noodles and ready meals in his cupboards.

Unsurprisingly, health care professionals tended to discuss food in relation to health and diet. Bad diets and poor food choices were commonly mentioned by interviewees working in these contexts. When asked about food affordability difficulties among their patients, health care providers often brought the discussion round to what they sensed to be bigger issues to do with people eating food which was bad for them and caused weight-gain. For some, the fact that people were over-weight was considered evidence of an absence of hunger or food poverty. As Pauline, a dietician, commented:

> "*they are obviously affording, we do a lot of diabetic clinics so we would see people with overweight problems, so they are obviously affording to eat to have a BMI of, you know...*" (Pauline, dietician)

Supporting people to access external services which would help address issues related to obesity was mentioned by the health care professionals interviewed. This was seen to be the priority issue in relation to food and people in deprived areas. When asked whether she had ever referred anyone to a food bank, Katherine, a primary care nurse, commented:

> "*I've referred* [to specialist services] *for basically weight loss, lots and lots and lots of weight loss, but not really for people that can't afford food*" (Katherine, nurse)

Eating unhealthy foods was often seen to be a matter of lack of knowledge or skills among people on low incomes, as well as a problem of bad habits and poor choices – what Katherine described as "*a lifestyle of what people perceive as normal*".

Health care professionals tended to understand the impacts of food poverty in terms of the physical manifestations of malnutrition and starvation. For Sarah, a GP, real hunger only exists in countries where there are famines and she commented that:

> "*in our society, when we have such high levels of obesity and things like that, it's not dangerous for us to live off small amounts of food for a few days*" (Sarah, GP)

Interviewees had mixed views on the extent to which income and the affordability of healthy foods where genuine reasons why people did not eat well. For example, the high cost of fruit and vegetables was acknowledged by Katherine, a primary care nurse, but

dieticians Pauline and Eleanor, suggested that while patients might perceive these foods to be prohibitively expensive, perhaps it was also an issue of priorities and budgeting:

> "*People's perception is that fruit is always too expensive. They always say it's too expensive, so that's when you go down the frozen fruits or tinned fruits".* (Eleanor, dietician)

> *"Eleanor is so right, because our patients always say that they can't afford to eat healthily but they're possibly smoking, or drinking, or buying really flashy things…"* (Pauline, dietician)

Julian, a GP, reflected on the reasons why obesity was so prevalent among his patients and was reluctant to directly relate it to low income:

> "*It is possibly income, a lot of social factors are involved. It is probably related to social class, but whether you can tease income out of that I'm not sure*" (Julian, GP)

By contrast, other service providers interviewed recognised that people often have very restricted choices when it comes to food and acknowledged that communicating about healthy eating and encouraging behaviour change was often irrelevant given the complex range of problems people in deprived areas regularly face. A number of interviewees mentioned Maslov's hierarchy of needs, with Sarah, a GP, commenting:

> "*your needs are different at different levels, so the people who might listen to nutritional advice are the people who have stability in their lives*". (Sarah, GP)

A number of service provider interviewees recognised that healthy eating and changing habits were often not priorities for people who would likely face challenges which were much bigger than thinking about eating well:

> "*I do find it difficult because we are taught to, you know, for example your diabetics, you know, lots of fruit and vegetables, well everybody, lots of fruit and vegetables, watching your alcohol intake, not smoking. But a lot of these patients are really stressed, they've got chaotic lifestyles, they've got lots of problems in the house you know, that's not at the forefront of their, that's not their main aim or their main goal. It's maybe, you know, preventing their child from being taken into care or, you know it's very difficult to strike a balance*" (Katherine, primary care nurse)

This idea of the 'chaotic lifestyle' did not necessarily play out in the sample of households interviewed. While the two interviewees who were suffering from alcoholism were clear that their diet was not their priority, from the others the importance of eating well was apparent, with many describing detailed strategies for managing food budgets.

The strong association between developing mental health problems and entering food affordability difficulties was identified in the quantitative analysis presented at section 7.2.6. The relationship between food poverty and mental health, while not discussed directly in the interviews, was evident in descriptions of the emotional distress and anxiety of having difficulty affording enough food. Again the qualitative findings suggest the bi-directional relationship between mental health and food poverty, with the psychological and emotional impacts of being unable to afford food apparent from the interviews. Chronic difficulties clearly involved constant worry about having enough food to feed one's self and one's family. When asked if he worried about running out of money for food, Makeen identified food and fuel as the basic costs he was most anxious about being able to meet:

> "*Everyday, every day honestly. I think about, maybe I'll get a better job for my family, a better life, a better future, instead of stress myself. Maybe today I want to go a shop, I don't have enough money for food, maybe today I go to work, the electricity going off, they don't have enough power, weather is cold. Everyday honestly*" (Makeen, GoWell participant)

Gail, working for a third sector mental health service, commented on the impact on mental health of poverty more generally:

> "*Well poverty itself has a lot of mental health issues, with the stress and the worry and the anxiety, that comes as well with the depression. Because they can't afford things*".

Food poverty was often a highly stressful and upsetting experience, particularly in relation to one's ability to fulfil family responsibilities regarding food provision. Jennifer spoke about the distressing experience of not having money for food while living as a lone parent, and particularly her feelings about the impact which this had on her ability to look after her daughter:

> "*I struggled all the time. Actually when I was on that* [Job Seeker's Allowance] *quite a lot I was in tears because I couldnae afford to put food in the cupboards for my wean, it was horrible. Especially when you know she's needing something and you couldnae get*

it. And then trying to explain that to them when they're younger, it's horrible, because she's wondering why she cannae have it. I ended up just sending her away [to relations] *for a couple of days just to make sure she's alright, it's horrible"* (Jennifer, GoWell participant)

The stress, anxiety and emotional impacts of struggling to afford food were clearly related to what that experience was felt to represent regarding an individual's competence as an autonomous adult, and particularly in relation to their ability to fulfil parenting roles. The impacts of food poverty on family life and the role of the family in responding to food poverty are now explored.

7.3.4 Food poverty and family life

Food clearly plays an important role within family life. For the interviewees with dependent children, their children were their priority when food shopping and deciding what to spend on food. As Sonia, a lone parent and refugee, described in relation to food shopping: "*My kids first, I don't care for myself. For me it's first my kids, I don't care for myself*". Moira, working part-time and living with her partner and four children, spoke about having to manage a food budget and meal planning which could accommodate for "fussy eaters" and sometimes having to prepare different meals for each child. Wanting to please their children and buy food they would eat, while also ensuring that they had a healthy diet, as well as one which was affordable, was often described by mothers interviewed. Martha, a lone parent of four children, spoke about the pressures from her children when it came to food shopping and trying to manage her food budget:

"that's why I don't like going out with them. If I dare have all of them follow myself then, oh my god, this one will say "this is what I want". This one will point at this, this one will point at that, at the end of day I'll end up buying everything they want. And I'll say – "oh, you can't be like that, I don't have money to waste like this" (Martha, GoWell participant)

Parents expressed desire to be able to feed their families well, suggesting concern that this was a marker of good parenting. However, restricted food budgets also meant for some that they were not always able to feed their families the sorts of foods they felt were important for good health:

"well this week has sort of been a struggle, but then I said right well we'll empty the freezer…Cos I've got no like fruit for them this week…normally I've got like apples, bananas, so I know they are getting something fresh" (Moira, GoWell participant)

While the price of food was important, this was also balanced with a concern for making sure their families ate well.

Food poverty clearly had a considerable impact on the role of food in family life. For Moira, a restricted food budget also meant not being able to enjoy regular family meals like a weekly roast: "*You see we used to always have a roast, you know how on a Sunday. But that's just every now and again now. So we do, we have cut back*". Several interviewees also described not being able to enjoy sharing meals with family or friends for special occasions such as birthday parties, meals out or barbeques because they were not able to afford to participate.

The issue of food within the family evidently carried particular expectations regarding gender roles and responsibilities for food provision and preparation. It was apparent that the experience of food poverty had an impact on people's ability to fulfil these roles and therefore on their sense of identity within the family. Describing the experience of having to manage on a far more restricted food budget than he and his wife had been previously used to, Jim commented:

"I think it's harder for her [his wife, Karen], *she used to say 'look I'll do you a steak for when you get home fae work'"* (Jim, GoWell participant)

The significance of gender roles, and the importance of autonomy in food provision in order to fulfil those roles, was also identified by service providers. Stuart, a housing officer, described an asylum seeker who had refused help despite having no money to buy food for his family. Here Stuart suggested that this was a cultural as well as a gender issue regarding identity in relation to food provision:

"*that guy, he's came fae a country where the man's the man. You know and it's the man that wins the bread. And if that isn't being met that can be quite embarrassing"* (Stuart, housing support worker)

Mothers in particular described the need to always have full cupboards, to be able to bulk buy and have food in reserve, in order to feel secure. Jennifer said that she always worried about running out of food before there was money to buy more. As mentioned at 7.2.2,

Martha explained her strategy for making sure she always had something she was able to feed her children:

> *"I always buy things in bulk, I always have something to cook…all the time I make sure there is egg, just two or three to put in the fridge. If anytime there is not anything to eat in this house I boil the rice, I boil the egg, I do my rice and they eat, you'll see the way they eat they will be so happy –only sometimes they will be too fussy, "eh I don't like that", but if there's no food I say "there's nothing, if you don't want it then I don't know what's next", and they will eat it".* (Martha, GoWell participant)

The wider as well as the immediate family also had a central role to play when it came to food, and certainly the family was where the majority of residents suggested they would turn to for help if they were struggling to afford food. A number of instances were described of informal support with food being provided by family members in circumstances where for financial, health or other reasons people struggled to feed themselves. Both Arthur and Richard, interviewees who had addictions, described how their siblings took responsibility for ensuring that they ate. A similar situation was described by Colin, a retired man living with his grown up son and grandson, who spoke about how he would provide food and prepare meals for his daughter who also struggled with alcohol problems. Pointing out the portions of prepared food from his brother which he had in his fridge and his freezer, Arthur described the essential role which his brother played in meeting his food needs:

> *"well I think I'd be into food banks and all that, just things I cannae be bothered wi', if it wasn't for him"* (Arthur, GoWell participant)

When it came to food, it was the family which clearly performed a safety net function and was felt to have a responsibility to prevent family members going hungry. It was the provision of food specifically, rather than the money to buy food, which family members seemed most motivated to do in situations of extreme need. Jennifer described a time when she had particularly struggled:

> *"they all ended up chipping in and putting food in the cupboards, and in the fridge and the freezer. Stuff like that. But I'd rather do it myself"* (Jennifer, GoWell participant)

Here Jennifer also expressed a sentiment which was recognised by others, - that while family was understood to be the first port of call for help, even receiving help from close family could to some extent be felt as a failure or loss of agency. Turning to others for help

with food specifically appeared to imply a state of child-like dependency on others, while being able to make one's own food choices and being able to provide for one's own family was an important marker of independence and self-expression. Food was clearly felt to be the responsibility of the individual as an autonomous adult.

Certainly in their exploration of the relationship between shame and poverty Chase and Walker (2013) describe how pride, as a feeling of self-esteem and self-worth, is jeopardised when having to seek out help in times of extreme need. The family is evidently an important source of support for those experiencing food poverty, but simultaneously perhaps also a source of shame in the process of having to admit to those closest to us that we have failed in the most basic task of providing sufficient food for ourselves and our dependents.

7.3.5 Food poverty and belonging

As discussed in Chapter Two, food is deeply personal and connected to feelings about self-identity, and belonging to families, cultures and communities. Tahir and Makeen both described the importance for them of buying foods from specialist shops and being able to prepare traditional and culturally appropriate meals. For Makeen, food poverty meant an inability to shop in these places or to prepare such meals and thus perhaps a loss of connection to home through food:

> "*before I go in the shopping and buy normal lamb, I buy ocra, other traditional things I bring and I cook here, it was better, but now I can't afford to buy the things you want. You can look, yeah, but you can't buy because you don't have that money to spend it. It's horrible*" (Makeen, GoWell participant)

The example given by Moira at section 7.2.4 above about not being able to afford a weekly roast dinner is also an example of the ways in which food poverty impacts on important cultural practices involving food.

Cooking for others was an important expression of care and connectedness. Being able to prepare food for others carried a strong sense of pride and self-esteem for Richard in an interview where he otherwise spoke very negatively about himself:

> "*I'm a no bad wee cook but I don't cook for myself, you know what I mean. 'Cos I just don't. But for my boys and family and friends and that I'll cook them a meal. And if they*

like it then I'm quite happy and that, it puts a wee smile on my face. I'm like that - "aye, on you go, you're no such a fucking eejit after all" " (Richard, GoWell participant)

These ideas of pride, agency and self-reliance in relation to food clearly resonate with the notion of food as an individual's responsibility. As discussed in Chapter Eight, these ideas were reflected in interviewees' descriptions of why they would refuse or had refused to use a food bank – they did not want to lose that sense of control or feel dependent upon others to meet their food needs.

While a shortage of money clearly impacted on people's enjoyment of food, social isolation was also recognised as a significant factor when it came to people's interest and participation in food. Interviewees who lived alone tended to lack motivation to cook for themselves and also commented on the cost of cooking for one. The presence of mental health problems and addictions also appeared to have a significant impact on the extent to which interviewees would demonstrate the sort of self-care involved in eating well.

Sharing food with others also seemed to be important for an individual's sense of self and their role within the community. Jim spoke about how he and his wife looked out for an elderly neighbour, giving her soup and the occasional hot meal – particularly at Christmas. Arthur also described how his brother would cook for his own family, as well as a number of neighbours, on a daily basis. Arthur suggested that this was not because these people were necessarily particularly struggling for food but because:

"*he's just that kind of guy, instead of wasting it he gives it away. People across the road from him or whatever, see if he's got too much he puts it in containers and gies it to them. That's the way he is.*" (Arthur, GoWell participant)

Preparing food and sharing it with others was clearly important for both individual agency as well as connectedness with others. This section has highlighted then, that the experience of food poverty has profound implications for sense of self, and identity in relation to others within the family and wider community. Food practices are how care is expressed, and are also important for sense of belonging to cultures and society more broadly.

7.4 Conclusion

This chapter has examined food poverty within deprived neighbourhoods in Glasgow using both quantitative and qualitative data. Key findings related to the types of households experiencing food poverty, factors associated with developing food affordability difficulties, and the multifaceted nature of the experience of food poverty. Comparing perspectives of households experiencing food poverty, and those working in local welfare services highlighted important areas of overlap and contradiction in understandings of the realities of food poverty.

Analysis of survey data enabled the scale of food poverty within the study areas, and how this has changed over time, to be examined cross-sectionally. This analysis showed that while aggregate levels of food poverty have remained at about 18 per cent between 2006 and 2015, single person households and those out of work due to illness or disability experienced a trend towards increased difficulty affording food over that period. Qualitative data also provided insights into a wide range of lived experiences of food poverty and different contexts in which it occurs. In particular, the experiences of asylum seeking and refugee households emerged as important when considering who is vulnerable to food poverty. Insights from different sorts of households highlighted the spectrum of food poverty experience as presented in Chapter Two, from worrying about running out of money for food before pay-day, to skipping meals and having to go without.

The longitudinal aspect of the quantitative data allowed the rate of movement into and out of food affordability difficulties to be examined, and the factors associated with entering difficulties to be identified. Here the relationship between entering food difficulties and deteriorating health, particularly mental health, was a striking result. The qualitative findings offered greater depth of understanding of the relationship between food poverty and health, suggesting how ill-health might increase vulnerability to food poverty, but also that the relationship may be bi-directional, with food poverty negatively impacting on health, particularly on mental health. While health practitioners often considered the poor diet and diet-related conditions of people on low income to be caused by poor choices or lack of skills, households interviewed demonstrated good knowledge of healthy eating, and a desire to eat well. By contrast, the service providers working in non-health related settings, such as housing and advice services, appeared less likely to suggest behavioural reasons for food poverty and recognised the financial drivers, including impacts of welfare reforms.

While the evidence presented in this chapter of food insecurity coping strategies helps to dispel myths, which have been long challenged in the literature, as to the capabilities of low income households, it is also concerning that such myths appear to be maintained by some service providers. The findings would suggest that more awareness raising is needed among health professionals as to the financial drivers of food insecurity, particularly given the relationship between food insecurity and health.

The financial drivers of food poverty emerged as an important finding of this chapter, echoing the wider evidence base. The relationship between entering food affordability difficulties and having been impacted by welfare reforms is an important finding of the quantitative analysis, suggesting reductions in social security to be a key driver of food poverty. It is striking that over 40 per cent of those affected by two or more reforms entered food affordability difficulties between 2011 and 2015. While specific welfare reforms were not particularly discussed in residents' interviews, interviewees did recognise that there was generally less government support available and some mentioned negative experiences with the social security system. Service providers working in advice roles particularly recognised the welfare reform drivers of food poverty. Again, the role of the welfare state in addressing or perhaps even exacerbating food poverty is explored more deeply in Chapter Nine.

The findings presented at sections 7.3.4 and 7.3.5 indicated that food poverty affected not only the quantity, quality and variety of food eaten, but also appeared to have considerable emotional, social and cultural implications. Such insights are reflective of the multifaceted nature of food poverty as discussed in Chapter Two. The emotional effects of food poverty reflect the important social role of food as well as for sense of identity and belonging, and its essential position in family life. These findings also speak strongly to the shame literature which identifies how pride and self-worth are jeopordised when having to seek out help at times of extreme need (Chase and Walker, 2013). These themes are explored in more detail in Chapter Eight which focuses on food bank use among residents of deprived communities.

Chapter Eight: Understanding the use of food banks and their role in deprived neighbourhoods in Glasgow

8.1 Introduction

This chapter presents quantitative and qualitative findings in order to answer the second research question of this thesis: *what does food bank use look like in deprived neighbourhoods?* The chapter provides quantitative analysis of a self-reported measure of food bank use which has been published in *Social Policy and Society* (MacLeod et al, 2018). The chapter also offers insights into the experiences and perspectives of food banks among the wider population of deprived neighbourhoods. Such information is important in order to understand the role of the food bank beyond the context of the food bank itself.

As discussed in Chapter Three, research has shown that food banks are most commonly used as a last resort by those facing the most extreme level of food insecurity (Loopstra and Tarasuk, 2012; Lambie-Mumford et al., 2014) and it has therefore been widely acknowledged that food bank use is an inadequate indicator of food insecurity (Douglas et al., 2015; Loopstra and Tarasuk, 2015). It is important, as Chapter Seven demonstrated, to examine the multi-faceted experience of food poverty, and there is a risk that in the absence of such understanding that food bank data is used uncritically in how food poverty is explained, thus masking the full extent of the issue. However, while recognising what food bank data cannot explain, there is a need to improve understanding of both household food insecurity and food bank use as separate but connected phenomena, in order to enable, as Loopsta et al. maintain: "individual analyses of the causes and consequences of these experiences" (2016: 9).

To provide an overview of this chapter, first section 8.2 examines the scale and drivers of food bank use through cross-sectional analysis of Wave 4 of the GoWell survey data. Here both descriptive statistics and logistic regression analysis results are presented. Next, section 8.3 introduces narrative analysis of the longitudinal data within the GoWell study and presents four case studies of individuals who reported food bank use in 2015. This approach considers the changes over time in relation to particular variables for these individuals, adding further depth of understanding and new perspectives on food bank use.

Sections 8.4 – 8.7 present qualitative findings from interviews with both household survey respondents and local service providers. Section 8.4 examines the identity of the food bank user and their reasons for accessing such provision, while 8.5 considers the impacts of

these experiences, focusing in particular on the shame of food bank use. Such findings provide important context for the quantitative results, offering insights into the lived experiences of food bank use, as well as wider perceptions of and encounters with them from the perspectives of those living and working in deprived areas.

In addition to examining who uses food banks and why, this chapter also considers the issue of 'non-access' of food banks among those who may otherwise struggle to access adequate food. Both quantitative and qualitative findings help to examine the scale of this issue, and the reasons why those who experience food affordability difficulties do not use a food bank. Section 8.6 examines different reasons given for not using food banks by people who otherwise report difficulty affording food. Here the shame of food banks is again emphasised, as is the perception of being ineligible or undeserving of their help, and the importance of individual choice and control over food.

Finally, section 8.7 considers routes to the food bank, examining the ways in which who uses food banks and how, might be shaped by social networks and service providers as gate-keepers. This analysis of food bank operations is important for addressing the research question which this chapter seeks to answer, but also begins to consider the relationship between food banks and welfare state services which is the focus of the discussion in Chapter Nine.

8.2 The scale and drivers of food bank use in Glasgow's deprived neighbourhoods

This section of the chapter examines who among residents of deprived neighbourhoods in Glasgow uses food banks, and what the drivers of food bank use might be. Quantitative findings from Wave 4 of the GoWell neighbourhood survey conducted in 2015 describe the scale of food bank use and the characteristics of food bank users. These descriptive statistics are presented in 8.2.1 through 8.2.8 below. Logistic regression analysis then suggests factors which are associated with food bank use. Results of the regression are presented at 8.2.9.

8.2.1 Measure of food bank use

In the 2015 survey, respondents were asked: '*How often have you used a food bank, or similar service, in the last year?*' Response categories were: *I have not used a food bank; at least weekly; about once or twice a month; less than once a month; don't know; prefer not to say.* To those who answered that they had not used a food bank, a follow-up question was asked about the reasons for not using one: '*Was that because you have not…needed to use a food bank; wanted to use a food bank; been able to use or access a food bank; don't know; prefer not to say*'.

Respondents were classified into one of three groups depending upon their answers to these two questions.

•   *Food bank users* are those who said that they had used a food bank in the last year (weekly; once or twice a month; or less than once a month).

•   *Non-users* are those who reported that they had not used a food bank in the past year and that the reason for this was that they 'had not needed to use a food bank'.

•   *Non-accessors* are those who said that the reason they had not used a food bank was that they 'had not wanted to use a food bank' or 'had not been able to use or access a food bank', (i.e. this group of non-users did not select the first response offered, namely that they 'had not needed to use a food bank').

8.2.2 Independent variables

Independent variables examined were largely the same as those considered in the analysis of food affordability difficulties presented in Chapter Seven. These included key socio-demographic variables including: gender; age; household type; housing tenure; and citizenship status (as migrants have different access to welfare support than British citizens); employment status. The categories used for these variables are shown in Table 8.2 below. Other variables which have been shown in the literature to be important in relation to food bank use, as discussed in Chapter Three, were also examined in terms of life events, health and financial factors.

In terms of measuring experiences of life events, survey respondents were asked whether they had experienced nine different life events in the past four years: a new job or promotion; unemployment, redundancy or reduced working hours; becoming a parent;

serious health event; relationship breakdown; bereavement; marriage or partnership; victim of a crime; moving home. Several of these experiences have been highlighted in qualitative studies as common among food bank users (see for example Perry et al., 2014), and therefore this variable was considered of theoretical importance to be included in the analysis.

The same variables for measuring health; mental health; and having been impacted by welfare reforms; were used for this analysis as were used in the analysis presented in Chapter Seven. In relation to affordability difficulties, food and fuel have been included in the analysis given that meeting the costs of these are identified in the literature as being a particular challenge among food bank users and the 'heat or eat' dilemma considered to be a key factor in causing people to turn to food banks (Lambie- Mumford and Snell, 2015).

8.2.3 Analysis

Initially the prevalence of food bank use was determined from the two main variables– experience of food bank use and reason for not having used a food bank. Distinguishing 'non accessors' at this point and including this group in the next phase of the analysis allowed it to be considered whether food bank users are a distinct group, and whether some of those who do not access food banks share characteristics with those who do.

The relationships between food bank use and the range of independent variables were investigated in order to establish the difference in use according to various key indicators. This analysis was done using chi-square statistics, and the results presented in three groupings: socio-demographic variables; health variables; and financial factors.

Those variables found to have a significant bivariate association with food bank use were then included in the regression analysis. To determine the relationship between food bank use and the independent variables of interest, a logistic regression model was developed in four stages. Using food bank use [user vs. non-user (combining non-accessors and non-users)] as the outcome variable, first key demographic variables were included as predictor variables: gender; age; and household structure. Given the small numbers involved in several of the age groupings, this variable was collapsed into a binary variable comparing those under and those over 40 which represents two similar sized groupings. Similarly, for household structure 'older single adult' was merged with 'single adult' and 'older couple/multiple person' with 'couple/multiple person'. Second, to evaluate the potential

relationship between health and food bank use, the presence of long-standing illness or disability; mental health problems; and self-reported mental health were added to the model. Third, citizenship status; employment status; and experience of a number of different life events were added to the model. Finally, to determine the role of financial factors on food bank use, food affordability difficulties and fuel affordability difficulties [difficulty v no difficulty] were added, as well as a binary variable indicating whether or not a respondent's income had been impacted by welfare reforms.

8.2.4 Rate of Food Bank Use

Table 8.1 indicates the frequency of food bank use in the previous year as reported by the survey respondents, while Table 8.2 shows the reasons for non-use given by those who said they had never used a food bank. Using these findings, respondents are grouped into 'users', 'non-users' and 'non-accessors' (as described above) in Table 8.3. The analysis shows that 4.2 per cent of the survey respondents reported having used a food bank in the past year. While most people do not use a food bank because they say they do not need to use one, 3.8 per cent of respondents reported not having used a food bank in the past year because they either did not want to, or were not able to do so. The finding also suggests that the majority of this 'non-accessor' group had elected not to do so – only 0.5 per cent reported that they had not used a food bank because they had not been able to use or access one. The reasons why people who otherwise struggle to afford food might not want to use a food bank are explored at section 8.6 of this chapter.

Table 8.1 Frequency of food bank use

	Percent	n
Had not used a food bank	94.4	(3412)
Used a food bank:		
At least weekly	0.8	(29)
About once or twice a month	1.4	(50)
Less than once a month	1.9	(67)
Don't know	0.5	(19)
Prefer not to say	1.0	(37)
Total	100.0	(3614)

Table 8.2 Reasons for not using a food bank

	Percent	n
Had no need to use a food bank	94.5	(3223)
Did not want to use a food bank	3.4	(116)
Was not able to use or access a food bank	0.5	(16)
Don't know	1.5	(52)
Prefer not to say	0.1	(4)
Total	100.0	(3412)

Table 8.3 Categorisation of food bank use

	Percent	n
User	4.2	(146)
Non-user	92.0	(3223)
Non-accessor	3.8	(133)
Total	100.0	(3502)

Comparing these figures on rates of food bank use with those of food affordability difficulties as presented in Chapter Seven, 17 per cent of the survey respondents in 2015 said that they occasionally or frequently have difficulty meeting the cost of food. Thus, the group of food bank users is less than a quarter of the size of the group who report food insecurity.

8.2.5 Socio-Demographic Characteristics of Food Bank Users, Non-Accessors and Non-Users

Table 8.4 presents socio-demographic characteristics of respondents according to food bank use. Food bank use was found to be higher among men, younger age groups, single person households, social renters, refugee and asylum seekers, and those out of work.

Table 8.4 Rate of food bank use according to demographic variables (%)

	User	Non-user	Non-accessor	χ^2, (p)	n
Gender				6.0 (<0.05)	
Female	3.4	93.1	3.5		(1693)
Male	4.9	91.0	4		(1809)
Age				42.9 (<0.01)	
16-24	5.2	92.5	2.1		(441)
25-39	5.5	90.5	4.1		(1037)
40-54	5.2	90.1	4.7		(999)
55-64	2.6	92.5	4.8		(456)
65+	0.5	97.5	1.9		(570)
Household type				109.8 (<0.01)	
single adult	8.1	85.0	6.9		(932)
multiple adult	2.7	94.9	2.5		(1018)
single parent family	5.2	90.4	4.3		(439)
multiple adult family	3.2	94.3	2.5		(527)
single older person	0.3	96.9	2.8		(216)
older multiple adult	0.5	98.6	1		(360)
Tenure				85.3 (<0.01)	
Owner-occupied	0.1	99.4	0.5		(825)
Private rented	1.2	94.9	3.9		(254)
Social rented	5.9	89.2	4.9		(2405)
Citizenship status				18.9 (<0.01)	
British Citizen	4.1	92.3	3.6		(3057)
Refugee/asylum seeker	8.3	85.9	5.8		(206)
Other migrant	0.5	95.7	3.9		(207)
Employment status				196.6 (<0.01)	
Working	0.8	98.2	1.1		(1301)
not working	8.4	85.4	6.2		(1041)
sick/disabled	8.8	84.1	7.1		(477)
Retired	0.8	96.5	2.7		(657)

8.2.6 Life Events and Food Bank Use

All of the life events, except for becoming a parent and a new marriage or partnership, showed associations with food bank use (based on chi-squared tests). Table 8.5 shows the proportion of each group of food bank users who had also experienced life events. Food bank users were four times more likely to have been a victim of a crime that non-users, and three times more likely to have experienced a reduction in employment, including unemployment, redundancy or reduced working hours. Approximately twice the proportion of food bank users (39.3 per cent) had experienced a serious health event, illness, or disability compared with non-users (19.4 per cent) and over twice as many food bank users as non-users had experienced relationship breakdown.

Almost half of food bank users (47.6 per cent) had moved home in the previous year, many more than the number of non-users and non-accessors who had done so. This may be related to the fact that asylum seekers and refugees, who are concentrated in regeneration areas (including the GoWell neighbourhoods) where house moves occur at a higher rate, are a group more likely to use food banks, or simply due to the coincidence of poverty and home insecurity.

Table 8.5 Proportion of respondents who experienced life events by food bank user group (Col. %)

	User	Non-user	Non-accessor	χ^2, (p)	N
New job	9.0	15.5	3.8	18.2(<0.01)	(517)
Job loss	33.3	11.2	22.7	74.7(<0.01)	(437)
Serious health event	39.3	19.4	36.4	52.9(<0.01)	(730)
Bereavement	34.7	23.3	27.3	10.6(<0.05)	(835)
Victim of a crime	17.9	4.4	14.3	71.1(<0.01)	(188)
Moving home	47.6	25.8	28.0	33.7(<0.01)	(936)
Relationship break-up	18.8	6.7	13.6	37.0(<0.01)	(259)

8.2.7 Health and food bank use

Table 8.6 indicates that 44.2 per cent of food bank users reported a longstanding illness or disability, compared with 28.4 per cent of non-users and 42.1 of non-accessors. Two-thirds (66.4 per cent) of those who had used a food bank reported a mental health problem, compared with 31.6 per cent of non-users and 57.3 of non-accessors.

Table 8.6 Prevalence of self-reported health problems by food bank use (Col. %)

	User (n)	Non-user(n)	Non-accessor(n)	χ^2, (p)	n
Mental health problem	66.4 (91)	31.6 (793)	57.3 (59)	95.3 (<0.01)	(943)
Long-term illness or disability	44.2 (65)	28.4 (915)	42.1 (56)	27.2 (<0.01)	(1036)

8.2.8 Financial factors and food bank use

Each of the welfare reforms included in the survey affected between 3.8 and 5.4 per cent of respondents. Being affected by welfare reforms was far more common among food bank users than non-users (Table 8.7). Changes to Employment and Support Allowance, changes to housing benefit, and benefit sanctions were the most common welfare reforms experienced by those who report food bank use. A high proportion (22.1 per cent) of non-accessors, i.e. people who said they did not want to use a food bank or had not been able to, had also experienced a benefit sanction. The stigma of food banks may be a barrier to use in these cases (Purdam et al., 2015; Garthwaite, 2016b).

Table 8.7 Proportion of respondents impacted by welfare reforms by food bank user group (Col. %)

	User	Non-user	Non-accessor	χ^2, (p)	n
Under-occupation deduction	13.6	3.6	6.3	36.0 (<0.01)	(139)
PIP/DLA changes	15.7	3.3	12.8	77.7 (<0.01)	(140)
ESA changes	18.8	3.0	11.3	104.5 (<0.01)	(135)
Housing benefit changes	18.0	4.0	17.9	138.2 (<0.01)	(178)
Working tax credit changes	7.2	3.4	6.6	8.5 (<0.05)	(124)
Sanctions	19.0	2.8	22.1	190.4 (<0.01)	(140)

Table 8.8 shows the rate of food bank use according to the number of welfare reforms respondents reported having been affected by. Whilst only 5.3 per cent of those *not* affected by welfare reforms were either food bank users or non-accessors, 18.2 per cent of those affected by one welfare reform were either accessing or not able to access a food banks, rising to 29.9 per cent of those affected to two or more welfare reforms.

Table 8.8 Rate of food bank use by experience of welfare reforms (%)

	Number of Welfare Reforms*		
	0	1	2 or more
Non-user	94.7	81.8	70.2
Non-accessor	2.7	6.9	12.1
User	2.5	11.3	17.7
Total	100.0	100.0	100.0
N	(2893)	(231)	(198)

* χ^2, (p) = 206.1, (<0.01)

In terms of financial difficulties, difficulty affording each of the items included in the survey, with the exception of housing repairs (this may be because the majority of respondents were social tenants, for whom most housing repairs are the responsibility of their landlord), had a significant relationship with food bank use (p<0.01) (Table 8.9). Among food bank users, affording clothes was the most common financial difficulty reported by two-thirds of users (67.4 per cent) followed by fuel (61.8 per cent) and food (61.4 per cent). Moreover, only 15.3 per cent of those reporting difficulty affording food had used a food bank. Among those who report frequent difficulty affording food (7 per

cent of respondents), 22.6 per cent had used a food bank and 13 per cent had not used one because they had not wanted to or had not been able to do so.

Table 8.9 Proportion of respondents reporting difficulty affording different items by food bank user group

	Users	Non-users	Non-accessors	χ^2 (p)	n
Food	61.4 (89)	13.4 (429)	49.6 (65)	390.0 (<0.01)	(582)
Fuel	61.8 (89)	19.7 (628)	48.5 (29.8)	192.3 (<0.01)	(747)
Rent	22.9 (33)	10.6 (336)	21.4 (28)	48.5 (<0.01)	(397)
Clothes	67.4 (97)	21.4 (685)	60.3 (79)	247.9 (<0.01)	(861)

This descriptive analysis of the survey data has identified associations between food bank use and a number of socio-demographic; health; and financial variables. Particularly striking is the relationship with ill health, and the high prevalence of mental health problems among food bank users, as is the high proportion of food bank users who have been affected by welfare reforms. In many instances, the characteristics of non-accessors lie somewhere between those of non-users and users, though more often closer to the latter than the former. This supports existing evidence which suggests that people will resist food bank use, even in contexts of hardship, until their circumstances become particularly desperate.

While these findings are helpful for understanding the common characteristics of food bank users, many of the factors described above may be interconnected. Further analysis used logistic regression to control for other factors when examining the impact of independent variables on food bank use. To address issues of multi-collinearity the logistic regression analyses were undertaken in blocks.

8.2.9 Regression results: factors associated with food bank use

Table 8.10 shows the results of the logistic regression for food bank use.   Controlling for all other variables in the modelling, even after taking difficulty affording food and the impact of welfare reforms into account, women remained less likely than men to have used a food bank (OR 0.546, 0.336-0.885). Similarly, those over 40 were less likely than those under 40 to have used a food bank (OR 0.601, 0.369-0.981) after controlling for

sociodemographic characteristics, as well as health and financial variables. The profile of food bank users is likely to be in part due to the protective impact of retirement on incomes – pensioners have not been adversely affected by welfare reforms or the freezing of benefit levels (Mason, 2016) and are not as vulnerable to disruptions to their income such as sanctioning as those claiming other forms of social security. Household structure and citizenship status did not have a significant relationship with food bank use, once other factors were controlled for.

Self-reported general health was associated with food bank use, with those with worse health more likely to use a food bank (OR 1.321, 1.076-1.622), but this association was weaker upon inclusion of financial variables. Having a long-standing illness or disability did not have a significant relationship with food bank use. Those with a mental health problem were over three times more likely to have used a food bank than others, the odds falling to a little under twice as likely upon the inclusion of life events, status and financial variables in the model (OR 1.845, 1.113-3.058). Those of working age who were not working and those who classified themselves as long-term sick or disabled were several times more likely to have used a food bank than those in full-time work (OR 5.626, 2.359-13.417 and OR 3.086, 1.096-8.690), respectively). Similarly, those who had lost their job were twice as likely to have used a food bank as others, with this effect attenuated by the inclusion of financial factors in the model (OR 2.012, 1.214-3.337). The only other life event bearing a significant association with food bank use was moving home, with the odds nearly doubling (OR 1.765, 1.115-2.794). Having difficulty affording food, and having been affected by welfare reforms approximately doubled the likelihood of someone having used a food bank, all other factors considered (OR 2.242, 1.246-4.035 and 2.293, 1.459-3.604, respectively.

Table 8.10 Odds ratios (95% confidence intervals) of reporting use of food banks using logistic regression (bold values = p<0.05)

	Model 1	Model 2	Model 3	Model 4
Demographic variables				
Gender: female	**0.485 (0.320 - 0.737)**	**0.445 (0.289 - 0.683)**	**0.488 (0.307 - 0.777)**	**0.546 (0.336 - 0.885)**
Age: >40	**0.460 (0.309 - 0.693)**	**0.381 (0.244 - 0.595)**	**0.564 (0.349 - 0.912)**	**0.601 (0.369 - 0.981)**
Household type (single adult)				
couple/multiple adult	**2.027 (1.073 - 3.828)**	1.312 (0.699 - 2.570)	1.248 (0.607 - 2.564)	1.029 (0.489 - 2.165)
single parent	0.926 (0.456 - 1.877)	0.723 (0.348 - 1.498)	0.838 (0.392 - 1.791)	0.733 (0.332 - 1.615)
couple/multiple adult with children	1.877 (0.901 - 3.952)	1.355 (0.638 - 2.880)	0.935 (0.426 - 2.049)	0.805 (0.358 - 1.808)
Health variables				
Reported Long-term illness/disability		0.891 (0.525 - 1.513)	1.026 (0.535 - 1.966)	0.969 (0.499 - 1.882)
Reported mental health problems		**3.586 (2.290 - 5.616)**	**2.011 (1.235 - 3.273)**	**1.845 (1.113 - 3.058)**
Self-reported general health scale (higher value=poorer health)		**1.321 (1.076 - 1.622)**	**1.296 (1.047 - 1.605)**	1.236 (0.993 - 1.539)
Life events and circumstances variables				
New job			0.501 (0.215 - 1.170)	0.536 (0.224 - 1.283)
Job loss			2.012 (1.214 - 3.337)	1.526 (0.900 - 2.588)
Serious health event			0.993 (0.615 - 1.603)	0.949 (0.582 - 1.546)
Break-up			1.099 (0.617 - 1.959)	0.992 (0.543 - 1.815)

Bereavement			1.484 (0.950 - 2.318)	1.330 (0.838 - 2.113)
Victim of a crime			1.491 (0.807 - 2.755)	0.958 (0.500 - 1.836)
Move house			**1.791 (1.153 - 2.784)**	**1.765 (1.115 - 2.794)**
Employment status (working)				
Not working			**7.608 (2.231 - 17.913)**	**5.626 (2.359 - 13.417)**
Sick/disabled			**4.159 (1.501 - 11.526)**	**3.086 (1.096 - 8.690)**
Retired			0.831 (0.223 - 3.093)	0.930 (0.242 - 3.372)
Citizenship status (British Citizen)				
Asylum seeker/refugee			0.800 (0.344 - 1.860)	0.793 (0.332 - 1.894)
Other migrant			1.710 (0.190 - 1.521)	0.168 (0.018 - 1.534)
Financial factors				
Impacted by welfare reforms				**2.293 (1.459 - 3.604)**
Difficulty affording food				**2.242 (1.246 - 4.035)**
Difficulty affording fuel				1.585 (0.878 - 2.862)
Constant	0.069	0.024	0.005	0.005
R2	0.049	0.129	0.303	0.303
n	(2552)	(2552)	(2551)	(2551)

8.3 Narrative case studies of food bank users using longitudinal data

The analysis at section 8.2 examines cross sectional data from the 2015 wave of the GoWell Survey. As explained in Chapter Six, there have been four waves of the Survey: 2006; 2008; 2011; and 2015. Linking the data allows for the identification of a longitudinal cohort of individuals who have been surveyed at multiple points in time. By identifying those individuals within this longitudinal cohort who report food bank use at Wave 4 of the survey, it is possible to analyse their responses to previous surveys in order to construct a narrative about their lives which has led them to this point. This approach allows the longitudinal dimension of the data set to be exploited in order to inform understanding who uses food banks and why. According to Elliot:

> "the chronological dimension of longitudinal data facilitates the construction of biographies that document change over time for specific individuals…These individual case studies can be used to illustrate the results of more conventional quantitative analysis" (Elliot, 2008: 415)

Of the 146 food bank users at Wave 4, there are 48 longitudinal cases (i.e. individuals who were interviewed at more than one wave). 29 of whom were interviewed at two waves, 15 at three waves, and four at all four survey waves. Focusing on the four respondents who participated in every wave of the survey, their responses given at each wave were examined, looking in particular at answers to questions relating to the key variables of interest identified in the cross-sectional analysis of the data. Variables looked at related to demographics; health; and financial issues. The aim of this approach is not to claim that these four cases are representative of any wider population of food bank users. Indeed, the sample is far too small to apply statistical analysis to consider relationships between variables. Rather the purpose of this technique is to identify examples of individual trajectories available within the data sets, adding further depth of understanding and new perspectives to what was possible in the cross-sectional analysis.

Through qualitative analysis of this survey data brief narrative case studies were developed for each of the four participants. Some specific details have been modified to protect the anonymity of the individuals. In addition, responses to some key survey questions are presented graphically so to compare trajectories over time in relation to specific variables. While this is helpful for considering the sorts of patterns of experiences which might lead up to food bank use, the aim of this approach to analysing the data is not to identify generic

life histories of food bank users per se, but to provide individual biographical case studies which can be set in the context of the cross-sectional data. Simon, Salma, Ian and Gordon all participated in each of the four survey waves and at the 2015 survey they all reported having used a food bank.

Simon

In 2006, when he first participated in the survey, Simon was in his late 30s and living alone in a high rise flat on the Southside of Glasgow. In 2011 he moved to a new flat when his previous home was being demolished. Simon is out of work because of long-term health conditions and receives disability benefits. His last paid job was over fifteen years ago.

Simon's health has fluctuated over the period since 2006. At that time he reported a long-term problem, possibly arthritis, but in general he considered his health to be good. In 2008 he first reported also suffering from long-term anxiety or depression, a condition which got consistently worse over time. By 2015 Simon had developed even more complex health issues. He said that he felt depressed most of the time and has consistently reported difficult sleeping.

Since 2008 Simon has found it increasingly difficult to meet basic household costs. While in 2006 he was able to meet the costs of food and fuel, in 2008 and 2015 both were occasional difficulties for him. In 2015 he also reported very often struggling to afford clothes. Simon's income has recently been affected by changes to the benefit system. In 2015 he reported that he had experienced changes to his Employment Support Allowance and that he had received a benefit sanction. When surveyed in 2015, Simon reported having used a food bank on at least a weekly basis over the previous twelve months.

Salma

Salma is originally from south Asia, she first came to the UK as an asylum seeker in 2003 when she was in her early 20s. In 2015, now in her mid-30s, she was living in a high-rise flat in the west of Glasgow with her teenage daughter.

Salma's health has deteriorated badly since 2006. At that time she felt that her health was generally very good and she never went to see her GP. By 2015 however, she was visiting her GP more than seven times in the year, particularly in relation to problems she was experiencing with her mental health. 2011 seems to have been a particularly difficult time. In that year she spoke about feeling depressed all of the time and described how physical pain made it extremely difficult to do every day work.

She appears to have had fluctuating difficulties affording different household items. In 2011 fuel and food were things she quite often struggled to afford, however she did not report these to be particular problems in 2015. In 2015 Salma said that she used a food bank once or twice a month.

Ian

In 2015 Ian was in his late 40s and living alone in a high rise flat in the south of Glasgow where he had lived for about 10 years.

Ian's health seems to have fluctuated, but generally deteriorated since 2006. In 2011 he appeared to go through a period of particularly poor health, reporting sleeplessness, and chest problems. These issues appeared to improve as in 2015 he did not report them as particular health problems. In 2008 Ian first reported suffering from long-term stress, anxiety or depression.

Ian's ability to manage financially and to meet household costs has similarly fluctuated. He reported particular difficulties in 2008, and again in 2011, the time when he also indicated considerable health problems. At this time he said that he very often struggled to meet the costs of rent, council tax, fuel, food and clothes. In 2015 he continued to have financial difficulties with the costs of council tax, fuel and clothes particular struggles.

Ian has been largely out of work for the past 10 years, although suggests he has had some periods of paid employment over that time. In 2008 he was in a part-time job, but then out of work again in 2011 and also in 2015. At this time he reported being out of work for health reasons. He has been looking for work over the period and has had job interviews.

Ian's income has been affected by recent changes to the benefits system, specifically he has been impacted by changes to disability benefits. In 2015 Ian reported using a food bank less than once a month.

Gordon

Gordon lives alone in the north-east of Glasgow, and at the 2015 survey was in his mid-50s. His reported employment status has changed at each survey wave since 2006. In 2006 he reported being out of work due to long-term illness/disability; in 2008 he said he was unemployed; in 2011 he was looking after the home; and in 2015 he said he was an unpaid carer for a family member or friend.

Gordon's general health has fluctuated over the period since 2006, although he has consistently reported some mobility difficulties. His mental health has also been unstable, improving between 2006 and 2011, but then declining again by 2015. At both 2006 and 2015 Gordon reported having seen his GP about issues related to his mental health.

In 2015 he said that he was not managing very well financially and in 2011 reported very often struggling to afford fuel and that affording food quite often a difficulty. In 2015 he said that his income had been affected by the 'bedroom tax'. That year Gordon also reported that he used a food bank less than once a month.

Figure 8.1 compares the self-reported general health of all four participants between 2006 and 2015. Presenting their responses together shows how this period was one of fluctuating and generally declining health for all four respondents. By the time that they reported using a food bank, respondents were largely reporting worse health than they had nine years previously.

Figure 8.1 Changes in general health for 4 case studies 2006-2015

In general, health is...
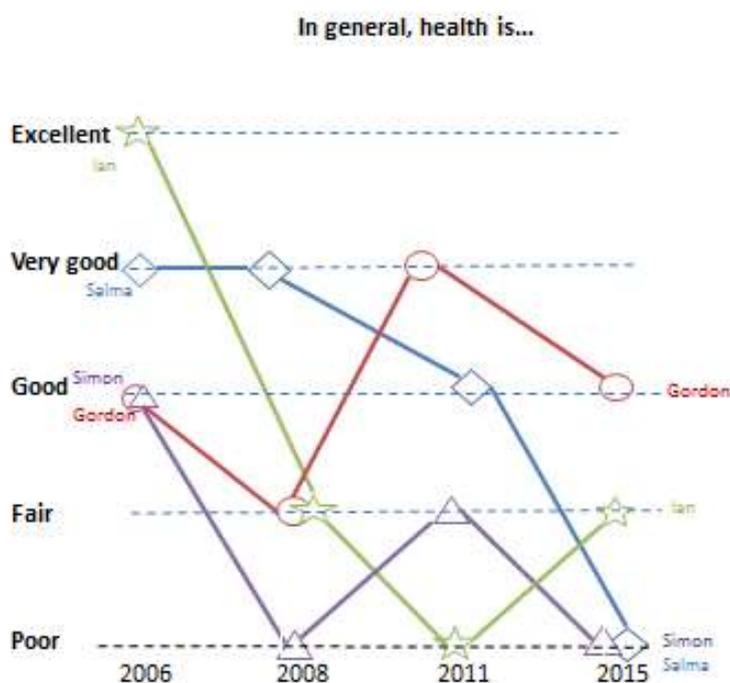
Cross-sectional analysis presented at section 8.2.9 indicated a relationship between food bank use and reporting mental health problems. Using a different mental health indicator included in the GoWell Survey, the SF12 Mental Health Scores, Figure 8.2 considers how the mental health of the four longitudinal participants changed over time, and how these individual changes compare with changes across the whole sample. At all waves, the short-form general health questionnaire (the SF12) was administered to respondents. The form asks about physical and mental health problems over the past four weeks. From the answers to the twelve questions, a mental health score was computed ranging from 0 to 100, with higher scores indicating better mental health (Ware et al, 2005).

Figure 8.2 Changes in SF12 Mental Health Scores for 4 case studies 2006-2015
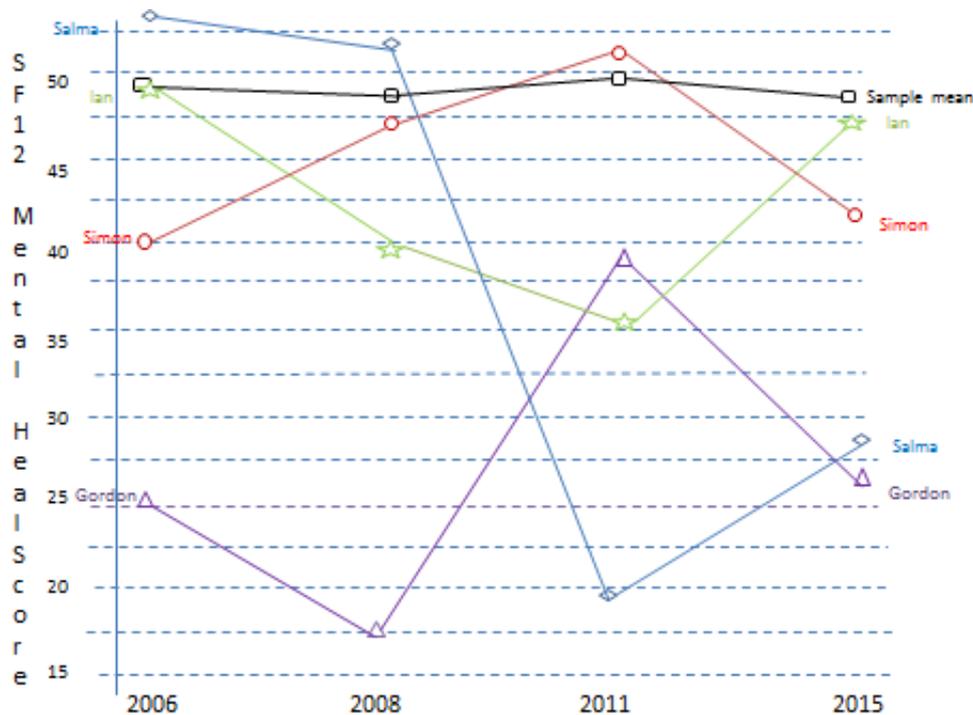
What is clear is that while the mental health for the whole sample has remained generally stable, each of the four respondents has experienced quite considerable fluctuations in their mental health over the nine year period, hardly reaching the average for the sample. Notably Salma, who at 2006 had an SF12 Mental Health Score over 5 points above the sample mean for the survey population, experienced substantial decline in her mental health and by 2015 had almost halved her score as determined by her responses to the relevant survey questions.

The development of narrative case studies using the longitudinal survey data has provided new insights into food bank use, perspectives which were not possible through statistical analysis of the cross-sectional data alone. While the cross-sectional analysis identified a relationship between food bank use and poor physical and mental health, and financial factors, these case studies have explored the temporal nature of these experiences. Deteriorating general and mental health, within the context of unstable financial circumstances, are particularly features of each of the four stories. The case studies have provided some insights into the individual level experiences of people who have used food banks, setting the ground for the qualitative findings which follow in the remainder of this chapter.

By drawing attention to the detail and variety of the individual level experiences, this approach has also helped build the case for gathering qualitative data in order to better understand the realities of these experiences from those who have lived them. It is crucial to acknowledge that when using this approach to constructing individual narratives from quantitative data, as Elliot (2008: 418) highlights, "it is the researcher who remains the narrator of each biography. The individuals whose lives are being presented do not have a voice". The next section presents qualitative findings from interviews with survey respondents who had experience of food bank use, considering the phenomenon from their perspectives and foregrounding their voices.

8.4 "We had no choice but to fucking eat it, there was nothing else tae eat": qualitative insights into who uses a food bank and why

As discussed in Chapter Six, in order to understand the role of food banks from the perspective of those who may have need to use them, interviewees were recruited from among the 2015 GoWell survey respondents who had reported difficulty affording food. Three of the eleven households interviewed had personal experience of having accessed a food bank. This section reflects on these examples, helping to amplify and confirm many of the quantitative findings outlined above; bringing to life and personalising what that data has suggested about the characteristics of those who have used a food bank and other factors associated with the experience. Their stories also identify other relevant issues which the quantitative data was not able to examine. Interview data helps to deepen understanding of the drivers and experiences of food bank use by exploring the issues from the perspectives of those who have lived these experiences and placing food bank use within the wider context of their life circumstances. This section also presents findings from interviews with front line service providers working in deprived neighbourhoods in Glasgow, considering the extent to which their perspectives on the drivers of food bank use might be similar or different from what is suggested by other data sources in this thesis.

Each of the participants who had used one described their own unique encounters within the food bank; the circumstances which had led them to it; and their feelings about receiving food in that way. What was common to all three households was the sense that turning to the food bank was done out of necessity - the alternative would have been to go hungry. Jim, a man in his fifties and living with his wife Karen in the north of Glasgow,

described a particularly acute situation in which turning to a food bank was done out of desperation:

> "*I mean we were sitting hungry there for about 2 or 3 days a couple of weeks ago. And she* [his wife] *went storming out and I thought, oh she's away tae calm down. And then she came back with a bag of messages* [shopping] *fae the food bank. I was like that, "pfffff, oh food banks!" It was terrible, you feel like a charity case. I was like that, "ooohh!"*" (Jim, GoWell participant).

Despite his outrage and distress at Karen's actions, Water did admit: *"I suppose, we ate that night put it that way"*. For Jim, this upsetting experience was the result of a recent significant change in his life circumstances. Following a serious health scare while at work on a building site, Jim had been signed-off work and had started to claim Employment Support Allowance. He described feeling bewildered by the process, having never accessed the social security system in the past, and struggling to adapt to being out of work and having to cover his expenses on a much reduced income. He also spoke about the pressures on his budget of having to pay the 'bedroom tax', as well as struggling to pay off bills and other debts. The first time in his life he had been out of work, the change had had a significant impact not only on his financial situation but also on his mental health*: "I take antidepressants now cos I had depression through all this"*.

Ill-health and poor mental health, factors identified in the quantitative analysis as associated with food bank use, were clearly central to Jim's experience. His deteriorating mental health appeared to be related to the loss of identity brought about by having to stop working and exacerbated by his physical health problems, as well as the pressures and anxiety of significant financial difficulties. It is also possible to consider the negative impact on his mental health of the experience of having to use a food bank. This is apparent from the distressed reaction he recalled having to his wife's decision to go to the food bank, and also from the powerful way in which he described what he felt food bank use represented:

> "*I mean you feel bad enough having to go into these places sick, and having to go through all this paper work with them to get £73 a week, and I think to go to a food bank after that – that would be the end of the road, that would be the last straw, you may as well just hang yourself you know what I mean. It's no worth it anymare. Bugger that for a carry on. I'd starve"*. (Jim, GoWell participant)

While Jim's food bank experience had been a very recent one-off – "*you don't go back, unless you are really desperate*" - Martha, a refugee living with her four children, described how food banks had been an important lifeline for her over an extended period of time whilst seeking asylum. Having been living in another city at the time, Martha recalled the experience:

> "*it was really horrible. Because at that time I wasn't getting all these benefits you understand. The hospital, because of my son, I only have one boy at that time, they try to help me with all these food bank. That is what I have been using to take care of myself at that time*" (Martha, GoWell participant)

In this context, not entitled to support from the social security system, the food bank formed the only safety net Martha was able to access. Ill-health was also a factor for Martha, whose two sons suffer from a particular health condition. Her first contact with a food bank was through hospital staff who were caring for her first son, and she suggested that his illness was an important reason for them helping her to access it. Like Jim, Martha considered having to use the food bank as a negative experience. Yet perhaps because of her long-term status as an asylum seeker, she was resigned to the fact that she had no alternative:

> "*It was horrible, but what can you do, you don't have choice in those moments. Anything you see in that moment you have to just take it and say, "well, it's part of life"*" (Martha, GoWell participant)

Having since secured refugee status and moved to Glasgow, Martha had a further experience of using a food bank: "*That time I don't know there's a mistake, a fault with the benefit, they didn't put the money on time*". Administrative errors and delays in benefit payments have been widely reported as a principle reason for accessing a food bank (Loopstra and Lalor, 2017; Trussell Trust, 2017). In this situation it was Martha's health visitor who suggested the food bank and brought her the parcel.

For Martha the food bank had become something she was used to using as a means of feeding her family when she did not have access to resources to buy her own food. Indeed while Jim was horrified at having received a food bank parcel and resolved never go to one himself, Martha was much more accepting of food banks as an unexceptional part of the support available. She suggested that she would even feel lucky to be able to use one if she was to need such help in the future, recognising that it is not universally available:

"not everybody get opportunity to get this food bank, you can't just go and say "I want food", you have to answer the question – "Why you want it? What happened to you?" "
(Martha, GoWell participant).

The third interviewee who had accessed a food bank (although he did not describe it as such) was Makeen, a married father of one and refugee. Makeen worked part-time as a security guard and struggled to find a job with enough hours to enable him to get by financially. He spoke about receiving a bag of food every week from the mosque he attended, support he relied upon to enable him to feed himself and his family: *"And then waiting for next Sunday, I can't wait to get it!"* Like the others who had used a food bank, Makeen also felt he has no alternative but to turn to the mosque for help in this way. And similarly to Jim, using the food bank represented a significant change in his circumstances*:*

> *"I don't have choice. If I have choice I can eat what kind of food I want but I don't have choice. Force yourself to do things you know you've never been doing"* (Makeen, GoWell participant)

Makeen described how the food from the mosque supplemented what he was able to buy from low-cost supermarkets. The food bank was part of his strategy for feeding his family on a very low budget. As with Jim and Martha, it was financial reasons - a lack of income to access sufficient food - which led Makeen to access food bank support. However unlike the others his source of income was paid employment, not the benefits system.

Echoing both quantitative and qualitative findings from Go Well participants, service providers interviewed generally recognised the drivers of food bank use to be financial. The impacts of welfare reforms were particularly highlighted, and the role of benefit sanctions specifically, as reasons for food bank use, as well as a general recognition that low incomes and high cost of living were often driving people towards food banks. Asylum seekers living with very limited access to statutory support and not allowed to take on paid work were also commonly identified as probable food bank users. Sarah, a GP, was very clear about the groups she considered to be likely food bank clients:

> *"The food bank clients then, there are two major groups that I've come across that flag up that they need a food bank, maybe three…So it's asylum seekers, people with substance abuse problems, and mental health problems, who are on low income, and that'll be your, that'll be the people who'll quickly be the ones that need that type of direction to get enough to eat"* (Sarah, GP)

Service providers with direct experience of supporting people who had accessed food banks also recognised the relationship with ill health. Alan, a legal advice provider supporting people within food banks, commented:

"*the characteristic that jumps out at you is that they are people who are, they are not ordinary able-bodied people, they are people that have got disabilities, they have got other sorts of learning difficulties or mental health problems*" (Alan, legal advice provider)

Several service providers also recognised that food bank use would be particularly distressing for people for whom it represented a significant change in their life circumstances. Turning to a food bank was seen to be the most difficult for those who have not had to access any kind of support before. Stuart, a housing support worker, contrasted this experience with that of others who have long-term difficulties and where therefore perhaps more used to accessing this sort of help:

"*I think some people are just deeply mortified that it's come to that. For some people, it's maybe not new for them, they've maybe had to access some sort of support in that way through their families or in their younger days and it's been an ongoing struggle. Whereas you're finding now there are people who have never had to access services like that before, as I said people who are in employment or people that have lost employment, and it's just a shock to them… like, "right, god, this is what it's come to?", and do you know it just feels like failure to them that they are having to access support*". *(*Stuart, housing support worker, Glasgow)

However as examined in section 8.5 from the perspective of local residents food banks were found to carry particular stigma among interviewees from a wide range of backgrounds, even for people who had long term problems and experience of using multiple services, including homelessness provisions.

The qualitative findings suggest that food banks are used by people in a range of situations and from different backgrounds, and yet what they have in common is the experience of acute financial difficulties. The stories of the interviewees presented here provide different examples of the challenges facing those who come to use food banks: ill health; low pay; asylum seeking; benefit delays. Their accounts, and the reflections of service providers, also highlight that, while providing an important life line, the food bank experience is often felt to be deeply negative. Amplifying the results of the quantitative analysis, these

qualitative findings also emphasise the importance of the relationship between health, mental health, and food bank use.

When interviewees spoke about the anxiety and mental distress of having to use a food bank, it was clearly related to the shame which turning to such sources of help with food was felt to carry. Their accounts suggest that anxieties associated with financial difficulties are part of the context of food bank use, but may also be exacerbated by the experience. The shame of food bank use, and the implications of this shame for those who experience it, is now examined.

8.5 "I was that embarrassed the tears were running down my face": The shame of the food bank experience

As discussed in Chapter Three, it has been widely reported that food bank use can be a highly stigmatising and shameful experience (van der Horst et al., 2014; Garthwaite et al., 2015; Purdam et al., 2016). Such feelings were expressed by interviewees with experience of food banks who were involved in this study and also acknowledged by service providers who had supported people to access them. Shame was also widely cited as a reason for not using a food bank, as discussed at section 8.6.

Walker et al. (2013) describe shame as a co-constructed emotion, in that it occurs as a result of a sense of failure to meet expectations set by oneself, as well as a feeling of being negatively evaluated by others. Food bank use, as described by the interviewees here, carried both these concepts of individually and societally generated shame. Using a food bank represented a huge shift in their sense of self. Makeen articulated this experience of shame and feeling of failure to live up to his expectations of himself:

> *"force myself go there, but when I get there, sometime I feel, what name is, shame myself honestly, it's honestly shame myself. Get every Friday go in the queue waiting for food. I wasn't expecting that kind of things happen for me honestly. A couple of years ago I wouldn't think that things, but now times changed honestly". (*Makeen, GoWell participant)

According to Scheff (2000: 96) "shame feels like weakness and dissolution of the self". This profound sense of personal failure was felt acutely by Jim who exclaimed:

"Ohhhh, we're right down in the world now. Bottom. Hit rock bottom. If you've got to go to a food bank. Terrible". (Jim, GoWell participant)

For his wife Karen, the shame or embarrassment of going to the food bank was particularly distressing:

"*I was that embarrassed the tears were running down my face. I've never been that embarrassed in my life, you know what I mean, and it takes a lot to embarrass me. But tae go into one of these places and lift a bag of messages* [shopping]*, it's so fucking low"*(Karen, wife of GoWell participant Jim)

While Martha did not articulate the same feelings of personal failure as the other interviewees who had used food banks, she did indicate that using a food bank was something she was embarrassed about and would not disclose to others, particularly not those from her own community:

"*No I didn't tell anyone, because with African people the minute you start telling anyone you went to a food bank, ahhh they will start laughing at you"* (Martha, GoWell participant)

In this way Martha also suggests food bank use to be potentially humiliating and an indication of failure to meet wider social expectations. Similarly Denise, an advice worker, suggested that the social shame of being known to have used a food bank meant people would travel long distances in order to avoid being recognised:

"they won't go to the one local to them cos the thought of somebody seeing them is just horrendous, they'll travel across the city, no bus fare, they'll walk two miles to access another one because they are so embarrassed that they are in a position of having to do that" (Denise, advice worker)

Such comments also suggest the potentially socially isolating implications of food bank use brought about by participating in behaviour which society considers shameful. As Walker (2014: 48) comments, "people in poverty are subject to shame as a social sanction for transgressing the norm of self-sufficiency". Indeed withdrawal from social life in order to preserve pride, and the subsequent weakening of social relations, has been recognised as an impact of the shame of poverty (Gubrium et al., 2013). Yet by contrast Makeen expressed a sense of solidarity with others accessing the mosque-run food bank:

"there's a lot of people you know that's struggling, financial situation like me, there's a thousand people here that's same like me...Maybe my situation and their situation maybe different but the one thing's common this need support for food" (Makeen, GoWell participant)

His comments suggest that he perhaps found comfort in recognising that his was not a unique experience, possibly diminishing his sense of personal and social shame.

The encounter in the food bank itself was often described by interviewees as a shaming experience. Martha recalled food bank volunteers at times even behaving in what she described as racially discriminating ways*:*

"If I went there by myself, they just give you anyhow, they don't care. But because you went with somebody, and this person is not an ordinary person, it's somebody important, it's a doctor you know...It's not somebody my colour too...because in that moment if you are a coloured person it's hard for you to get things, always hard" (Martha, GoWell participant)

According to Walker (2014), external shaming may be perceived or anticipated, as well as involve actual verbal or symbolic gestures by those considered superior to the person experiencing shame. In the context of her account of using a food bank, Martha described intentionally avoiding direct eye contact with other people:

"Just like I don't have to look at people, because if you look at people you won't reach anywhere you will just be there, so just sometimes just look and just remove your eye line". (Martha, GoWell participant).

She seems to suggest that this behaviour was a strategy to protect against the shaming process of being made to feel inferior by others through the symbolic gesture of meeting their gaze.

The food which was received at the food bank, and the process of eating it, could also be perceived to be symbolically shaming. Karen described with the disgust the poor quality food she was given at the food bank and the experience of forcing herself to eat it:

"that Frae Bentos pie mate, that fucking fake stuff, that's something I wouldn't even attempt to buy. But see at the time, it was good enough, playing about the plate with it" (Karen, wife of GoWell participant Jim)

Emotional reactions to the contents of the food parcel, particularly in relation to unhealthy or out of date food, are also commented on by van der Horst et al. (2014) in their study of food bank use in the Netherlands.

For Martha, it was important to be creative with the food she received at the food bank, adapting it to suit the tastes of her children:

> "*For me I know that my children might not like it but I try to do something about it… so the canned things I opened and the baked beans I washed the tomatoes everything out and it didn't come out too bad – they eat it*" (Martha, GoWell participant)

These experiences reflect the importance, as discussed in Chapter Seven, of individual choice and control over food and the significance of food for individual identity. The loss of agency in relation to food brought about by having to use a food bank clearly carries significant shame. Perceptions of the type and quality of food provided by food banks as reasons for not using them are discussed at section 8.6.

The process of asking for help and having to admit an inability to acquire one's own food was felt to be shameful and demeaning. As Karen commented:

> "*It was the first time I've ever had to go to get help myself, aye it was degrading. That's the way I felt, I felt degraded. That I had tae take aff of them*". (Karen, GoWell participants)

Ideas of queuing, begging, and receiving hand-outs were all associated with the humiliating experience of using a food bank. Being able to meet the basic needs of one's self and one's family are vital foundations for feelings of autonomy and self-efficacy. As a result, basic necessities of food and shelter are not only vital for human survival but, Walker et al. argue, also imbued with symbolic significance. Reflecting on their own research, the authors suggest:

> "there is no more telling symbol of failure than the inability to provide appropriate food and shelter for oneself and one's family; for respondents this was the epitome of shame and demonstrable evidence of having succumbed to poverty" (Walker et al., 2013: 222).

Such experiences are echoed in the accounts of interviewees in this study.

Food bank use was recognised as symbolic of personal failure, not only by those who had used them, but by other local residents, service providers and policy makers alike. Stuart, a

housing support worker, commented on how he felt clients might respond to the suggestion of going to a food bank:

> "*When it comes to a food bank voucher, you are generally pointing, possibly, at them failing. It could be you are pointing, you are making reference to how they are failing in life, or how they are viewing you saying that*"

Julian, a GP, also reflected: "*I would imagine it is quite difficult for people to do that, unless you were quite desperate. 'Cos it's kind of admitting defeat isn't it*".

Several service providers described strategies to reduce the stigma and shame of using a food bank, such as offering to go with them to the food bank, or have a food parcel delivered. However, Alasdair, a third sector director, reflected on the portrayal of a food bank in the film *I, Daniel Blake* and suggested that despite the efforts of those providing the food, the food bank visit was an inherently shaming experience:

> "*the food bank people tried as hard as they could to make it an experience where the woman was in charge. She was told, "take whatever you want, chose what you want, there's not a limit." So in that sense, in terms of those volunteers, they were doing everything that would be ensuring there was dignity in that activity. But even in that, it was as if she was being given permission to be dignified, there was still a question of her having to ask and to receive*" (Alasdair, third sector director)

Food banks as shameful and symbolic of failure – both individual and societal – is discussed further in Chapter Nine. Personal shame and social stigma associated with food banks were also identified as principle reasons why people might choose not to access one. Why people who otherwise struggle to afford food do not use food banks and perceptions of food banks as resisted or rejected are now examined.

8.6 "A wee bit mair respect. I'd rather pay for it": Reasons for not using food banks

The quantitative findings outlined at section 8.2 show that almost 4 per cent of the 3502 survey respondents reported not having used a food bank for reasons other than not needing to - chiefly that they had not wanted to do so. The findings also highlighted the very low prevalence of food bank use among those who struggle to afford food. Comparison of the characteristics across the three groups (users, non-accessors, and non-

users) suggests that there are similarities between food bank users and non-accessors but that the former group may face greater difficulties. These quantitative results appear to confirm suggestions elsewhere that food banks are avoided other than in cases of extreme need (Loopstra and Tarasuk, 2012; Perry et al., 2014).

Qualitative findings of this study also indicate that food banks are likely to only be used as a last resort, and in many cases avoided all together. The findings also suggest a range of factors which might mean someone who otherwise struggles to afford food does not go to a food bank. Stigma and shame; perceived ineligibility or undeserved-ness; and the importance of choice and control over food, were identified as key reasons interviewees who otherwise struggle to afford food gave for not having used a food bank. These three themes are examined in turn below.

First, the stigma of food banks was clearly felt very strongly by interviewees, and many indicated the need to avoid them in order to preserve pride and self-respect. As Arthur commented:

> "*You see it on the telly and you see them "I don't like that, I don't like that" on like Benefits Britain and all that. No I wouldnae dae it. I wouldnae dae it at all. A wee bit pride – stonding in a queue for grub, naw – stonding in a queue and paying for your food that's it.* What do you think the difference is? *A wee bit mair respect. I'd rather pay for it and whatever".* (Arthur, GoWell participant)

Arthur's reference to the television programme *Benefits Street* and its portrayal of people at food banks reflects the way in which food bank users have been stigmatised by the media and the impact which this has had on public attitudes towards them. Analysis of media coverage of food banks has highlighted how stigmatising language is commonly used to describe them and those who are accessing them, reinforcing already pervasive narratives which seek to demonise benefit claimants, question the validity of their poverty, and draw distinctions between those deemed 'deserving' and 'undeserving' of help (Wells and Caraher, 2014). To some extent Arthur's comments suggest the process of scape-goating or 'othering' (Lister, 2004) described in the literature, whereby people in poverty seek to distance themselves from other groups whom they consider fit the stereotypes of 'undeserving poor', 'skivers' or 'benefit scroungers' (Walker et al., 2013). In order to retain a sense of pride and agency, this enactment of projected shaming secures a position at least one step above the bottom of the social hierarchy.

Similar ideas about 'undeserving' food bank users were expressed by other residents, as well as service providers, interviewed. It was often suggested that food bank use might be driven by people being irresponsible with their money, choosing to spend it on other things such as drugs and alcohol. As a result, interviewees were often eager to distance themselves from this stigmatisation which comes with using a food bank.

Using a food bank was widely considered to be a negative experience. Tahir had not used a food bank but anticipated the feelings of shame which going to one might cause, and the implications it would have for his mental health. His perceptions echo the experiences and impacts described by those interviewees who had used a food bank:

> "How would you feel if you were going to a food bank? *A bit of shame. Why should I be in that status? To go to a food bank, I would be worried actually, I would be worried for myself. I'd get stressed, I'd get depressed if I go to a food bank. Seriously, I don't want to go to a food bank."* (Tahir, GoWell participant)

Several service providers interviewed also recognised that stigma would often prevent people from using food banks and that they would use other strategies to secure food, principally help from family or friends, before considering it. As Denise commented:

> *"Some people are still quite ashamed to use them, and I think people will borrow from friends, or just go without, quite often"* (Denise, support worker)

Certainly several of the GoWell participants interviewed indicated that food bank use would be a last resort after exhausting all other possible options, as Moira commented:

> "*If I had no money, no food at all for them* [her children]*, and I couldn't get any more money… I would have to have nothing in the house, and if I couldn't get a loan off of anyone, you know my Mum sort of thing"* (Moira, GoWell participant)

As discussed in Chapter Seven, self-reliance in relation to food is hugely important for individual agency and sense of self. For the households interviewed, food bank use represented a failure to achieve this, and therefore a shameful state of dependency on others. Richard, who suffered from ill-health and struggled with addictions, was reliant on support from friends and family to manage daily tasks. Yet even in this context using a food bank was not something Richard would consider as it appeared to represent a deepening of what he felt to be his shamefully dependent status:

"I rely on people too much as it is and I feel a bit like a fucking, I don't know just I rely on people too much" (Richard, GoWell participant)

As discussed in Chapter Seven, reliance on family and friends for food was a common strategy for people experiencing food poverty. Even positive sources of help at times of extreme financial difficulty have been found to induce feelings of shame. According to Walker et al. (2013), having to expose one's poverty and turn to others, even those closest to us, can feel like failure, such is the strength of poverty induced shame.

Related to the issue of shame associated with the food bank, perceived ineligibility or undeserved-ness was identified as another reason people would give for not having used a food bank. Feeling that they should not, or would not be able to get help from a food bank because of the idea that, "*there are people that are worse off than me*" was commonly expressed by residents and echoed in comments by service providers. Food banks were often thought to be for "*the homeless"; "people on the streets*"; people "*on the social*". For Moira, she believed that she would not be eligible because she and her husband were in work:

"I just think they'll just think, "oh yous are working you should be able to", that's just, "you should be able to afford things cos the two of yous are working"". (Moira, GoWell participant)

The sense that people in work would be expected to be able to cope was reiterated by Gail, a worker at a mental health charity:

"they say, "no no no I won't be entitled to that". I say, "you will be. If you can't afford to feed your children then you are entitled to go there, just because you're working", I said, "you might get looked at funny and frowned on. But when you explain your situation, and they realise you're genuine…"" (Gail, mental health worker)

These comments also highlight perceptions of judgements and discrimination between 'deserving' and 'undeserving' recipients occurring at the food bank itself.

This idea of being undeserving was particularly expressed by two interviewees, Arthur and Richard, who suffered from addictions. Both appeared to have internalised a stigmatised perception of people with additions that they are irresponsible and not deserving of help. This idea of people with addictions, unable to manage their money, as the 'wrong sort' of food bank user was expressed by other interviewees. Richard articulated his feelings about

why he considered himself to be undeserving of help from a food bank, and contrasted that with those he considered to be 'deserving' food bank users:

> *"I don't go 'cos I think there's folk worse aff than me, and if I can afford to drink and smoke then aye, I can afford to eat. But I've got my priorities a bit wrang, and I know that. So I'm no' wanting to go up there and take it aff other people that's maybe got wee kids and that, you know what I mean. I remember when I was, when I had my first daughter, I was only 17 and we struggled and that, you know what I mean, so I wouldnae want to take it away fae them"* (Richard, GoWell participant)

It is important to also highlight that for both Arthur and Richard, this sense of being undeserving of food bank help appeared to be tied up with a general disinterest in taking care of themselves, very low self-esteem, and poor mental health associated with their addictions problems.

Perhaps surprisingly, an important reason which many interviewees gave for not using a food bank was their perceptions of the type and quality of food which they thought they would receive. Again, the importance of individual choice and control over food was apparent in how people described food provided by a food bank. Richard described having been brought food bank food by a friend. Although grateful for the gift, he said:

> *"It wasnae stuff I would normally buy, you know likes of Tesco wee aine* [own brand] *rice pudding, but aye if you're hungry enough and starving, aye I ate it"* (Richard, GoWell participant)

Food bank food was widely imagined to be tinned foods, and often out of date or otherwise damaged. When asked if he would use a food bank, Tahir's initial answer was:

> *"No. What you get in food bank? You get all tin cans, I don't want canned foods, we don't eat canned foods. It's not healthy. Better be starving than eating canned foods. What I feel"* (Tahir, GoWell participant)

Arthur made similar comments regarding his dislike of the sorts of foods he believed food banks offered. Both men suggested they would prefer to go to the extremes of starving or begging than accept this sort of food:

> *"Because I've seen what they gie ye, it's pasta and potatoes, things like that, the potatoes are tinned potatoes, they're solid. I'd rather go oot begging in the street actually to tell you the truth"* (Arthur, GoWell participant)

While not commonly mentioned, a couple of interviewees did also suggest that it was lack of awareness of the availability of food banks which had prevented them from using them at times of financial difficulties. Speaking about why he had not used food banks while seeking asylum, Tahir commented:

> "*We didn't know actually. That is not the main reason, we didn't know about food banks, we didn't know at all*" (Tahir, GoWell participant)

However he still suggested that the quality of the food provided would have dictated his decision to use food banks, even at a time when he was especially struggling to afford food:

> "Do you think if you had known about food banks at that time you would have gone? *I think yes. I think at least go and try and see what you are given to eat. Especially in asylum you don't have enough money. At least I would try it once, you know*". (Tahir, GoWell participant)

In relation to reasons for not having used a food bank identified in the quantitative data, other than not needing to, it was not wanting to use a food bank, rather than not being able to, which was the main reason given for 'non-access'. This idea of unwillingness to use food banks among those experiencing food poverty is confirmed in the qualitative data, as outlined above. However, the qualitative data also reveals the central importance of the role of local services, including the attitudes and knowledge of individual workers, in determining why and how food banks may or may not be accessed. The relationship between food banks and other services, and the role they have come to play in the safety net of social provisions is examined more extensively in Chapter Nine. However, routes to the food bank, from the perspectives of residents and frontline workers, are explored below as a means of further understandings who does, and who does not, use food banks.

8.7 Routes to the food bank

Clearly for all three of the households interviewed which had used a food bank, the principle driver for using the food bank was a need for food. However the routes they took to the food bank were very different and appear to a great extent to have been contingent on several external factors. In Jim and Karen's situation, their awareness of the food bank depended on their existing social networks. Karen had heard about the food bank in her

area through word of mouth and she had been surprised to discover there was one nearby. Karen spoke about the lack of information about food banks provided by services, suggesting she felt it was their responsibility to do so:

> *"it's no' as if you get a letter off your housing – "oh there's a food bank here or there's a food bank there". It's word of ear, it's no' as if it's processed out, if you know what I mean. I didn't even know there was a food bank. There you go, out of all the years I've stayed here"* (Karen, wife of GoWell participant Jim)

Martha, the only interviewee to have been referred to a food bank by statutory services, acknowledged that access was dependent upon relationships with individual professionals:

> "*Because they can't give you food bank just like that…but through those kind of people* [medical professionals] *you can get it, I mean I can't just go there on my own and say "I want food", no, someone have to go there and show them something before they can give you food"* (Martha, GoWell participant)

She also described having to explain her situation to those at the food bank in order to satisfy them that she was in genuine need of food. For Makeen it was through his membership at the mosque that he had become aware of and supported to access their weekly food parcel provision. He also reported an element of screening, or means-testing, by the mosque in order to determine who was able to access their help:

> "*they ask you to explain what situation bring you here, why, they explain everything about your financial and where you're living and why you don't have enough money, explain, and if they are satisfied they give you".* (Makeen, GoWell participant)

Echoing these experiences, it was also often recognised by service providers that the rules of the food banks themselves played an important role in determining whether someone could use their services:

> *"the food bank would as a rule of thumb only provide food on three occasions over a six month period, and it's emergency food aid, so you have to assess whether someone is in that level of destitution… so that's the criteria, the stated criteria"* (Stuart, housing support worker).

Awareness of food banks and their role varied widely among both residents and service providers. A lot of knowledge of food banks at a local level appeared to have been acquired via word of mouth. Some interviewees knew of friends or family members having

used food banks and had heard reports from them as to how they were accessed, what was provided, and what the experience was like. People also suggested that they were aware of local food banks through posters and advertising in places such as community centres and churches, as well as at supermarkets collecting donations. School charity collections for food banks were also mentioned, as were reports about food banks on television and in newspapers. Tahir suggested that food banks had become much more commonplace in recent years:

> "*we see posters so many posters everywhere, before we didn't see, now wherever we go we can see – "donate food", "food bank so and so". So many places, we get lots of information coming out now*" (Tahir, GoWell participant)

Richard also commented on the increase in awareness of food banks as a source of help, suggesting that this awareness of the service might be part of the reason for the increase in use:

> "*I think it's 'cos they're needed a bit more noo. 'Cos they're sanctioning people wi' there brew money noo, I don't know if that's got anything to dae wi' it. But they're mare accessible noo. I know that, more known*" (Richard, GoWell respondent)

Service providers also acknowledged that word of mouth was an important means for people to find out about food banks and how to access them. Several suggested that they would often be asked by clients specifically about food banks: "*they know they can come here and we will give them advice on the food bank*" (Liam, housing officer).

It was clear that frontline service providers play an important gate keeping role in relation to food bank access. To a large extent this role has been imposed by the operating model of the Trussell Trust food banks whereby access to a food parcel is dependent upon a referral from a recognised agency. Interviews with service providers revealed inconsistencies in the ways in which such referral processes operate. They also suggested substantial variability in the knowledge, attitudes, and practices of individual professionals in relation to identifying and referring people to food banks. Those with very detailed knowledge of the work of food banks often had personal involvement with them, including as volunteers through churches. This personal connection to food banks appeared to influence how they viewed their role in relation to making food bank referrals. As Gail, a mental health charity worker commented: "*I've got the food vouchers, and it's my signature, and I contact the church in Blackwood because it's my church that gives the food*".

Those whose jobs specifically involved welfare rights advice and supporting people facing destitution such as housing officers and social workers, appeared to have better knowledge of and often a close working relationship with local food banks. Healthcare professionals were in general less aware of food banks and making referrals to them tended not to be something they considered to be a part of their job role and was done in a rather ad-hoc manner. Sarah, a GP, commented on the difference between her own approach to supporting people to access food banks and that of her colleagues:

> "*many of my colleagues will not address that at all, they are very black and white, "we are there to address health needs we are not there to address that stuff". And they'll say, "We'll put a poster in the waiting room but that's as far as it goes""* (Sarah, GP)

Instances of mistakes being made in relation to food bank referrals by service providers were mentioned on two occasions. Time constraints in consultations were mentioned as reasons why staff might not discuss issues related to financial difficulties in general, and food banks specifically, with clients/patients. Medical professionals in particular often felt it would not be appropriate, commenting that raising such issues would be likely to offend people. Pauline, a community dietician, suggested that she would only give information about food banks if she was asked for it, suggesting: "*I think it's the patients' responsibility to access all the services that they need*".

Identifying people as potentially in need of help from a food bank, and the decision-making process involved in making a referral were highly variable. Service providers had different perceptions and levels of understanding about who might use a food bank and in what circumstances. For those working more closely with food banks, they were commonly considered to be a crisis measure. Referrals tended to be made in situations where people were hungry and had no other option, generally as a result of delays within the benefits system or benefit sanctions. While it was also recognised that help from food banks could be needed by people with chronic difficulties affording food, including those in low-paid work, these instances tended to be anecdotes from the media and other sources rather than from professional experience of supporting someone in-work to access a food bank.

It also appeared that the existence of food banks had influenced how service providers considered the food needs of people they were working with, and the sorts of support which they felt it might be appropriate for them to access. Certainly Sarah, a GP, commented that for her the food bank had to some extent had an influence on her

professionally, *"in terms of taking on the responsibility of finding out if that is a need in people's lives"*. The way in which food banks, as an apparently available source of crisis support, had come to influence the sorts of intervention provided by social work services was particularly striking. While in other services food bank referrals appeared to be made at the discretion of individual workers, this particular social work department had established a formal, hierarchical decision-making procedure:

> *"they* [social work management] *make that decision as to whether or not they* [social work clients] *get that destitution payment and what form that is, do they give them ten pound for electricity and a food bank voucher?"* (Laura, social worker)

In this context it was clear that the food bank had become an established part of how people seeking support from social work might be supported. Yet for Laura there did not appear to be consistency in how the decision to provide a food bank voucher, as opposed to an alternative form of help, was made: "*my observations from that is so varied, so I couldn't even make a, a kind of guess as to why that is"*.

Insights from both residents and service providers suggest that who accesses the food bank and in what circumstances is shaped by local knowledge, attitudes and relationships. Two GPs working in the same practice may have very different understandings about food banks and therefore provide very different advice about them to potential users. Membership of particular cultural or religious communities may also influence whether or not you might use a particular food bank, and likewise whether or not you support people to access them. Patterns of food bank use in a particular area will also likely depend upon the accessibility of the local food bank – including their opening hours and rules – as well as their relationships with local services and where and how they promote themselves. This understanding of food bank access as contingent is further examined in Chapter Nine which proposes different framings of the relationship between food aid and the welfare state.

8.8 Conclusions

The quantitative and qualitative evidence presented in this chapter provide different forms of knowledge about the use of food banks and their role in deprived communities in Glasgow. These different perspectives help develop a rich, multi-dimensional

understanding of the emerging position which food banks are coming to inhabit within the welfare state in Scotland.

In considering who it is that is using food banks, quantitative analysis found rates of food bank use to be highest among single people compared with other household types, and that being male and being younger than 40 increased the odds of food bank use, independent of other sociodemographic and financial factors. Other studies of the demographics of food bank users in the UK have also identified single male households to be over-represented (Loopstra and Lalor, 2017). Certainly this demographic has also been identified as far more likely than others to have been affected by benefit sanctions in Scotland (Scottish Government, 2014c) and may be less likely than other household types to have social networks they can turn to for support.

A striking finding of the quantitative analysis was the relationship between food bank use and ill-health and disability. The qualitative findings also suggest that ill-health was common to the experiences of those who had used a food bank. This was reinforced by the quantitative findings presented above which identified that almost a fifth of those impacted by changes to Employment and Support Allowance (ESA) had used a food bank. The high proportion of food bank users who have a disability was also reported by Loopstra and Lalor (2017) in their food bank survey. The vulnerability of those out of work due to long-term illness or disability to food bank use, also points to the impacts which changes to disability and sickness benefits is having on particularly vulnerable groups.

The 'food hand-out' appears a particularly powerful symbol in the discourse of shame and poverty – an image imbued with feelings of failure, abandoned pride and loss of agency. The shame and stigma associated with food banks and experienced by the food bank users interviewed also raises the possibility of negative effects of food bank use upon mental health. The prevalence of mental ill-health among food bank users identified in the quantitative analysis, could therefore be considered an indication of a complex range of interconnected factors including: the sorts of issues faced by people experiencing acute financial problems; the impacts of those financial problems; the impacts of food bank use specifically; as well as the failures of existing services to provide adequate support in order to both prevent and treat mental ill health.

Identifying the factors associated with food bank use appear to indicate the sorts of groups who struggle most to afford food, and in particular those who have not been adequately provided for by the welfare state. The relationship between food bank use and welfare

reforms reported in this chapter helps to strengthen the evidence base which identifies the social policy drivers of food bank use (for example in Loopstra et al 2017). However the findings also suggest that there is more than one way in which the operations of the welfare state might determine the nature of food bank use. The primary route to the food bank is via existing services, and frontline staff clearly play important gatekeeping roles to food bank access. The inconsistencies with which such access is provided suggests a randomness to the patterns of food bank use, and a fragmentation of basic social support. While driven by acute need, food bank use appears to be contingent on local practices and networks between services, the knowledge and attitudes of individual service providers, as well as on available resources. The relationship between food banks and mainstream welfare services, in the context of both service delivery and policy making, is explored in more detail in Chapter Nine. Such analysis seeks to examine the ways in which food banks might be challenging and changing welfare states.

Chapter Nine: Understanding how food aid is challenging and changing welfare states

9.1 Introduction

Following close analysis of food poverty and food bank use within deprived neighbourhoods of Glasgow as presented in Chapters Seven and Eight, this chapter brings together findings from the qualitative fieldwork in both Scotland and Finland. In doing so it explores how the growth of food aid in both countries, as examples of two different welfare state regime types, might be shaping how those welfare states are experienced and understood. In doing so the third and final research question of the thesis is addressed: *How is food aid challenging and changing the welfare states of Scotland and Finland?*

At section 9.2, the perspectives of policy actors on food poverty and the food aid response are considered in order to understand how these concepts are defined and engaged with at the policy level in both countries. Next, at 9.3 insights from policy maker interviews which reflect on the broader role of food within the welfare states of both Scotland and Finland are explored, drawing on the framework presented in Chapter Four (see Table 4.2). Here the changing ways in which the welfare state might expose or protect citizens from food poverty depending on how food is framed in each context, are considered. Such analysis is important for setting the policy context for more detailed examination of the evolving relationship between food aid and the welfare state. At 9.4, a characterisation of the relationship between food aid and the welfare state, arising from analysis of interview data in both countries, is presented. This section foregrounds the perspectives of those working in direct welfare service provision on the growth of food aid and its impact on their work, as well as considering how service users and policy makers perceive the state-food aid relationship. This comparison of the Scottish and Finnish cases offers a critical insight into how and why food aid might be playing different roles in different welfare state contexts. Perspectives on the future role of food aid provide important insights into the direction of travel regarding policy responses to the issue and have implications for the changing roles of the welfare state and voluntary sector in meeting people's basic food needs.

9.2 Policy makers' understandings of food poverty and the food aid response

9.2.1 Perspectives on the food poverty problem in Scotland

Findings from policy maker interviews indicated a general recognition that food poverty was a significant problem in Scotland, as well as a broad understanding of its impacts and the types of groups affected. Policy makers' perspectives in many ways resonated with the accounts of participants experiencing food poverty interviewed. Food was recognised to be an issue of health, of income, of social and community life, and responses to food poverty were seen to involve overlapping and related policy agendas. Food poverty was understood to have become a particularly topical issue in Scotland over recent years. As Elaine, a social and public health policy specialist commented: "*my sense is that food poverty as a distinct issue has increased in profile*". The current engagement with food poverty was recognised as having been particularly driven by the growth in food banks, which had provoked public and political debate, demanding a policy response.

Policy makers in Scotland identified the need to address food poverty as part of a broader agenda to tackle poverty and inequality, focusing on the structural and financial drivers. Language of early intervention and prevention was used, particularly by those who held government roles, to describe the sort of policy approach which was considered necessary to address food poverty. As Sandra, a senior civil servant commented, highlighting the current activities of the Scottish Government which she considered as evidence of their commitment to this approach:

> "*things like our work around fair work, the living wage… So it takes you into some of the Fairer Scotland[1] action planning looking at the poverty premium…how do we both minimise the costs for individuals and families while maximising their income? And all of those things will help stop that pipeline of folks accessing food banks …our aspiration is much more about that longer term, sustainable position for people*".
> (Sandra, senior civil servant, Scotland)

Alongside this emphasis on income-based, preventative approaches to addressing food poverty, a contrasting narrative focused on the nature of community-based responses and developing different ways from food banks of doing local food provision. Such

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[1] The Fairer Scotland Action plan was published by the Scottish Government in 2016. It includes 50 "fairness actions" for the current parliament with the stated aim of reducing poverty and inequality: http://www.gov.scot/fairerscotland

perspectives incorporated broader concerns around injustices within the food system and interest in its social and environmental dimensions. Indeed Mark suggested a tension between these two perspectives among those developing policy responses to food poverty:

"two philosophies that have shaped that work have been those who would very much want to take an economic rights argument, structural approach, to what the issues are. And those who would want to take a good food, sustainable food approach to what the issues are" (Mark, faith leader, Scotland)

These two framings of food poverty by policy makers in Scotland then reflect key narratives present in the literature and identified by Cloke et al. (2017) as: firstly a focus on food poverty as an outcome of the neoliberal political economy; and secondly as a problem of food security and the food system. The types of solutions proposed from these different perspectives on the problem, and what they suggest about the future of food banks in Scotland, are discussed in more detail later in the chapter.

9.2.2 Perspectives on the food poverty problem in Finland

While in Scotland food poverty was a widely recognised and debated concept, in Finland the term did not appear to exist in social policy discourse. Juha, a senior civil servant, was very clear in how he believed poverty in Finland was conceptualised and measured:

"We have the standard concept of poverty in the EU which the UK accepts, which has several elements: less than 60% of average income; then material poverty; out of work; and being excluded from the society in some way. We don't recognise food poverty, we don't recognise fuel poverty, we don't recognise medicine poverty, we don't recognise housing poverty - it's poverty" (Juha, senior civil servant for social security, Finland)

Others confirmed that food poverty was not a recognised concept in Finland. However, the idea that people cannot afford to eat was seen to be an important symbol of the existence of extreme poverty in the country:

"I don't think it's "food poverty", it's poverty in general, and that's just an illustration, that people don't even have money to buy food". (Tuukka, third sector manager, Finland)

The breadline in Finland, as described in Chapter Five, was recognised as emblematic of poverty in general:

"it is probably the most known word if you are talking about Finnish poverty, if you look at the Finnish news and there is a story about poverty you will usually see a picture of a breadline there, it is kind of a symbol of Finnish poverty" (Tiina, academic researcher, Finland)

Despite this apparent high profile of the breadline, and awareness in the Finnish public consciousness that some people might struggle to afford food, it was widely acknowledged that the issue, as Juha suggested, was not recognised or debated at a political or policy level. Leena, a government social policy researcher commented: "*It is forgotten from the political agenda".*

Food poverty, or the visible breadlines in Finland, was not perceived to require specific policy responses. Instead interviewees tended to emphasise the importance of preventative measures and the universalistic values of a social democratic welfare state:

"the Finnish approach is completely different, we try to make good policies so people wouldn't need to go into these food banks or to queue up for food" (Katja, nutritionist, Finland)

"we strongly think that no government should plan any short-term aid work but long term consistent quality" (Jenni, nutritionist, Finland)

The financial drivers of food aid use in Finland were recognised and therefore interviewees identified income-based responses as self-evident solutions. As Leena, a government social policy researcher, stated: "*with raising a little bit the benefits this problem wouldn't exist*". Jiri, a social policy researcher, however suggested that the relationship might not be so straightforward:

 "*It's* [the level of social assistance payments] *not a lot of money but it is certainly enough to buy food… my basic assumption is that if we perhaps raised the amount of basic security by 10 or 15 per cent, I don't think it would reduce the number of people picking up free food by 10 or 15 per cent*" (Jiri, social policy researcher, Finland)

In summary, understandings of food poverty in Finland were perhaps more nuanced than those held in Scotland. While one perspective did consider it a result of neoliberal economic policies, others, such as Jiri above, argued that the causes of food poverty were more complex, suggesting it to be a marginal issue and that use of available food aid was not necessarily an indicator of economic need. A dominant narrative in the Finnish data was the irrelevance of the concept of food poverty to a social democratic welfare regime,

and defensiveness was apparent among government officials when discussing it. As discussed in Chapter Four, social democratic welfare states are premised on principles of universalism, an approach which is contrasted with the targeting and means-testing of services characteristic of liberal welfare regimes (Esping-Andersen, 1990). The idea of food poverty was therefore viewed as a threat to the conceptualisation of Finland as a social democratic welfare state. Certainly the presence of breadlines calls into question the effectiveness of such universalist policies and apparent generosity of social protection in Finland. Therefore, those most heavily invested in the welfare state where clearly reluctant to confront what the breadlines might mean. The breadline in Finland was at once highly visible, as a powerful image of poverty, yet also largely invisible from social policy debate.

9.2.3 Perspectives on the food aid response in Scotland

Food clearly carries great emotional significance, and popular responses to the growth of food aid reflect what Poppendeick (1998: 48) describes as "the moral power of the hunger issue". The existence of hunger in wealthy societies such as Scotland and Finland was recognised by interviewees to have provoked great ethical concern. Alasdair reflected on the sources of this moral outrage:

> "*we are angry both at the human struggle of our neighbour and at whom we perceive to be the people making the decisions that are having that effect. So to be honest it's got nothing to do with food. It's about the nature of the human condition…it's the manifestation of the truth that we are not autonomous*" (Alasdair, third sector director, Scotland)

This dual frustration and tension between a desire to do something practical to respond to people's hunger and a concern to address the structural drivers of the problem, was articulated by several policy interviewees in Scotland. The paradox of hunger amidst wealth was commented on by Mark:

> "*I think that it is a visual sign of a system that has fundamentally failed. In the fifth, or sixth, or seventh richest economy in the world, to have so many people not having enough food to eat*" (Mark, faith leader, Scotland)

It is this paradox which Poppendeick (1998: 48) suggests to be an important motivation for food bank volunteers and donors and to have driven food aid expansion in the USA. Indeed

she observes that food aid provides an acceptable destination for overproduction and food surpluses and a "moral safety valve" for a society which produces so much food waste.

Interviewees in both Scotland and Finland suggested the existence of food aid to be emblematic of deep social injustice and societal failings. Indeed as McIntyre et al. (2016: 15) suggest of Canadian policy discourse on food insecurity, the existence of food aid in both case study countries has become "metaphorical code for government failure". The specific nature of such failure differed between Scotland and Finland and was reflective of their differing political contexts and welfare state histories.

In Scotland, given the country's devolved status within the United Kingdom and on-going debate regarding its future constitutional position, this symbol of government failure carried particular political significance. As discussed in Chapter Three, the growth of food banks in the UK has been closely associated in political and media debate with recent UK Government welfare reforms. Interviewees in Scotland recognised this relationship, stating that the growth in food bank use had been driven by UK Government imposed cuts, reforms and increased conditionality within the benefits system. Interviewees also commented that food banks had become politicised, particularly in the context of the Scottish Independence Referendum of 2014, where those in favour of independence cited food banks as a powerful metaphor for Westminster Government failure. As Jacqui observed:

> *"Food banks became something that could be held up as an indicator of a failure in society. So it became quite politicised. Before the referendum Alex Salmond* [former First Minister and leader of the Scottish National Party] *was going on about how many food banks there were and the fact that this was one of the self-evident reasons why the Tory government was failing the country, so it became very political".* (Jacqui, food charity director, Scotland)

For Clive, the politicisation of food banks was a source of frustration as he felt the topic was being used for political point-scoring rather than identifying practical solutions:

> *"So what you get from the SNP is, "That's disgraceful that the foodbanks exist and they have to do the work that they do". And actually it's just back and forward political football stuff, and actually no one is saying, "Do you know what? Within the context of the power that we have, we're going to do something".*" (Clive, food charity manager, Scotland)

In their analysis of political discourse around food insecurity in Canada, McIntyre et al. (2016) identified similar framing of the issue in terms of shame and fundamental questions of morality. As a result, they argue, food insecurity becomes constructed as an intractable policy problem "where the policy actors focused on the foundational dispute around moral authority at the expense of policy development or implementation" (McIntyre et al., 2016: 14). However, while some in Scotland felt the political debate around food banks hindered the development of policy action, others saw the Scottish Government's efforts to assert its political difference from the UK Government as an important opportunity:

> *"the Scottish government, certainly over the last decade, want to try and find a different policy response to any issue from what happens in the rest of the UK…So I think the political environment in Scotland at present probably helps Government to take a more naturally social justice, or different from the UK Government, approach to a number of issues, certainly including food poverty"* (Mark, faith leader, Scotland)

Indeed, another perspective offered was of the Scottish Government's commitment to addressing poverty and inequality, as mentioned at 9.2.1 above, but one which also highlighted the limitations to their abilities to do so, given the reserved position of most welfare spending. As Sandra explained:

> *"I think what Scottish Government and Ministers are trying to do, is carve out a space where they can be proactive and make things better whilst also having to mitigate against the effects of a broader set of circumstances that it is not within their gift to control and make decisions around; so you can't improve the full system when you're not in control of that full system"* (Sandra, senior civil servant, Scottish Government)

Interviewees often linked discussions of food banks to the recent consultation on a Scottish social security system and how Scotland might use its newly devolved welfare powers[2]. Food banks were associated with punitive welfare policies of the UK Government and it was widely suggested that the Scottish Government was seeking to take a different approach, centred on principles of fairness, dignity and respect. Reference was often made to the Government's stated commitment to social justice and the development of the *Fairer Scotland Action Plan* as evidence of the steps being taken by Scottish Government to put these principles into practice.

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[2] The Consultation on Social Security in Scotland ran from the 29th of July 2016 until the 30th October 2016: https://consult.scotland.gov.uk/social-security/social-security-in-scotland/

Interviewees suggested that political engagement with food poverty and food bank use was considerably different in Scotland compared with the rest of the UK. The Scottish Government's commitment, within *the Fairer Scotland Action Plan*, to consider enshrining the Right to Food within Scots' Law, was seen to be particularly significant. As Mark explained:

> "*The notion of building into legislation a right to adequate food, and actually an openness to that on the part of Government…That feels like a significant direction of travel, that I don't have a sense is actually happening in other bits of the UK to anything like the same extent. I think we're still dealing in other bits of the UK about how we convince people that this isn't good enough. I think in Scotland we've moved a bit beyond that*" (Mark, faith leader, Scotland)

In Scotland, discussion of food banks was clearly bound up in debates around Scotland's constitutional future and the type of welfare state an independent Scotland might look to become. Certainly the welfare state has been recognised to play an important part in nation-building and the Scottish nationalist agenda has benefited from the ways in which a progressive public policy discourse favouring citizens' rights can serve to: "reinforce the national identity and sense of national solidarity upon which they are founded" (McEwen, 2002: 66).

9.2.4 Perspectives on food aid in Finland

While in Scotland food poverty and food bank use were seen primarily to be the concern of areas of government responsible for social policy (namely social justice and social security) in Finland this was not the case. As described in Chapter Fife, EU-funded food aid in Finland is coordinated by the Ministry of Agriculture. Tiina, an academic researcher, described how this division of responsibility served to distance food aid from political debate:

> "*It's not a social policy issue, it's an issue of agriculture…it's not social policy. If the EU [food aid] programmes would be administered by the social welfare ministers then they would have to address the questions directly, but they don't need to because it is managed in the other spheres. So that's the practical response but it's not political, it's not really politicised*". (Tiina, academic, Helsinki)

Keeping food aid provision separate from the social security system appeared to have involved concerted effort on the part of Government ministers and civil servants. Juha commented:

> *"I said we don't need it…. And they* [agriculture department] *didn't like it because they had the idea that they bring the food aid to our doors and we deliver it to the poor people, or the food banks do it in fact but that we should help them, but we didn't. And we have kept that line for more than 20 years…and it worked. Because we have social assistance for the same job, we don't want any soup kitchens in the streets".* (Juha, senior civil servant, Finland)

From this perspective then, food aid, and its associations with pre-welfare state models of poor relief, carried great symbolic significance and was considered to be a threat Finland's self-identity as an effective social democratic welfare state.

As discussed in Chapter Five, the emergence of the breadline in Finland in the early 1990s was recognised as the first time that the country had had to confront poverty since the establishment of the welfare state. At the time pressure had been put on Government by the Lutheran Church and others in civil society to provide a policy solution. However, Benjamin reflected that while in recent years unemployment rates had returned to levels almost as high as they had been in the early 1990s, Finnish society had become much more used to poverty and less motivated to demand a response. He suggested that while politicians would argue to protect the welfare state, this was largely rhetorical and that Finland was in fact following a hard line of austerity:

> *"Every time we have elections, then there is of course, the Nordic welfare system must be maintained, we don't want any harm to come to it. These kind of beautiful words are said by all political parties."* (Benjamin, academic, Finland)

It was clear that the Finnish Government viewed the growth of food aid as a threat, undermining the existing statutory social security system. Benjamin had played a significant role in the establishment of food aid through the Lutheran Church in the early 1990s. He recalled the reaction of a Government Minister at the time:

> *"The minister herself she took contact to us and said, "what are you doing? You are destroying our social security system. You are taking back all those soup kitchens in the streets and that kind of, the most old-fashioned way of social aid, so please don't"."*(Benjamin, academic, Finland)

He also suggested that, with hindsight, he recognised the significance of such warnings against establishing a system of food aid provision:

"maybe that early criticism of the Finnish social ministry, maybe they were quite right, that if you start this kind of aid system on the basic level it will never stop" (Benjamin, academic, Finland)

As in Scotland, the idea of food aid was recognised to have become an emotive tool in current Finnish political debate. Milla explained how this evocative image of the breadline was used:

"*The breadlines are used as a sort of a weapon that you can go to the Parliament and hear the MPs debating, "yes the breadlines are growing". You will hear the breadline word here or there, but when you come to the real politics you don't ever see ideas… Nobody is really interested in the breadline as such, even though it is there as a concrete action, it is used as a metaphor*" (Milla, academic researcher, Finland)

Although this "weapon" of the breadline was generally seen to be used in leftist criticism of Government, another perspective suggested that it was in fact the far right which employed the devise:

"*No one is talking about it* [the breadlines] *anymore. Except for the right wing people, who are using this like, "we shouldn't spend any money on immigrants because our own people have to stand there and queue for food". So these immigration debates, it's not actually to do with the fact that the food charity exists but it has to do with immigration*" (Anneli, social work manager, Finland)

While out with the scope of this thesis to explore the significance of the growth of food aid to arguments for welfare chauvinism, Anneli's comment here highlights how the symbol of the breadline might be used to argue for a populist welfare state which is explicitly anti-immigrant. Indeed in their study of nationalism and the reframing of Finnish and Swedish welfare states by far-right political parties, Nordensvard and Ketola (2015) explore the different ways in which nationalism and social policy has come to be reframed in terms of a 'welfare nation state'.

In both Scotland and Finland, the existence of food banks in society was considered to carry a feeling of shame at a national level. Jiri suggested this sense of shame, associated with a feeling of powerlessness, might explain the lack of political action:

"I think there is some sort of a shame and guilt attached to those food queues, I think politicians think they shouldn't actually be there, they shouldn't be in the position that they should queue for food but they still don't have the means at their disposal to solve that problem, so they just keep silent" (Jiri, academic, Finland)

Several in Scotland also referred to negative feeling among the wider public about the presence of food banks in Scotland, as Mark commented:

"*I just think that people believe that there is something fundamentally immoral, that something that actually all of us need to survive is not available. So, I think that the profile of food banks is a source of shame to a society that wants to think of itself as a moral society*" (Mark, faith leader, Scotland)

Discussion of the findings presented in Chapters Seven and Eight identified the significance of the individual experience of shame when unable to afford sufficient food or when having to use a food bank, while the societal shame of food aid identified here suggests a level of responsibility on the part of the welfare state to protect people from hunger. The implications for effective policy development of the framing of food aid as shameful are discussed in more detail at section 9.6.

In summary then, the presence of food aid in both countries was clearly highly emotive, and considered a symbol of profound societal failures. There has also been considerable politicisation of food aid in both settings. In Scotland, the Westminster Government was clearly identified as the source of such failures, and the image of the food bank a discursive tool for Scotland to assert its ambition for social welfare distinctiveness. By contrast, in Finland, it was not specific administrations or policy changes, but the entire social democratic welfare regime which, for some, was called into question by the presence of food aid in Finnish society.

Having examined policy perspectives on the nature of the food poverty problem and framings of the food aid response, the following section explores the role of food within the welfare states of Finland and Scotland, drawing on the analytical framework presented at Table 4.3 in Chapter Four. The different ways in which the state has intervened through food, and what this reflects about the nature of the welfare state are considered. Such analysis provides important context for exploring the relationship between food aid and the welfare state.

9.3 Food within the welfare state

9.3.1 The role of food in the Finnish welfare state

Food was recognised to play a central role within the Finnish welfare state. Certainly the provision of food within the public sector was seen to be a distinctive feature, as Leena, a government social policy researcher commented: "*Finland is a model country of collective eating*". The typology developed at Table 4.2 in Chapter Four identified that within social democratic welfare states, the overall position of food is as a public good. Examples of such food interventions are described in Chapter Six, and interviews with policy makers in Finland confirmed this classification. Conceptualisations of food as public good and matter of universalist interventions was also part of the reasoning for why food poverty was often considered an irrelevant concept in Finland.

The government nutritionists (researchers and policy advisors) interviewed described how food interventions had been a founding feature of Finland's welfare state and were still considered distinctive to the ways in which food as a social policy issue might be addressed elsewhere:

"*At that time* [the founding of the welfare state in Finland] *we had politicians who wanted to make it possible for everybody to have access to good food. And then the decision of free school meals was put into law... And that was the basis of food security in Finland. Before that we had terrible insufficiency diseases. You know of course the development of Nordic welfare state, what happened. The issue has been in Finland that even more people would have opportunity to access the nutritionally balanced diets in school, in work, in study places. So the approach is very different than in other countries*". (Katya, government nutritionist, Finland)

Food interventions, such as free school meals, were seen to be emblematic of the principle of universalism within the welfare state in Finland. Leena drew distinctions between the approaches to free school meals in Finland and in the USA, highlighting key differences between Nordic and liberal welfare regimes:

"*If you go to any other country outside of the Nordic countries they are very surprised that everybody here has a free school lunch. If you go to the US that's kind of bad welfare or food charity, but here it is one of the national prides*" (Leena, government social policy researcher, Finland)

Universal free school meals appeared to be a source of pride not only for those who expressed more left-wing political sympathies. Lotta, a Councillor for the conservative Coalition Party in Helsinki, commented:

"*We are very proud that we don't need to pay anything for our children's meals. The children get very good food in the school, and also it is very important for them to learn good habits*" (Lotta, local government politician, Finland)

Jenni explained the rationale for such universal interventions and suggested that commitment to this approach was the reason for policy makers' lack of interest in food aid:

"*We are providing the services for all, regardless of your socio-economic background and this is the important thing ...this is the idea that you are all on the same level, nobody is put into this box that, "now you are the most vulnerable and you can't come out of it". That is why we don't register the people that go to the food banks, it's nothing we want to know*" (Jenni, government nutritionist, Finland)

Here Jenni defends the principle of universalism, arguing that it promotes equality, while suggesting that targeted, means-tested policies characteristic of liberal welfare regimes, are stigmatising and maintain inequalities by putting people "into this box which they can't come out of". While elsewhere in the Finnish data it was recognised that the universal welfare state was in the process of being eroded and reformed, it appeared that state-funded food provision was a popular policy and therefore perhaps more likely than other services to remain as protected public spending.

9.3.2 Food in the Scottish Welfare State

Chapter Six highlighted the different roles of school meals in Scotland and Finland as examples of different approaches to food in different welfare regimes. In Scotland, school meals are free for all in the first three years of primary school, after which they are provided on a means-tested basis. While in Finland it was clear that school meal policies were about the state fulfilling its responsibility to ensure good nutrition for all, interviewees in Scotland considered school meals as an anti-poverty intervention.

The school meal was recognised as a context in which the state in Scotland might be providing children and families with some protection from food poverty. However interviewees identified that outside of term time, children who otherwise would be

receiving a free meal at school were vulnerable to what has been termed "holiday hunger". It was in this setting that the third sector was recognised to have an increasing role to play in addressing food poverty. Alasdair, director of a third sector organisation, described a new initiative:

> "*We are in discussions with folk at the Council about providing holiday activities which would be at one level generic, but have at their heart the provision of food, and ensuing that the uptake of that is focused on those who don't get free meals during the holidays, which is one of the biggest losses for folk on low income*". (Alasdair, third sector director, Scotland)

In Scotland, the gap of the school holidays for meal provision was considered legitimate territory for third sector activities. This insight supports the typology proposed in Chapter Four which suggests that within liberal welfare regimes, the state has a minimal role to play in relation to food. It also highlights particular boundaries of state responsibility in liberal regimes, and where charitable food interventions, perhaps unlike the stigmatised "food bank", might be considered acceptable.

One perspective suggested that there had been a shift in policy discourse in Scotland towards an increasing role for the voluntary sector and local communities in relation to food. Jacqui described what she considered to have been a change in emphasis and location of responsibility for food within the welfare state in Scotland:

> "*I think 10 years ago…we thought a lot of the solutions would lie in public sector food. If we could make food good in schools, and hospitals and nurseries and prisons, we could make all that public sector food good that would drive cultural change, and if we could use the public sector spend to drive specification improvements…now, this is much more about food in the community, this current conversation. It's less about what the local authority is going to do for you and more about what can we make and help communities do for themselves. That's a change I think*." (Jacqui, food charity manager, Scotland)

As described in Chapter Six, food interventions by the welfare state in Scotland tend to be means-tested and targeted at particular vulnerable groups. The principal way in which the welfare state intervenes to protect people from food poverty is through the social security system, subsidising household incomes in order to enable them to buy their own food. Natalie reflected on such targeted food-based interventions, contrasting how different parts of the welfare state might protect people from or expose them to food poverty:

"*They* [Healthy Start vouchers] *are access to fruit and veg and milk and vitamins etc. So I suppose that's another recognition that the state owes it to people at different stages in their life to make sure they are getting access to good, healthy food, particularly around about pregnancy and young children. I think when you match up Healthy Start with the fact that three or four years later DWP can potentially sanction and therefore remove that right to their access to food, I think that's quite interesting*" (Natalie, local government manager, Scotland)

This comment also points to the distinction often made between 'deserving' (here pregnant mothers and infants, who are eligible for Healthy Start support) and less, or 'undeserving' groups in an increasingly individualised, neoliberal welfare regime (Taylor-Gooby et al., 2017b).

While food policy in Scotland was regarded as having traditionally been quite separate from matters of social welfare, focused on the concerns of farmers, producers and retailers, current food policy discussions were recognised to have broadened in scope to include food poverty as a priority:

"*Scotland needs a food policy which is far more than selling shortbread. It's got to be about how we feed Scots. So the Food Commission has strengthened its interests in health and food poverty, there is the new Good Food Nation Bill to really make that about food poverty…I see that the next two years have some big opportunities*" (Jacqui, food charity manager)

From this perspective then the growth of food aid in Scotland has prompted policy interest in food as a matter of poverty from a wider range of state actors than had previously been the case. The fact that food interventions by the welfare state in Scotland have tended to be targeted, anti-poverty strategies – consistent with a liberal welfare state regime – helps to explain why food poverty and the growth of food aid have been readily engaged with as social policy concerns. By contrast in Finland, where food has been framed as a public good within the welfare state and an important vehicle for the universal principles of the social democratic regime, food poverty and food aid are considered marginal to social policy development. The following section seeks to examine the role of food aid in both Scotland and Finland more closely in order to better understand its implications for the welfare state in each country.

9.4 Characterising the role of food aid within the welfare state

Chapter Five gave a brief overview of the ways in which food aid provision is organised in both Scotland and Finland. Examining the relationship between food banks and mainstream services, as established parts of the welfare state, is essential for understanding their position as emerging components of the safety net in both Scotland and Finland. This section proposes a framework, arising from analysis of the interview data from both countries, including from interviews with households in Glasgow, for describing the different ways in which that relationship might be understood. These characterisations of food aid within the welfare state presented below were developed following a process of thematic coding and deeper reflection on the research findings and in the context of the empirical and theoretical literature examined in earlier chapters. The characterisations evolved iteratively, with early versions presented in conference papers and to the external advisory group for feedback and discussion. The final set of characterisations suggest the different ways in which the growth of food aid has shaped the provision of basic welfare state support and in doing so provide a framework for considering the changing nature and purpose of welfare states.

9.4.1 Food aid as creating a contingent welfare state

The first characterisation argues that food aid, as an ad-hoc, inconsistent source of support, is shaping the welfare state towards a system which is unreliable and unpredictable. Food aid, as a charitable intervention, is not a universally or consistently available form of support. Interviewees in both Scotland and Finland recognised the contingent nature of food aid provision. Jiri, a senior social policy academic in Finland commented:

> "*this is an informal activity it is not a social right in the sense that it would be redeemable, it is just charity. We have to always remember that it's charity. And charity always carries this aspect of being a random activity. It is charity and it is serving some people, but it is not serving everyone*" (Jiri, academic, Helsinki)

Alan, a legal advice provider in Glasgow drew similar distinctions between food aid as charity, and legal entitlements:

> "*Obviously it's pure charity* [food banks] *and it's not based on legal rights. Getting something in law is a very powerful thing, it's much stronger than based on people's*

good will. Obviously the food bank…it's not as though it's in a position to be

comprehensive, so there are bound to be people that are going to miss out"

Food aid access in Scotland is largely determined by referrals from mainstream services. As discussed in Chapter Eight, the Scottish data suggested that whether or not, and in what circumstances a referral to a food bank might be made is largely contingent upon the knowledge and attitudes of individual workers. There also appears to be considerable variation in the policies and practices of different agencies in relation to food bank referring. While the Trussell Trust network of franchised food banks implies a level of consistency and coordination to food aid provision, Williams et al. (2016) note the importance of recognising variation in local practices of different local franchises. Use by some residents interviewed of different forms of food aid, such as the weekly food parcels from the Mosque, also suggest a more varied landscape of food aid provision, as acknowledged elsewhere (MacLeod, 2015; Williams et al, 2016).

In Finland, the lack of coordination or consistency in how food aid is delivered was often commented on. It was widely recognised that the informal, voluntary systems of food aid provision had developed locally and that access to food aid is highly variable and dependent upon local policies and practices. As Susanna, a food aid provider in a small town north of Helsinki, commented:

> *"it is totally depending on the NGOs, how much staff and money they have and how much food they can take, and to whom they can give it. Because it also can be different criteria: to whom you give it? Do you have to give your Kela card [national social security agency] or not?… I see the food aid system, as a national thing, it's a mess. It's not fair. Some people get more than the others."* (Susanna, food aid provider, Finland)

Kirsti, a coordinator of food aid for the Lutheran Church, also highlighted how availability of food aid across the country was dependent on capacity and preferences at a local level: *"Some parishes give it once a week, some give it once a month, they can do just what they want, it depends on the parish".* For Susanna, the lack of coordination and unfairness in the system was a source of great concern and she warned against increased reliance upon it on the part of statutory welfare services:

> *"I would say that it should be additional and supplementary, because I don't know how to make it that everyone would get in it, and everyone would get information out of it, and it would be working as well as the social system we have at the moment. The social system is not working 100% well in Finland and I don't know which amount of money*

and people you would need to make food aid system as workable. It's huge work"
(Susanna, food aid provider, Finland)

Given the reliance on surplus food within the Finnish food aid system, the food aid which users would receive was also recognised to be highly contingent upon what supermarkets might happen to provide. Reflecting on her role developing nutritional guideline for public sector food provision, Katja, a nutritionist, commented on the unpredictability of the food available at food banks:

"*It is not very consistent, it is not very planned. What people get from the food banks, they get what is left from the shops, what is not sold...the selection is very random. It is not planned that you get balanced food from there".* (Katja, government nutritionist, Finland)

In Scotland, the food provided at food banks comes largely from donations, rather than supermarket surplus. Here Martha, a mother of four in Glasgow commented on how the sort of food which she received from the food bank would be contingent upon attitudes of individual volunteers:

"*there's always ones that are friendly, they will smile with you, they will give you more things. But some, they just give you anything – still stuff that nobody themselves would even be able to eat they'll just pack and give you*" (Martha, GoWell participant)

The inconsistency and unpredictability of food aid provision were particular themes within the Finnish data. Whereas in Scotland the contingency within the system appeared to largely come from the attitudes and behaviour of individual service providers. In Scotland, as discussed in the following section, there was perhaps a greater assumption on the part of frontline workers that food aid was a reliable form of support. Certainly the lack of coordination within the Finnish food aid system suggests, as some interviewees commented, a low-level grassroots movement of local support which is largely marginal to the mainstream welfare state. In this context, the contingency of food aid is perhaps less significant when it is not expected to perform a key role within the welfare state. However, the views of those working in or researching the frontline context of food aid provision in Finland provided greater insights into the reasons for its use and its evolving role within the welfare state. The next section further explores the extent to which food aid has become relied upon to meet basic needs as statutory forms of support have been withdrawn or reformed in both contexts.

9.4.2 Food aid as substituting for a shrunken welfare state

This characterisation considers the ways in which food aid might be stepping in to take the place of the welfare state as benefit levels and entitlement are reduced. From this perspective, food aid has emerged to fill critical gaps in the safety net created by a retreating welfare state.

Fieldwork in Scotland highlighted that increased conditionality in the social security system and decreased resources in other elements of social welfare meant that service providers were able to apply less discretion when faced with someone experiencing destitution or without money for food. When asked about what they would have done in a similar situation before food banks became so prevalent, most recognised that such situations had been much rarer, and that previously there would have been statutory forms of support they could have accessed which were now no longer so readily available. Making referrals to social work was most commonly mentioned as the strategy which would have been used. Laura, a social worker, reflected on the impact of budget cuts within her profession:

> "*we would really get those folk that were destitute and saying, "I need twenty pound 'cos I've got no money for milk and gas and electricity", and we would pay that. But we've kind of taken that tier away if you like, so we don't make that decision anymore*" (Laura, social worker, Glasgow)

From this perspective, food banks could be seen to have stepped in to fill a gap created by cuts in public sector funding and reforms to the welfare state which have left services with diminished resources and less capacity to offer people the sorts of direct support they perhaps did previously. Sarah, a GP, shared this view:

> "*I have witnessed a decrease in the health and social care budget and I have witnessed some people in society who would have got access from social services more easily, are not getting it anymore…so there are definitely people who beforehand I would tell them to go and get a crisis loan and now that's just not open to them anymore*" (Sarah, GP, Glasgow)

Stuart, a housing support worker, expressed particular frustration that cuts to services limited his ability to do his job which he felt was to empower people to do things for themselves and help them to solve their own problems:

"we try and limit the use of food banks, because it isnae helping, you know it doesnae help in the long run to what we do, you know the empowerment stuff" (Stuart, housing support worker, Glasgow)

The growth of food banks, as Stuart described, was considered detrimental to efforts to pursue preventative interventions and support people to access welfare services which might protect them from future crises. Here Stuart offers a conceptualisation of the role of the welfare state as being to provide more than a basic safety net against destitution, but to act as a springboard to help move people on and promote greater equality in society. There was a clear tone of defeatism when he commented: "*I mean we'll still support people and do it the best that we can, but sometimes the best that we've got is using a food bank*" (Stuart, housing support worker, Glasgow).

The growth of food banks has evidently had implications for how existing statutory and voluntary welfare services are delivered. Workers often expressed ambivalence regarding making referrals for clients to food banks but felt that in many instances they had no alternative. For those working most closely with the social security system, food bank referrals had become an established, routine part of their job roles. Referring to data collected by the food bank where he provides legal advice, Alan commented on the proportion of referrals received from different agencies:

"So I would say social work is the biggest single one, the Jobcentres are the biggest as a whole, the advice agencies are pretty big, the housing associations are pretty big, and the rest are more modest amounts" (Alan, legal advice provider, Glasgow)

That the Jobcentre and social services are readily referring to food banks suggests a level of integration within frontline welfare services, as well as an admission that the existing safety net is no longer able or willing to meet people's basic needs for food.

Another role of food aid within the welfare state is the provision of surplus food to a range of different services which provide meals, such as youth clubs and homeless hostels. As described in Chapter Three, this form of food aid pre-dates the expansion of food banks in the UK. Jacqui, the manager of a food charity involved in surplus food redistribution from supermarkets and food producers, expressed concern as to the state's increasing reliance on this form of food aid to maintain its services:

"Local authorities are increasingly looking to the third sector to provide really frontline services, and also increasingly expect surplus food to be supporting them as well. A lot

of what was local authority frontline services, are now being provided on increasingly shaky funding, being supported by surplus food, which is here today, gone tomorrow. And we are all trying to reduce food waste in the food industry from an environmental perspective. And yet you have front line services relying on it to keep the lights on. It's crazy". (Jacqui, food charity manager, Scotland)

Her comments suggest another dimension of the role of food aid within a shrunken welfare state. Here Jacqui highlights the substituting role being played by food aid in the context of austerity and sounds a warning against such a trend, emphasising the unsustainability of surplus food as a resource. Such concerns regarding surplus food redistribution echo those raised by Midgley (2013) and others as discussed in Chapter Three.

In Finland, given that food aid operates almost entirely separately from the statutory social security system, and the lack of available data on who is accessing it, the extent to which the provision is making up for failures within the welfare state is more difficult to determine. As mentioned above, some interviewees were clear that food aid was largely peripheral to the functioning of the mainstream systems in Finland. Rather than filling a gap in a broken safety net, as Benjamin, an academic commented, food aid in Finland could be considered to operate outside of the accepted limits of the welfare state:

> *"the welfare state system cannot reach everyone so the food bank system is useful for those who are never going to the welfare office"* (Benjamin, academic, Finland)

From this perspective food aid might be an acceptable complement to the welfare state and not necessarily symptomatic of reforms or withdrawals on the part of the statutory system.

While the Finnish state has a constitutional responsibility to meet people's basic needs, the growth of Church and charitable-run food aid had, for some, served to problematized and undermined this role. As Tiina, an academic researcher in Helsinki asserted: "*the food banks are there and that is a sign that the Nordic welfare ideal has failed*". For Leena, a government social policy researcher, the growth of food aid in Finland was also an indicator of wider changes and the country's gradual shift away from a universal welfare state:

> *"This food bank issue is kind of a very, very symptomatic thing. If you look at what it is, it is not only about people in distress, it is huge structural change in our tax system, in how you redistribute wealth in a country, how a country is organised, the relationship*

between municipalities and state" (Leena, a government social policy researcher, Finland)

Unlike those who suggested food aid was largely marginal to a well-functioning welfare state, Anna, a social worker in Helsinki, recognised that food aid had become the last line of defence for the people she supported. For her this represented a fundamental change in the nature of social work and a role-back of welfare state support:

"*I could give them advice where they could go to get some food aid but I didn't think it was appropriate if someone came to get help from me to tell them to go somewhere else. We are the last standing, social security should be the last thing that people turn to, but nowadays its changed, now it's the food aid is the last thing, and I think that's not correct*" (Anna, social worker, Finland)

Food aid use in Finland was considered a symptom of chronic poverty. People experiencing long-term unemployment were commonly identified as typical food aid users. Anna, a social worker in Helsinki, commented:

"*There were usually people who had been customers for a long time, because if you just lost your job, and you are without your job three or four months, you will survive with that minimum income but if you are on pension or something like that, if it continues for years, and your TV is broken, your shoes are broken, then it gets more difficult to cope. That's the thing, I think they are the persons who have been in the system of welfare for many years*" (Anna, social worker, Finland)

Benjamin, an academic, also suggested that food aid had developed because the Finnish social security system did not have the capacity to meet demand from a much-increased unemployed population:

"*it* [social assistance] *was planned in the '70s or '80s when the unemployment rate was less than 2 per cent, so those people who were suffering from any problem they went to the social office to ask for help and it was given. But of course, when there is one fifth of the population in that kind of situation, they were not anymore able to give that kind of extra allowances so the civil society had to do something*". (Benjamin, academic, Finland)

Anneli, a social work manager in Helsinki made similar observations:

"the assistance never was meant to be for years and years, it was temporary, one month, six months. But now there are people who have to live on that for ten, twenty years, but the system hasn't changed at all. We haven't done anything about it. It's completely wrong, it doesn't do what it is supposed to do, it is supposed to be a crutch for a little while and then things get better, you move on, you get a pension or get a job or whatever, but now there are people who don't move anywhere". (Anneli, social work manager, Finland)

In Finland food aid was seen to be routinely used by people in order to top-up low incomes and help them to meet other significant pressures on their budgets including medical costs and high housing costs. The inadequacy of the level of basic social assistance was also often mentioned as a key reason for food aid use. For Anna, a social worker, the link was evident: "*The benefits have been cut and cut, if they were not in that low level, a lot of food aid is not needed"*.

According to Anneli, a social work manager, food aid use was evidence of a weakened and less reliable welfare state:

"Before you could trust that if you are in trouble the welfare state will help you. You will get support you need to get by, not live like rich, but get by. Now that's not true. I think people don't know it. Well they do if they have to go and get food from the charities, but the 80 per cent don't know it, they think it's like it used to be". (Anneli, social work manager, Finland)

In summary, perspectives from Scotland were clear on the role played by food aid in substituting for the now diminished safety net function of the welfare state at times of crisis. The role of food aid providers, namely the Trussell Trust, in shaping this identity of the food bank as crisis intervention, is discussed at 9.4.4. In Finland, perspectives were more diverse. Some considered food aid to have at most a complementary role in relation to the welfare state, while others were clear that it substituted for an adequate social security system – particularly in cases of long-term unemployment and chronic poverty. In the Finnish case then, rather than replacing a shrunken welfare state, food aid could be viewed as supplementing a safety net which is not able to meet demands of modern day levels of unemployment and rising living costs. Indeed according to Esping-Andersen's (1990) typology, the social democratic welfare state is premised on policies which stress full employment, and as discussed in Chapter Six, the Great Depression of the early 1990s

created new problems of long-term unemployment in Finland which have been long-lasting.

9.4.3 Food aid as preferable to a bureaucratic welfare state

This third characterisation considers how, rather than a wholesale replacement of statutory support, food aid might in fact be offering a preferable alternative in the context of increased bureaucratisation and conditionality of the mainstream benefits system. This section considers the ways in which food aid might be considered preferable from the perspective of mainstream service providers, food aid providers, and people experiencing acute food poverty themselves.

In Scotland, it was clear from the interviews of those working more closely with the benefits system that food banks had in many cases become the default intervention option to support people presenting in a crisis. In the context of increased conditionality and bureaucracy around accessing statutory forms of financial support, many suggested that sending someone to a food bank would be the preferred approach as it was most likely to guarantee an immediate, positive outcome:

> *"There is a lot less red tape to cut through to get a food bank voucher to somebody. And remember as well, it can take up to what is it 48 hours noo to get a welfare, what do you call it? a crisis application through. And what you do is you get a text and you take that text to a local pay point and they put a number in off your phone and they gie you the money. You know by the time that happens, you know you could be three days down the line, and if our initial contact was at crisis – "we've got nae food for the weans the night" - you know obviously the first point of call is going to be a food bank"* (Stuart, housing support worker, Glasgow)

Concerns and confusion about eligibility, rules, and processes for claiming different benefits suggested frontline professionals were more likely to refer to a food bank when trying to best meet the immediate needs of a client. Again contrasting the apparent immediacy of a food bank referral with the process of applying to the Scottish Welfare Fund, Denise commented:

> *"I see myself giving out food vouchers cos I think well you're not going to get access to the Scottish Welfare Fund, today, or next week, it's going to take, how long's that going to take to happen"* (Denise, support worker, Glasgow)

Faced with growing numbers of people in need of crisis support, food banks were perceived to be the most immediate form of tangible help. Frontline professionals appeared comforted by the belief that food banks would be able to provide for people when other sources of support were less certain:

"sometimes a lot of people think, "go to citizens advice, go to welfare rights", they just think, "oh, they're just passing us on to someone else". And they go "oh we are just getting passed about". But if you say "go to the food bank", then it's a means to an end. You've got no food, you go here and it'll be supplied" (Gail, mental health worker, Glasgow)

In some instances the residents interviewed also expressed a perception that food banks would be a preferred source of support in a crisis, rather than turning to social security services. For Moira, who described a previous negative experience with the Jobcentre where she had felt judged and stigmatised, food banks were perceived as being a more empathetic source of help:

"I think because you know there is people out there trying to help you and it is just ordinary people, if you know what I mean, people like you and me sort of thing, that'll no judge you for going to use them." (Moira, GoWell participant)

Having found the social security system to be hostile and unsympathetic, Moira felt she would be more likely to turn to a food bank in a situation of crisis than to seek help from statutory services. Similar accounts of the food bank encounter as less demanding or stigmatising than those with other welfare bureaucracies are reported elsewhere in the food bank literature (for example: Garthwaite, 2016a and Williams et al., 2016). Interestingly, Moira also suggested that she identified closely with food bank volunteers. Unlike elsewhere in the data where food bank volunteers are framed as 'do-gooding' middle-class church goers, Moira's perspective suggests food bank volunteering as a form of working class solidarity in which the 'them' and 'us' distinction is broken down.

In Finland, there is no formal link between food aid and mainstream services and many interviewees described how social workers were not allowed to refer clients to food aid. Keeping the two systems separate was seen by policy makers to be very important in order to preserve the integrity of the welfare state. However notions of ease of access, immediacy of help, and absence of judgement, were also described as reasons why food aid might be preferable to accessing statutory support from social services in Finland. Echoing the experiences of many frontline service providers interviewed in Scotland,

Susanna, a food aid provider in a small Finnish town, commented on the role which food aid had come to play in the Finnish welfare system:

"*I just know that some social workers, they shouldn't do it, but they tell their clients to go to the breadlines. They know that it is the easiest way to get the food, so that it is kind of an additional system, beside the system. We have the official system, but everybody knows that we have the food aid system which helps*" (Susanna, food aid provider, Finland)

Being questioned by social workers and having bank statements scrutinised when claiming social assistance in Finland were often described as potentially off-putting for applicants, while the anonymity provided by food aid was considered a reason why it might be a preferred alternative. Kirsti, a food aid provider, commented on the difference between the provision of food aid by local church communities and engaging with the statutory route to access support:

> "*social work have so much work, people have to wait a long time and they have to tell their finances. But when you go to the parishes you don't have to tell anything, just "I am in need", and you can get it at once….Earlier it was easier, you could go quite soon to the social worker, but now there are so many people, you have to wait some weeks, it is a very long time to wait if you are hungry*" (Kirsti, food aid provider, Finland)

Kirsti's comments above also indicate statutory services do not have the capacity to meet people's needs. As in Scotland, state welfare systems were seen as bureaucratic and slow to respond, unable to meet increased demand. From this perspective food aid in Finland could be considered a parallel social security system, sought out for its anonymity and ease of access.

The tangibility and immediacy of giving food was apparent in both the Scottish and Finnish data as important reasons why it might be considered preferable to pursuing cash-based interventions. The giving of food was also recognised as an important motivation on the part of providers, volunteers and donors to food aid services. As Kirsti commented *"parishes like more to give food or something concrete, the money belongs to the social work"*. Susanna also reflected on the impact on volunteers of giving out food, commenting on the particular significance of food provision:

> "*it can be seen on the voluntary people how much they enjoy it that they can help, and it's somehow quite mystical how much it gives to help. With the food it is obviously more rewarding than if they would give chairs or something. Another thing I have been*

thinking is what is in this food which makes us so, it is so important of course because you die otherwise, but it is a totally different thing to deliver food than we would deliver some recycled furniture or something". (Susanna, food aid provider, Finland)

Food aid provision was also recognised as an attractive form of voluntary work in the Scottish context. Interviewees also reflected on the popularity of donating to food banks. Jacqui commented on why she felt people might prefer to support a food bank than other forms of giving:

"It's something deeply human about feeding people. If there had been two equal things, providing people with money for their fuel, or providing people with something to eat, it will always be providing people with something to eat – people will respond more to that" (Jacqui, food charity director, Scotland)

A less sympathetic perspective on why food aid might be considered by providers as preferable to cash-based support related to the element of control which it affords. Juha, a senior civil servant in Finland reflected on his interactions with food aid providers:

"I sometimes used to ask these organisations, "Why don't you give 5 euro notes to your clients?" And they were appalled, "No! They can't use the money. If we give them the dry bread, they can only eat it", "Or they can make booze out of it", I said! "Oh!" They don't want to give money to people, they want to give something you can only eat". (Juha, senior civil servant, Finland)

Juha's comments implied that in giving food, providers sought to remove any form of choice on the part of the recipient, on the assumption that they could not be trusted to make responsible choices. This echoes similar findings from Poppendeick (1998: 156) in her seminal study of food aid provision in the USA when she observed that some food aid providers ""prefer assistance in kind specifically because they have little faith that their clients will spend food stamps well and wisely".

Describing his observations of a food bank in the USA, Alasdair, a third sector director in Scotland commented:

"people had to knock on the door and say, "please may I have a bag of food", rather than saying, "here's some money now go away and make some choices"" (Alasdair, third sector director, Scotland)

Here, Alasdair draws a clear distinction between the charitable model of food aid where an individual is cast as passive recipient of pre-selected food items, and the provision of cash which is framed as an empowering form of support whereby an individual is given the resources to have choice and control over the food they eat. This comment relates to other findings in this study which suggest that in providing cash, the welfare state has an empowerment role in relation to food, giving people the agency to have control over their own food access. For example, in Chapter Eight, Arthur described the importance for his own self-esteem of being able to pay for his own food, contrasted with the shame of queuing up for a charitable food parcel.

The giving of food held specific significance in the context of Church-based food aid provision, where interviewees often alluded to Christian teaching regarding the responsibility of the Church to feed the hungry. In her study of food aid in the USA Poppendeick (1998) reflects on the symbolic function of food offerings, particularly in the context of religious groups, and suggests that it is an emotionally significant activity for those involved. For those giving the food, Poppendeick (1998: 48) argues, the experience functions as a "moral safety valve". Echoing these observations, Juha, a senior civil servant in Finland, suggested that food aid provision was primarily meeting the need of those giving the food aid, rather than necessarily those of its recipients:

> *"the Church needed something concrete, something to work with. And the parish workers, there are 3500 workers and they needed something to do for the poor people who came to their door, so they could deliver a bag of food. It's practical"* (Juha, senior civil servant, Finland)

Reflecting on the popularity of food banking within Church communities in Scotland, Jacqui suggested it was simply a passing trend in how the Church chose to focus its charitable activities:

> "*As a volunteering activity it's quite hands-off... It's an easy activity. I also think it became fashionable. It was fair trade, thinking about in the '80s at the back of every church hall there was a fair trade stall, it became food banking. It'll become something else*" (Jacqui, food charity director, Scotland)

It was clear that in both contexts, and for different groups of stakeholders, food aid held particular appeal as a form of poverty relief. In both countries food aid was often perceived to be better able to meet immediate needs given increased bureaucracy and conditionality within the statutory system. For food aid recipients, the anonymity and perceptions of

greater empathy offered at a food bank might make them a more attractive source of support. As discussed in Chapter Three, food clearly carries particular symbolic power. It is something concrete; it is a simple, tangible response to highly complex problems in a highly complex system, which is perhaps partly why it might be a preferred response for service providers as well as volunteers and donors. Certainly, when faced with an absence of available options in terms of statutory forms of help, as described above, service providers may well feel comforted by the availability of food aid which provides, as Poppendeick (1998: 52) describes in reference to the US context: "some sort of moral reassurance for agency workers that they are not consigning applicants to out and out starvation".

Alternatively the trend towards food provision could be viewed as part of an approach to poverty relief which seeks to control and views those in poverty as incapable of making responsible choices. From this perspective the growth of food aid, rather than a more accessible alternative to statutory services, could be viewed as part of a general trend towards increased control and conditionality within the welfare state. Certainly interviewees in both countries referred to the growth of food aid as retreat to a pre-welfare state approach which distinguished between the 'deserving and undeserving poor'. The extent to which food aid might be considered part of a regressive welfare state is now explored.

9.4.4 Food aid as reinforcement of a shaming welfare state

The fourth characterisation of the food aid-welfare state relationship considers the role of food aid in reinforcing notions of shame, stigma and individualisation in how the welfare state is understood and experienced. As Williams et al. (2016) have argued, rather than simply replacing state with third sector provision, in the context of dominant neoliberal principles of austerity, this section considers how the food aid model reinforces the values of individualism which characterise a neoliberal agenda. From this perspective then, food aid might be seen to be facilitating the neo-liberalisation of the welfare state.

As described above, interviewees in both countries recognised food aid as a charitable response to poverty, distinguishing it from rights-based interventions. Residents interviewed in Scotland clearly identified food banks as charity, associated with demeaning and stigmatising concepts of begging, queuing and being dependent on others. Although not as explicitly as other interviewees, people experiencing food poverty did also draw a

distinction between food banks as charity and claiming social security benefits as entitlements. In describing experiences of or attitudes towards food bank use, interviewees sought to distance themselves from the identity of charity recipient and assert themselves as active supporters of charity. For Jim, a man in his 50s living in the north of Glasgow who had recent experience of using a food bank, giving to charity was an important part of his sense of himself as a responsible citizen and something which had been lost once he was no longer able to do so:

"*Oh you feel degraded doing things like that* [going to a food bank], *especially never being used to doing things like that. We used tae gie stuff tae like food banks and old toys we'd put into the charity shops and I used tae put money into the Red Cross, the Marie Curie - direct debit - but I've had to stop all them. No danger can I afford to keep somebody in Africa if I can't afford to keep myself here"* (Jim, GoWell participant)

The importance of reciprocity in reducing the sense of shame and loss of agency associated with receiving food aid charity was articulated by interviewees in both countries. Makeen, a refugee and father of one in Glasgow described how his wife volunteered making food at a local community project and how much she enjoyed this experience. He suggested that this contribution his wife made might balance the support he received from the Mosque – gesturing towards the two locations (Mosque and community project) as he spoke: "*You know when you need support some people is there for you. You as well be as well for some people there they need it as well"* (Makeen, GoWell participant).

In Finland, Susanna, a food aid provider, reflected on her experience accessing food aid when she was a student:

"*When I was studying in Helsinki University I sometimes didn't have enough money and I went to Hursti* [provider of food aid]*, and I went first as a volunteer because I didn't dare to go to the line. So I wanted to help first, and then I would get the bag, and it wasn't a shameful way. And I saw when I was giving the food away I saw the students in front of me and they were all ashamed, and I felt very bad, because there was kind of clash of worlds because I was happy to help, and they really needed the food, but they were all ashamed. And since that I've been really thinking, what happened? I didn't act in a way which would make them feel shame, but they were already, just being there and taking the food made them feel ashamed of something"* (Susanna, food aid provider, Finland)

Susanna's experience echoes this idea of the importance of having some sort of sense of agency in order to reduce feelings of shame, and that regardless of the approach taken by food aid providers, the experience of receiving food aid is inherently shameful.

Tahir, a man in his 40s working full-time and living in Glasgow drew similar distinctions between the experience of claiming benefits, and his feelings about receiving food from a food bank:

> "*With the Jobcentre you don't beg actually, you just go and just sign in and don't get anything until after two weeks you get paid. But here you do it, you feel like, you are getting your food in your hand and you think, "why can't I earn this food?" You know, "why should I go and ask for this food?""* (Tahir, GoWell participant)

In Finland food aid was considered charity and therefore a retreat to a pre-welfare state way of providing basic support. Indeed Jenni, a government nutritionist and policy advisor was quick to dismiss the notion of food aid*: "it is the charity work which we don't like in Finland".* As Leena, a government social researcher, explained:

> "*this is a very new phenomenon, the return of charity. We used to have charity in the 19th Century. The Good Women's Association, taking care of orphans and wearing nice hats. I mean that was a good thing to do at the time, but I think it is not the right direction we should go as a society*" (Leena, government researcher, Finland)

Reflecting on the role of food banks in Scotland, Elaine, a social and public health policy specialist, made similar comments as to the negative connotations of charitable aid: "*they* [food banks] *are associated in people's minds with charity in a bad way, in a way that reflects as I say failure of the system".*

As described in Chapter Five, the nature of food aid delivery and use in Scotland is largely determined by the policies of the largest food aid provider, the Trussell Trust. In defining itself as a crisis intervention, officially Trussell Trust foodbanks only allow three referrals within a six month period and require that users engage via mainstream services. Such rules were seen by some as highly problematic. Gail, a mental health worker in Glasgow, described the experience of making a referral to a Trussell Trust foodbank:

> "*I phoned them up and I says, "this is worse than filling out a form for the DWP, I can't fill these forms in", I said, "if someone needs to come to a food bank darling, then they need", they said, "we have to categorise it", I said, "no means-testing!"* (Gail, mental health worker, Glasgow)

From this perspective, the Trussell Trust referral system served to reinforce the 'deserving/undeserving' distinction which has come to dominate the increasingly individualised UK benefits system. As Williams et al. argue, the food bank model might in fact:

> "serve to uphold and further embed neoliberal ideologies of welfare by elevating a modus operandi in keeping with dominant discourses of dependency, deservingness and self-responsibility" (Williams et al. 2016: 2294).

Insights from Finland also suggested that the establishment of food aid provision might have played an active role in the erosion of public support for and confidence in, the social democratic welfare system. Juha, a senior civil servant, reflected on the implications of food aid for public perceptions of the welfare state:

> "*I do think they have raised a deep sense of distrust to the authorities of social welfare, "this breadline is a proof that you have done something profoundly wrong".*" (Juha, senior civil servant, Finland)

He was deeply cynical about the motivations of those behind the initial establishment of the food aid system in Finland and how this had shaped attitudes towards the Finnish welfare state:

> "*It is a good lesson, you can make a story out of it: how perhaps 20 people changed the whole image of social security in Finland in just 20 years, and with just 4 million euros. We have one fourth of the state's budget, we have tens of millions of euros and we can't have the same effect*" (Juha, senior civil servant, Finland)

From this perspective then the growth of food aid in Finland served to undermine the role of the social security system and perpetuate the idea that the welfare state had failed, which, according to Juha: "*Is a political truth, it's not the reality of course*".

9.4.5 Food aid as a flawed political response to the decline of the welfare state

The final characterisation explores how food aid might be understood not only as an intervention to replace, reinforce, or offer an alternative to current welfare policies and practices, but to provide a political challenge to them. The political motivations, and politicising potential, of some food aid providers is discussed by Williams et al. who warn

against dismissing such activities as simply performing the function of: "handmaidens of neoliberal welfare restructuring" (2016: 2293). It to this conceptualisation of food aid as political protest that the chapter now turns. The findings recognise these political motivations, but suggest significant flaws in this approach and argue that food aid provision may in fact inadvertently prevent more direct forms of protest to achieve change.

For some in Finland, the original motivation of the expansion of food aid was one of political protest. Interviewees described how efforts by the Lutheran Church to establish food aid provision during the most acute period of the recession of the early 1990s were made on the basis that it would be a temporary measure, intended to provoke a public response which would demand a reversal of government cuts and a strengthening of the welfare state. Benjamin, an academic who was involved with the Church's food aid at the time, explained their intentions and the unexpected response:

> *"it was meant to be some kind of demonstration in that atmosphere of the '90s. We thought it would shock the middle class so much that they would say, "we don't want that the poor people are taken care by these old fashioned methods, but we want that everyone is handled with honour and they belong to the system of the welfare society and not some kind of drop outs of the safety net where voluntary organisations have to pick them out from the margins"…And when later on we noticed that maybe it was so that people with conservative and rightist ideas thought, "oh, now the church is doing what they have to do and they are helping the poor with free or low cost materials and we don't have to pay our tax money on that and they are just voluntarily giving the aid", so it became maybe more some kind of pet or tool for those we thought would think just the opposite".* (Benjamin, academic, Finland)

Such sentiments were articulated by Lotta, a Councillor for the conservative Coalition Party in Helsinki, who said of food aid: *"The role is that so long that it is volunteers then it is very convenient to the tax payers because it doesn't cost very much!"*

While it was recognised that food aid in Finland was started out of protest, this campaigning role appeared to have diminished:

> *"the food banks kept on going, the local food banks they increased, they expanded, but they didn't say anymore this is a protest"* (Juha, senior civil servant, Finland)

Another perspective offered was that the decline in the advocacy role of food aid was related to the reluctance of the Finnish Lutheran Church, the main provider of food aid in

the country, to express political views. It was suggested that the Church was unable to take a strong political position which would risk it loosing members, as Tiina, an academic, explained:

> *"The majority of Finnish people are members of the Church, but numbers have been declining quite rapidly in recent years. One of the most important reasons to be members of the Church is that the Church does good work for the poor, as a cultural idea it is very strong. Whatever the Church does, whatever it is for, whatever it criticises, the next day its membership declines. The Church cannot raise their voice on anything. What they will say is, "We care for the poor, we also care for the Finnish welfare state but we want to help people"…like that's all they can really do. This is my gut feeling, that these charitable deeds are a necessary way for the Church to maintain some kind of position in society"* (Tiina, academic researcher, Finland)

Certainly church-based food aid providers interviewed did not appear to be politically motivated, but rather suggested it was their Christian duty to help those in need. As Kirsti, a food aid provider within the Finnish Lutheran Church commented: "*Everyone says that in the Bible it says that poor people you have always with you*".

A decline in politicised self-organising at a local level was commented on in both countries. Tuukka, a third sector worker and anti-poverty campaigner said of the situation in Finland:

> *"In the last economic depression in the '90s when there were many unemployed, people formed these associations and there were maybe 300 unemployed workers' associations. There are now maybe 100 - people are not forming associations anymore"*

Alan, a legal advice provider in Glasgow made similar reflections on the changes in grassroots organising in the city:

> *"I'm surprised at the degree of social and community organisation has reduced so much. In the past there would, in the '70s and the '80s there were tenants associations and there were unemployed workers centres"*.

Alan also commented on the growth of food banks, contrasted with perhaps more politicised responses which he suggested would have been much greater in the past:

"you've got people on the one had who are trying to organise anti-austerity campaigns, and on the other hand who are saying – 'well they are leaving people with nothing we better do something about it". (Alan, legal advice provider, Glasgow)

These comments from both Scotland and Finland indicate that food aid might be a more passive, non-political form of local organising than other types of grassroots activities which have occurred in the context of recession and austerity. This view has parallels to what have been noted elsewhere as examples of the 'little platoons' of David Cameron's 'Big Society' (Wells and Caraher, 2014). However, another perspective did identify a more politically engaged role for food banks in Scotland. Clive, manager of a food charity, argued that political advocacy was central to their work. Clive described the lobbying activities of his organisation:

> *"I think we've had pretty good responses, you know, where we tried to get meetings and managed to get meetings* [with Government Ministers]. *We managed to get good interaction with them as well. We've been to a few party conferences and we held an event in Holyrood as well"* (Clive, food charity manager, Scotland)

For Clive, this political activity was central to the work of food banks: "*We can't do the practical without the political. I think to divorce the two is to completely miss the boat".* However, the motivations of this political activity were not entirely clear. In the context of a political narrative in Scotland which is increasingly 'anti-food bank' (as evidenced elsewhere in this chapter), Clive's concern to engage with politicians could be seen to be driven by self-interest, as suggested by his comments on the lack of government funding for food banks and that food banks might "*slip off the political radar*".

Policy actors in Scotland did recognise the political engagement activity of food banks at a national level. Some suggested this had helped raise awareness of the social policy drivers of food poverty, as Natalie, a local government manager, described: "*It was visible, it showed what was wrong. How effective it is going to be in driving real change across the UK remains to be seen".* However elsewhere it was suggested that political campaigning by food banks might not be considered a positive thing:

> *"I think there are times where the food banks providers have almost become a lobbying organisation, and that's when it starts to be caught up in the politics of it and it can start to be an unhelpful narrative that comes out of it, potentially"* (Jacqui, food poverty charity director, Scotland)

Interviewees in both countries recognised that the prospects of both greater need for food aid among people in poverty, as well as of greater reliance on voluntary organisations by government to meet those needs, posed particular dilemmas for the third sector. Tuukka, a third sector manager and anti-poverty campaigner described the somewhat contradictory position which the sector found itself in:

"*It's not that easy topic or question for the NGOs or advocacy groups because on the one hand we have that feeling that in the welfare state and in our society there shouldn't be that phenomenon, but on the other hand many NGOs are doing food aid because it is part of their action around the people…at the same time we are doing it and criticising it*" (Tuukka, third sector manager, Finland)

Such dilemma perhaps suggests that as the third sector has taken on a greater role in direct social welfare delivery, its role as 'critical voice', which has been identified as its principal function within social democratic welfare states, has diminished. Gail, a mental health charity worker in Glasgow, also recognised this dilemma for the sector in Scotland, suggesting that such organisations were in fact hindering the potential for government intervention:

"*People have got to say, "enough is enough". But if we say "enough is enough", people are going to suffer. It's like charities and volunteers, as long as someone is doing it the government are not going to pay someone to do it. As long as you are doing it for free, they won't, which is why it'll get worse*" (Gail, mental health worker, Glasgow)

Similarly Jacqui, director of a food aid charity in Scotland, reflected on the extent to which the emergence of food aid might actually have mitigated more direct political protest against the UK Government's Welfare Reforms, and therefore diminished any perceived need for a government response:

"*What, if there hadn't been, if you had had that change* [Welfare Reform] *and you had people hungry, but people hadn't responded with food banking? If there hadn't been the Trussell Trust there, if church congregations…hadn't been fussed about what was going on at home, what actually would have happened? Would we have seen Jarrow marches? Would it have come out onto the streets? Would then we have seen a much bigger and more immediate political response? Perhaps.*"

Jacqui's reflections here echo critiques well established in the literature whereby food aid is seen to facilitate the further erosion of statutory supports by cushioning the effects of

state retrenchment and providing "the illusion of effectively responding to hunger" (Tarasuk 2001: 489; see also Wakefield et al., 2012). Indeed the discussion at 9.4.3 above suggests ways in which food aid might be enabling the retreat of the welfare state by being seen to step into the breach, while 9.4.4 argued that food aid might be further complicit in the neoliberalisation of the welfare system by reinforcing regressive notions of 'deservedness'.

9.4.6 Summary

Section 9.4 has sought to categorise the relationship between food aid and the welfare state, and in doing so suggest the different ways in which the role of the welfare state might be changing in these different welfare regime contexts. The data suggests different characteristics of food aid in relation to the welfare state, some of which overlap across the different food aid-welfare state relationship categories. The data also offered different perspectives on these relationships, highlighting areas of convergence and divergence within and between the two countries.

Framing food aid as creating a contingent welfare state, suggests that, as an ad-hoc provision increasingly wedded to mainstream services, food aid in Scotland is serving to help move the welfare state towards a far more unreliable, fragmented system. In Finland, the contingent nature of food aid appeared to have fewer implications for the welfare state given its current more marginal position. Understanding food aid as preferable to an impersonal welfare state focuses on how an increasingly bureaucratic, impersonal state system might mean food aid is sought out as an alternative form of support in both countries. The findings suggest however that food aid was often a reluctant choice for front line staff, who perceived food aid to be a more immediate response to crisis, while from the perspective of people experiencing food insecurity, this idea of preference was a minority view.

The theory of food aid as substituting for a shrunken welfare state appeared most strongly in the Scottish data, where food aid was often recognised as having stepped in to fill gaps in the safety net created by austerity measures and welfare reforms. In Finland the conceptualisation was less of food aid as replacement, but as prop for an overburdened welfare state. Theorising food aid as reinforcing a shaming welfare state suggests that the growth of charitable food aid is part of a process of neo-liberalisation within the welfare state. In Scotland, the referral system used by most providers was seen to particularly

reinforce dominant neoliberal ideas of individual responsibility and deservingness. Yet in both countries, food aid was associated with pre-welfare state forms of charity and which were considered inherently shameful for recipients. Finally, the conceptualisation of food aid as political protest considers the food aid-welfare state relationship in the context of policy making and political debate. While the political motivations of some food aid providers in both countries is recognised, the findings suggest significant flaws in this approach and that the growth of food aid may have in fact prevented more radical forms of protest to challenge perceived government failures.

9.5 The future of food aid: from food aid to community food

Chapter Four proposed a typology for considering the role of food in different welfare state regimes. It recognised that in a liberal regime, food is largely the responsibility of the market, while in a social democratic regime, the position of food as a public good is stronger. In each context the market and the state have varying degrees of responsibility for meeting people's basic food needs. The rise of food aid marks a shift in this responsibility, and it was clear from the findings of this study that local communities are seen to have an important role to play in addressing food poverty in both countries. Indeed insights from interviews in Scotland and Finland suggested common concern with moving away from the stigmatising and shameful concepts of food banks or breadlines, and developing alternative models of community food activities. The notion of transitioning to more dignified ways of providing food was a particular priority for the policy community in Scotland, while in Finland there was also concern to make food aid better.

The findings suggest that the rise of food aid signified a key change in the role of the voluntary sector and local communities in the welfare states of both Scotland and Finland. This was recognised to be related to broader changes which would give greater responsibility to the voluntary sector in social policy development and delivery. However, food aid provision was widely contested as an acceptable community activity. Jiri, a social policy academic, commented on the direction of travel in Finland:

> *"we have this idea that we are not talking about welfare state anymore but welfare society and we have this idea that civil society has a role in providing basic needs, and that's where the Church and other actors giving basic needs and free food come into the picture"* (Jiri, social policy academic, Finland)

A similar trajectory was identified in Scotland. Making reference to current policy agendas which emphasise community empowerment and utilisation of local assets[3], Elaine, a social and public health policy specialist, commented that food banks are not currently part of that discourse:

"*just from the conversations I hear I don't pick up people seeing them* [food banks] *as an indication of an asset-based approach if you like or, local people coming together to provide a response that has got social benefit as well as a functional benefit and so on. … They could be, they could be all part of that community empowerment type of approach, but that isn't how I hear them talked about largely*".

She later noted, however, the potential for a change in the discourse:

"I suppose you could imagine one route where, if food banks continue, they continue to be seen as you know, "the welfare state is failing". There could be another route which actually if you like rehabilitates food banks as a form of community food provision but is kind of, as I said before, more part of a system of support for people. That would require just a narrative to change in relation to food banks, and so we would talk much more about making food accessible and affordable and healthy for people in need"
(Elaine, social and public health policy specialist, Scotland)

Community meals, community growing, and cooking classes, were all recognised as desirable alternatives to food banks. The impacts of such activities on reducing social isolation, developing skills and confidence, and building local communities were seen to be important. Alasdair, a third sector director, recognised community meals as an inclusive alternative to being a passive recipient of a food bank:

"In some ways this is an antidote to the challenge which food banks face because they need to be for people who are in poverty, therefore if you go there there's a kind of stigma with that. You can begin to create spaces where you can provide for people who have a need, by providing something which is actually building the community. They can participate, rather than saying, "well we can have food for poor folk", it's like the free school meals thing" (Alisdair, third sector director, Scotland)

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[3] The Community Empowerment (Scotland) Act 2015; assets-based approaches high on policy agenda in health and in community development:
http://www.gcph.co.uk/publications/374_assets_in_action_illustrating_asset_based_approaches_for_health_improvement

As well as providing social benefits, for Jacqui such community food initiatives were themselves important solutions to food poverty:

> *"Because of the availability of food banks people in chronic food poverty have begun to access them. They don't get what they need there. They don't get all the help to lift them out of food poverty at a food bank...a 60 year old guy who has come out of prison after a lifetime of institutionalisation what you need is to join in with some cookery classes and sit down and have meals with people and to get help and introduced to the local food coop, and be integrated. That's what's going to lift people out of food poverty"* (Jacqui, food charity director, Scotland)

Findings from interviews with people experiencing food insecurity discussed in Chapter Eight did suggest the importance of reciprocity for reducing feelings of shame when having to access food aid. In addition, the levels of food insecurity and food bank use among single households identified in this study also suggests that such interventions which serve to reduce social isolation and promote participation could have positive impacts on people who struggle to afford food. Indeed the findings suggest a clear trend towards approaches to food aid provision which are more participatory, as Jacqui explained:

> "*I like to think everyone is migrating away from old fashioned food banking to at least second generation food banking which has some level of enabling going on*"

In Finland, Milla, a researcher, felt strongly about the need for food aid to become more than the giving of surplus food and provide a wider range of support services. She argued:

> "*As long as we aren't giving these people agency, they will just be poor and nothing but poor, that is crazy in a welfare state that was supposed to take care of poverty*".

Yet Tarasuk (2001: 495) warns that unless such empowerment occurs in tandem with or leads to the actual transfer of resources, then the impact of these initiatives on reducing food insecurity will be minimal.

Certainly not all viewed this emphasis on the development of community food activity as positive. Others were wary of the capacity of such community food activities to meet the needs of people in food poverty. Clive, a food charity manager, described a conversation with a food bank worker about the priorities for Scottish Government funding:

"It's almost like you're giving people a trowel and a bag of seeds and asking them to grow their way out of poverty. That was her description of it and I thought, I can see where she's coming from" (Clive, food charity manager, Scotland)

Susan, a public health manager in Glasgow, also expressed scepticism as to the extent to which such activities would actually afford people greater dignity than having to use a food bank:

"I see…more community breakfasts, more shared meals, more "pay what you feel". Community responses that are trying to provide not just food but a non-judgmental way to providing food… in some respects that is better than food banks, but it is still a lot less dignified than making sure people have access to enough food" (Susan, public health manager, Scotland)

In Finland there was also a desire to develop the ways in which food was provided at a community level. Jiri, a social policy academic, commented:

"I think there should be some sort of coming together, establishing guidelines, establishing principles, establishing ethics. And since we have had this system for more than two decades now, I think we should accept that it is here to stay and I think we have to discuss what we are going to do about it and how we can most efficiently develop the system"

Interest in developing community meals as alternatives to breadlines was discussed as a means of providing food aid in what Anna, a social worker, described as "*a more human way*". One initiative which has received local government support to provide a hub for surplus food redistribution was held up as an example of the direction in which food aid in Finland is evolving. Susanna, the coordinator of this initiative, described the way one project she worked with would serve meals using surplus food. For her this approach reduced the shame of accessing food aid:

"They do the community lunch in the way that they put table clothes on the table, and you can reserve a table, and they are the waitresses… That is a really beautiful way of serving food aid" (Susanna, food aid provider, Finland)

In both Scotland and Finland then, community food activities were considered desirable alternatives to, or evolutions of, food banks because they were perceived to be more dignified, more participatory, and to provide opportunities for community development. Describing the evolution of food aid and food poverty activities in Canada since the 1980s,

Wakefield et al. (2012) identify the expansion of the landscape to include a range of different actors with differing interests and priorities. There are clear parallels to be drawn between the ways in which food banking has evolved in Canada, as discussed in Chapter Three, and current policy and practice developments in both Scotland and Finland. Similar trends are clear in both countries, with growing interest in local food movements and concern to address the problem of surplus food. In describing the types of responses needed to address food poverty which also take into account environmental concerns, Mark, a faith leader in Scotland, suggested:

> "*we need to find, over the next 20, 30, 40 years, a way of relating to food that creates a huge local food movement, but which is deliberately pro-poor in its starting point*"

Tarasuk's (2001) main concern with the community development response to food insecurity is that is largely fails to move the focus beyond food. In emphasising food as the central issue, the social and economic drivers of food poverty risk being side-lined rather than directly challenged, and instead gives rise to behavioural interventions aimed at helping individuals better cope with their current circumstances.

9.6 Conclusion

Section 9.4 of this chapter examined different conceptualisations of the relationship between food aid and the welfare state in order to consider the changing nature and role of the social safety net. Discussions about the future role of food aid in both countries reflected perceptions of the changing nature of the welfare state, and the relationship between and relative responsibilities of, the state and community sectors. Interviewees in Finland indicated that they believed food aid would most likely continue in the future and that demand could increase. This was suggested to be because of a lack of political will to address the structural drivers of food poverty. Leena, a government social researcher in Finland, linked the continuing role for food aid in Finnish society with the country's shift away from a universal system towards greater means-testing and a more liberal model of welfare state:

> "*Food banks, they will stay. Because we are moving to a lower level social security with very few exceptions for the means-testing. You get a very low basic assistance and then you are on your own. And then we will get the same system as you* [the UK] *get: special*

programmes for pregnant women; special programmes where you have to prove
yourself to be entitled for this and that - we are moving to the UK system."

From this perspective, the growth of food aid suggests the trajectory of the welfare state in Finland is away from the social democratic model outlined in Chapter Four, towards a more liberal regime type where the principles of universal entitlement are replaced with greater means-testing, and the roles and responsibilities of the state and the third sector are largely recast. This vision of the future of food aid in Finland suggests the role of replacement to a shrinking welfare state, as conceptualised at 9.4.2, may dominate. Indeed Taylor-Gooby et al. (2017a) consider the overall trajectory for social policy development in Nordic welfare states to be one in which social democracy is placed under increased pressure to retreat from interventionism and increase individual responsibility.

The direction of travel for food aid within the welfare state in Scotland appeared to be towards a greater role for the community sector, but one which is intentionally designed to be different from the stigmatised food bank model. While there was clear recognition among policy makers of the structural drivers of food poverty, the vision of the future of food aid in Scotland was one which emphasised community-based food activities, rather than interventions to improve incomes. Such activities could provide valuable opportunities for participation through food, and by seeking to transform the way they operate, could serve to decouple food banks from mainstream welfare services.

However, by retaining the focus on food-based responses, this trajectory also risk side-lining efforts to adequately address the financial drivers of food poverty. In addition, by continuing to locate the source of solutions at the community-level rather than pointing to structural change, these interventions may end up emphasising behaviour change and individual responsibility. As a result, reflecting on the theorisations of the food aid-welfare state relationship outlined above, such developments could inadvertently serve to further reinforce a shaming welfare state in Scotland.

Chapter Ten: Conclusions, Reflections and Recommendations

10.1 Introduction

The overall aim of this thesis is to gain new empirical and theoretical insights into the role of food aid in relation to the changing nature of the welfare state. The objectives of the thesis as outlined in the introductory chapter were to:

- Examine the scale, drivers and experiences of food poverty and food bank use in deprived neighbourhoods

- Understand how food banks are shaping experiences, perceptions and delivery of the welfare state at a local level

- Explore the roles and relationships of food aid and the welfare state across different regime types

- Provide new evidence for the development of policy solutions to food poverty in Scotland, Finland and elsewhere

The objectives of the study were addressed by answering three specific research questions. This chapter discusses the extent to which the thesis has achieved its objectives and overall aim. To do this, at section 10.2 the key findings of the study are summarised in relation to how they answer each of the research questions. At section 10.3 the chapter then outlines the main contributions, both empirical and theoretical, which this thesis makes to knowledge. Recommendations for future research provoked by the findings of this thesis are outlined at 10.4. Finally the chapter identifies key areas of policy and practice learning which emerge from this study, and highlights the implications of the findings for improving responses to food poverty.

10.2 Answering the research questions

10.2.1 Research Question 1: What does food poverty look like in deprived neighbourhoods?

1a) What is the scale of food poverty, how has this changed over time, and who does this affect?

1b) What factors are associated with an increase in food affordability difficulties?

1c) How is food poverty differently described by those reporting difficulty affording food, and those delivering welfare state services in the same neighbourhoods?

Chapter Seven presented quantitative and qualitative findings in order to better understand the phenomenon of food poverty in deprived neighbourhoods in Glasgow. It was possible to take advantage of the longitudinal nature of the GoWell Study and consider how the scale of food poverty had changed over time. Cross-sectional analysis of the four waves of the survey (2006; 2008; 2011; 2015) did not identify significant change in the scale of food poverty over time at an aggregate level, but when looking at changes for specific groups, single adult households and those out of work due to illness or disability were found to have experienced a trend towards increased food affordability difficulties. Analysis of the longitudinal sample (2011-2015) within the data set enabled factors associated with movement into food affordability difficulties at an individual level to be examined. Single adult households and lone parent families were identified as having experienced particular changes in food insecurity status. Qualitative findings presented in this chapter supported these findings regarding the sorts of households which struggle to afford food, but also provided rich insights into a wide range of lived experiences of food poverty and contexts in which it occurs. The experiences of asylum seeking and refugee households emerged from the qualitative findings as particularly important for considering who is most vulnerable to food poverty.

Both the quantitative and qualitative findings identified the importance of the relationship between health and food insecurity. Statistical analysis of the longitudinal data identified that those whose self-reported health was worse in 2015 than in 2011 were twice as likely to have entered food affordability difficulties as those who reported no change in their general health. The strength of the relationship between worsening mental health and entering food insecurity, even after controlling for income-related variables, was a particularly striking result, with those who developed mental health problems between

2011 and 2015 having two and a half times the likelihood of entering food affordability difficulties than those who did not.

The qualitative findings also identified poor health as a central theme to the experience of food insecurity and enriched the quantitative results through providing insights into people's lived realities and personal understandings of the relationship between food and health. These findings suggested how ill health might increase vulnerability to food insecurity but also indicated clearly the negative impact which struggling to afford food can have on health, particularly mental health. The stress, anxiety and shame associated with struggling to afford food, as well as its impacts on sense of identity, belonging and family life, were key findings from interviews with food insecure households. These findings on the emotional and social impacts of food insecurity speak strongly to the shame literature, which identifies how pride and self-worth are jeopardised when having to seek out help at times of extreme need (Chase and Walker, 2013).

The financial drivers of food poverty emerged as an important finding of this chapter, echoing the wider evidence base. Specifically, the quantitative results showed that respondents whose income had been affected by any welfare reforms were more than three times as likely to enter food affordability difficulties as those who had not. This finding suggests that reductions in social security are a key driver of food poverty. Qualitative findings from household interviews also foregrounded the financial factors. As well as problems with the social security system, low-paid work, and high food and other household costs also emerged as factors impacting on interviewees' ability to afford food.

Service provider interviews provided valuable insights into how food poverty is perceived by those delivering welfare state services in deprived areas. Some of those who were interviewed also recognised the financial drivers of food poverty, while others, particularly those working in healthcare settings, were more likely to focus on issues of overweight and poor food choices among people on low incomes, suggesting that it was behavioural, rather than financial, factors which were behind food-related problems for these groups. Findings from household interviews, however, identified the often complex strategies adopted by people in order to manage a restricted food budget, as well as a desire to be able to eat well. This evidence of food insecurity coping strategies helps to dispel myths, which have been long challenged in the literature, about the financial management capabilities of low income households.

10.2.2 Research Question 2: What does food bank use look like in deprived neighbourhoods?

2a) What is the prevalence of food bank use?

2b) What are the characteristics of those who use food banks and what factors are associated with use?

2c) How are food banks experienced and perceived by those reporting difficulty affording food, and those delivering welfare state services in the same neighbourhoods?

The results from the 2015 wave of the GoWell survey presented in Chapter Eight found that one-in-twenty-five participant households (4 per cent) had used a food bank in the past year. A similar sized group was identified as non-accessors, who reported not having used a food bank for reasons other than not needing to. The findings also highlight the very low prevalence of food bank use among those who struggle to afford food, including less than a quarter of those who frequently struggle to afford food.

Rates of food bank use were found to be highest among single adult households compared with other household types. Binary logistic regression modelling sought to identify the characteristics which are significantly associated with food bank use. Being male and being younger than 40 increased the odds of food bank use, independent of other socio-demographic and financial factors.

A striking finding of the quantitative results is the role of mental health, whereby mental ill-health was found to be associated with food bank use, after controlling for employment status, difficulty affording food and fuel, and impact of welfare reforms. The qualitative findings also foregrounded the implications of food bank use for mental health, particularly the experience of shame and impacts on sense of self efficacy and identify. Such findings suggest that the relationship between food bank use and mental health problems may be bi-directional.

The relationship between financial factors and food bank use that was identified in both the quantitative and qualitative findings is particularly striking, with the regression analysis indicating that those impacted by welfare reforms were more than twice as likely to have used a food bank than other people in deprived areas of Glasgow. The vulnerability of those out of work due to long-term illness or disability to food bank use was also a key finding of the quantitative data, which was reinforced by the qualitative findings. It was found that those interviewees who had used a food bank had all done so as a last resort due

to severe financial difficulties, reinforcing the quantitative findings that indicated that food banks were avoided other than in cases of extreme need.

Qualitative findings from interviews with households reporting difficulty affording food, and service providers working in the same neighbourhoods, provided important insights into the roles that food banks have come to play in deprived communities. For interviewees who had used a food bank, the experience had been deeply negative, provoking mental distress associated with feelings of shame and sense of personal failure. These associations with shame and indignity were also identified by service providers. Stigma and shame; perceived ineligibility or undeserved-ness; and the importance of choice and control over food, emerged as key reasons why those who otherwise struggle to afford food would not use a food bank.

The knowledge of, attitudes towards and engagement with food banks among local service providers was found to be highly variable. Therefore who accesses food banks and how was found to be shaped by local the knowledge, attitudes and relationships both of potential food bank users, and the service providers who largely act as gate-keepers for the most common referral-only food banks.

10.2.3 Research Question Three: How is food aid challenging and changing the welfare states of Scotland and Finland?

3a) What are policy actors' understandings of food poverty, and the role of food aid in both countries?

3b) What is the place of food within the welfare state and what are the implications for this of the rise of food aid?

3c) How are the different roles and relationships of food aid and the welfare state being played out?

Qualitative interviews with service providers and policy actors in Scotland and Finland provided crucial insights into the role of food aid at the level of both welfare service delivery, and policy development in both countries. Findings presented in Chapter Nine identified how food poverty and food aid are understood in both countries, identifying their position in Scotland as current social policy concerns, while noting that in Finland they are generally considered marginal to the welfare state. It was clear that there had been

considerable politicisation of food aid in both settings and that it carried powerful connotations of societal failure. While in Scotland the source of these failures was commonly identified to be specific economic and social policies of the UK Government, food aid, or the breadlines, was seen to call into question Finland's effectiveness as a social democratic welfare regime.

Drawing on the analysis presented in Chapter Four which offered a framework for identifying the role of food within different welfare regime types, findings in Chapter Nine confirmed the strong position of food as a public good within the Finnish welfare state and an important vehicle for the universal principles of the social democratic regime. It was apparent that this traditional role of the welfare state in relation to food had shaped responses to the emergence of food aid in Finland. Here food aid appeared to be perceived as a threat to the social democratic welfare regime, and as a result it was intentionally distanced from social policy development. By contrast, the fact that the food interventions of the welfare state in Scotland have tended to be targeted, anti-poverty strategies – consistent with a liberal welfare state regime – helps to explain why policy makers have readily engaged with food poverty and the growth of food aid as social policy concerns.

Theoretical characterisations of the relationship between food aid and the welfare state, arising from analysis of interview data in both countries, were presented in Chapter Nine. The first examined the ways in which food aid might be creating a contingent welfare state, ad-hoc and unreliable in its support. The second considered how food aid might be viewed to be substituting for a shrunken statutory welfare state in the context of cuts and reforms to services and social security provision. Third, the role of food aid as a preferred alternative to an increasingly impersonal and bureaucratic welfare state was identified. Fourth, the extent to which food aid might be reinforcing neoliberal ideologies of welfare and have an active role to play in the erosion of principles of universality and entitlement was discussed. Finally the chapter considered the role of food aid as a flawed political response to the declining welfare state. Different perspectives on the state-food aid relationship identified the different ways in which these categorisations are playing out in both policy and practice, highlighting areas of convergence and divergence within and across the two countries.

In both countries, but in different ways, the rise of food aid was associated with dilemmas of welfare state identity. In Scotland, the study examined the rise of food aid within a liberal welfare state, but the findings also drew out the particular implications for Scotland as a devolved nation within the UK, and considered the ways in which the Scottish

Government is using its response to food aid as a means of asserting its ambition for welfare distinctiveness from the rest of the UK. In Finland, the rise of food aid was also associated with dilemmas of welfare state identity. Here it was seen to call into question Finland's identity as a social democratic welfare state.

10.3 Contributions

10.3.1 Empirical contributions

This thesis provides important new evidence on the scale, drivers and experience of food poverty and food bank use to what is a relatively new, but rapidly developing area of investigation in the UK. Although localised to deprived neighbourhoods in Glasgow, given the absence of routine measurement of household food insecurity in the UK, and the scarcity of longitudinal data sets to enable the analysis of dynamic relationships between variables at an individual level, the findings help advance the study of food insecurity in the UK.

Evidence of the relationship between financial factors, specifically the impact of recent UK Government welfare reforms, and both food poverty and food bank use, is a particularly significant contribution of the empirical part of this study. The findings add to the quantitative studies of Loopstra et al. (2016; 2017), as well as the qualitative findings of Perry et al. (2014) and Garthwaite (2016a), among others, which have identified the social policy drivers of food bank use. The findings from this mixed-methods study help to strengthen the evidence base that can be used to challenge those who continue to argue that food poverty is a behavioural problem, and to call for greater attention to be paid to its structural drivers, namely the ways in which the shape of the economy, the labour market and the welfare state disadvantages particular groups, leaving them with insufficient income to afford food.

This study provides the first quantitative analysis of a self-reported measure of food bank use in the UK. This is an important contribution given that existing estimates of food bank use rely on data from the Trussell Trust, which is recognised to be an incomplete picture because it does not capture the wide range of other providers known to operate across the country.

Existing studies of food bank use in the UK have generally used data collected at the food bank, and therefore relied on the perspectives of those accessing such spaces (for example Purdam et al., 2015; Garthwaite, 2016a). While such studies have identified barriers to food bank use and suggested they are a last resort for people in extreme need, there has not until now been a study in the UK which has examined perspectives of food bank use by people otherwise struggling to afford food. Both the quantitative and qualitative findings of this study provide new insights into who does not use food bank and why, therefore advancing knowledge of the role which food banks have come to play in deprived communities and in people's lived experiences of food poverty.

In providing new qualitative, and longitudinal quantitative evidence of the relationship between food poverty and health, the study contributes to what has been identified by Garthwaite et al. (2015) and Douglas et al. (2015) as an emerging area of interest in the UK which requires urgent policy attention, and for which there is an established body of literature internationally. The results from this study are in line with evidence from North America that identifies a relationship between food insecurity and poor health, and that also highlights the important link with mental health conditions (Tarasuk et al., 2013; Carter et al., 2011; Heflin et al., 2005). In identifying that people entering food affordability difficulties are more likely to experience deteriorating general health, and to develop mental health problems, this study makes a significant contribution to advancing knowledge on the implications of food insecurity for public health in the UK.

The experience of food poverty among people with chronic health conditions and disabilities, a group historically better protected by the social security system, and their over-representation among food bank users identified in this study, adds to the growing body of evidence of the detrimental impacts which the roll-back of the safety net function of the welfare state is having for people with disabilities in particular (Dwyer, 2017; Garthwaite, 2013). Indeed these findings support those of Loopstra and Lalor (2017) who identified that most Employment and Support Allowance (the main income replacement benefit for people with disabilities and long-term health conditions) claimants among food bank users surveyed were in the work capability group, a group more likely to have experienced a benefit change following a work capability assessment, and now subject to increased welfare conditionality.

The psychological, emotional and social implications of both food poverty and food bank use identified in this study build on the work of Dowler et al. (2001), which highlights the social and cultural significance of food. They also enhance more recent studies that report

on the stigmatising nature of the food bank encounter (Perry et al., 2014; Garthwaite, 2016b; Lambie-Mumford et al., 2014). The findings also contribute to the wider literature on poverty and shame. By drawing on the work of Walker (2014) and Chase and Walker (2013), they show the 'food hand out' is a powerfully-felt symbol of social transgression and personal failure.

A final key empirical contribution of this study is the in-depth examination of the role of food banks from the perspective of welfare service providers working in deprived neighbourhoods. Again, existing studies have examined the role of the food bank from within the food bank, from the perspective of staff, volunteers, senior managers and users (Lambie-Mumford (2017); Garthwaite (2016a)). Through insights from staff in a range of agencies that provide services for people in deprived neighbourhoods, this study was able to build on existing knowledge by providing new perspectives of the role which food banks have come to play in the wider welfare landscape. This evidence also enabled the development of new theory on the relationship between food aid and the welfare state that is discussed in the following section.

10.3.2 Theoretical contribution

As a recent phenomenon in the UK and other Western European nations, theoretical examinations of the implications of food aid for the role of the welfare state in these contexts is still underdeveloped. In seeking to advance knowledge of the food aid-welfare state relationship, this thesis has responded to McIntyre et al. (2016) who maintain that the food bank critique has not yet been well articulated in countries that have traditionally strong welfare states, at least compared with North America where food aid is much longer established.

In order to examine the implications of food aid for the welfare state, it was first necessary to consider the position which food has historically played within it. This thesis makes a new contribution to welfare regime theory (as presented in Chapter Four) by applying the seminal work of Esping-Andersen's (1990), and drawing on those who critique and develop his characterisations such as Bambra (2007b), in order to propose a framework for locating the position of food across different welfare regime types. Prior to this study the place of food within the welfare state has been subject to little analysis. These theoretical contributions are also important for the study of food aid within advanced welfare states as a growing field of research in so far as they offer new frameworks for considering how the

place of food might be changing in the context of both food aid and welfare policy developments.

This study makes a new contribution to both the food aid and the welfare state literature by providing an international comparative analysis across examples of two different regime types, Scotland and Finland. Most existing research on the role of food aid in the Global North has emerged from weaker welfare state contexts including the USA and Canada, and has therefore tended not to engage with welfare state literature. Some research has examined the role of food aid in different European nations (for example a range of case studies is brought together in *First World Hunger Revisited* (Riches and Silvasti, 2014); as well as a 2014 issue of the *British Food Journal* (Caraher and Cavicchi, 2014). However this study is the first to bring together findings from two countries, and to explicitly apply welfare regime theory to its analysis. Influential research by Lambie-Mumford (2017) on the evolution of charitable food aid in the UK and its implications for social policy has drawn primarily on theories of rights, including the work of Sen (1981) and Riches (1999). By taking a welfare regime approach, this research has generated new theory in constructing a characterisation of the role of food aid in relation to a welfare state which might be considered: contingent; hostile; shrunken; or regressive. This advances the work of others who have examined the political and social policy implications of food aid activity (including Lambie-Mumford, 2017 and Williams et al., 2016), and could be applied to future international comparative enquiries.

The comparison of the Scottish and Finnish cases in this study provides new understanding of the food aid-welfare state relationship and offers a critical insight into how and why food aid might be playing different roles in different welfare state contexts. The theoretical characterisation of these roles and relationships builds on the work of Taylor-Gooby et al. (2017) who identify different ways in which welfare regimes are evolving as a result of austerity, by using the rise of food aid as lens through which to examine these changes. The theorisations presented in this study also advance the work of Williams et al. (2016) who call for greater critical engagement with the ideological and political framing of food aid in the UK in the context of a changing welfare state.

10.4 Recommendations for future research

The findings of this study suggest that further investigation of the interface between food insecurity and food bank use is warranted. Specifically, the results of the quantitative analysis highlight the need for systematic measurement and monitoring of both food insecurity and food bank use in the UK, as has been also recognised elsewhere (Loopstra and Lalor, 2017; Dowler and Lambie-Mumford, 2015). Given that the Scottish Government (2016b) has recently committed to the monitoring of food insecurity through the *Scottish Health Survey*, and with results of the pilot survey due in October 2018, the findings from this study identify key factors which should inform the analysis of this data. Specifically, this study points to the need for more research on the relationship between food insecurity and ill-health, and with mental health in particular. This study also highlights the value of longitudinal data in order to better understand the dynamics of the relationships between food insecurity and other factors, and to identify particularly vulnerable groups. Systematic, longitudinal data on household food insecurity at a national level is required for the development of effective policies to address food insecurity.

This study identified growing policy interest in developing the role of community food activities as an evolution of charitable food aid in both Scotland and Finland. If investment is to be made into such initiatives, further research into their capacity to directly impact on food insecurity is required. This study has highlighted warnings from North America that identify their limited capacity to address the structural socioeconomic drivers of food insecurity and their potential to distract from efforts to develop income-based solutions (Tarasuk, 2001; Wakefield et al., 2012). In-depth, critical evaluations of new initiatives which foreground the role of local communities in responding to food insecurity will be required in order to highlight their strengths and limitations in addressing different dimensions of food poverty, and to inform on-going social policy and practice development in this area.

Further comparative research on the role of food aid within the welfare state that extends to include examples of other regime types would help to develop the analysis presented in this study and test the theoretical frameworks which it proposes. The current British Academy funded research project that compares the UK, Spain and Germany (University of Sheffield, no date) is an important opportunity to better understand how food aid has evolved in different welfare regime types and what this suggests about the future direction of welfare policy development internationally.

10.5 Implications for policy and practice

A core aim of this thesis, and a key motivation for pursuing this research, was to generate new evidence which would be useful to those developing policy and practice responses to food poverty and the growth of food aid, principally in Scotland but also in the comparator country as well as further afield. The empirical and theoretical findings of this study provide several key pieces of learning which could be drawn upon for both policy and practice development.

The evidence of the scale and drivers of food poverty and food bank use in deprived areas of Glasgow is of particular relevance to those involved in developing local services and targeted anti-poverty interventions. The strength of the association between mental health problems and food bank use should be of particular concern to social and public health policy makers and practitioners, raising questions as to the adequacy of mental health services available to people facing destitution and thus expanding existing national concerns about the ability of mental health services to cope with those in crisis (Care Quality Commission, 2015).

This study has evidenced the structural drivers of food poverty, and the inadequacies of food aid to address the problem. However, insights into policy maker perspectives on the future role of food aid in both Scotland and Finland suggest the direction of travel is towards developing food-based responses located within local communities. As a new food policy for Scotland that aims to cut across a wide range of policy arenas is proposed, with consultation on the *Good Food Nation Bill* anticipated for later this year (They Work For You, 2018), this study provides valuable evidence to ensure that a structural framing of the drivers and solutions to food poverty is included within it. In the context of on-going social policy development in Scotland, and in particular the new *Social Security (Scotland) Act* which commits to putting dignity and respect at the heart of its delivery, the findings from this study offer policy makers the opportunity to reflect upon how services are experienced by those at the front line of delivering and accessing them.

It was clear from carrying out the fieldwork in Finland that the question of the role of food aid within the welfare state has been subject to very little scrutiny among politicians, policy makers, practitioners or civil society more widely. Indeed a blog piece written about the fieldwork experience (MacLeod, 2016) was picked up by a national newspaper in Finland (Vesa, 2016), which in turn prompted reflection on the future role of food aid provision by a leading figure in the national church (Pajunen, 2016). It will be important to

share the findings and conclusions with stakeholders in Finland, including several research participants, who have expressed interest in taking forward the discussions prompted by their interviews to considering the implications for policy and practice development in relation to the future role of food aid in Finland.

10.6 Final reflections

This thesis has brought together a range of data sources and utilised different research methods to examining food poverty and the rise of food aid within the context of the welfare state. Each aspect of the enquiry has provided new evidence and understanding of the scale, drivers and experiences of food poverty and food aid, all of which create necessary layers of insight to achieving the objective of understanding the implications of the rise of food aid for the changing role of the welfare state.

This study was motivated by concern that the recent rapid expansion of food banks in the UK signalled a significant change in the role of the welfare state in this country. The research was located within welfare state regime theory in order to examine this assumption and, by utilising an international comparative study, consider how the food aid phenomenon might be playing out similarly or differently in a different welfare regime context. The choice of Scotland and Finland as comparative cases provided particularly valuable insights. Going to Finland provided the opportunity to reflect upon the case of the home country from the vantage point of a different social and political context, and also offered insights into the development of food aid within a different welfare state.

Considering the different ways in which the role of the third sector has evolved within different welfare states, it is clear that, in the context of "the neoliberal turn of European welfare states" (Göçmen, 2013: 499) and interest in 'welfare pluralism', the sector has come to occupy an increasingly prominent role in the provision of welfare goods and services across different regime types. While this diversification of welfare provision has led to state-third sector partnerships and interdependence across various social welfare settings in social democratic as well as liberal regimes, it appears that the expansion of food aid as third sector activity within the welfare state has been particularly controversial and contested. Food aid could be considered a new frontier for third sector endeavour, or rather viewed as a regressive step to pre-welfare state models of poor relief. Comments

from Anneli, a social work manager in Helsinki, reflect this dilemma for state-third sector relations posed by the growth of food aid:

> "*I can't see the food aid as a friend, whereas the third sector is like a companion to us. It can't be like a co-worker, whereas the third sector is. We are happy to tell people there are these organisations you can go to. Whereas the food aid, we can't refer people there, we should be able to provide that I think*". (Anneli, social worker, Finland)

The theorisations of the food aid-welfare state relationship offered in Chapter Nine identify different ways in which this dilemma is being played out in practice. Each suggests different, over-lapping and inter-connected trajectories for the changing role of the welfare state.

The extent to which welfare states may retain their distinctiveness in the context of the dominant neo-liberal austerity response to global economic, social and political pressures is a source of on-going debate (Taylor Gooby et al., 2017). This thesis has argued that the rise of charitable food aid and the role of food more broadly, is a valuable lens through which to examine these changes and draw comparisons between countries in order to gain new insights into welfare state futures.

Certainly, while many similarities were identified in the role of food aid between the two case study countries, the thesis also identified areas of divergence in relation to food aid and the wider role of food in Scotland and Finland. Such differences could be considered indicators of the ways in which welfare states may be retaining features distinctive to their regime type, what Taylor-Gooby et al (2017a: 16) call "structured diversity", despite the dominant neoliberal austerity response which would suggest inevitable convergence across regime types.

Indeed, the study has also argued the importance of considering the role which food has traditionally held across different welfare regime types in order to understand the different ways in which both food poverty and the rise in food aid have been responded to. The findings concluded that in the Finnish welfare state, food has held an important role as a public good and a vehicle for the universal principles of the social democratic regime. By contrast, in Scotland food interventions of the welfare state have tended to be targeted, anti-poverty strategies – consistent with a liberal welfare state regime. In Scotland, food aid provision appears to have become much more integrated at the level of frontline welfare service delivery (the 'creating a contingent welfare state' characterisation) than in Finland where it is largely peripheral to the operations of the welfare state, and integration

has been met with greater resistance at the policy level. Such differences are rooted in the ideological principles of the welfare regime types which the two countries represent. In both countries food aid appears to be a powerful symbol of welfare state failures, and in different ways associated with dilemmas of welfare state identity. In the context of Scottish devolution, the growth of food banks and concerns about food poverty have been embraced as social policy priorities and opportunities to assert Scotland's ambitions for welfare state distinctiveness in relation to the rest of the UK. The extent to which this policy interest can yield any significant policy outcomes given the limited control which Scotland has over the social security budget remains to be seen.

Charitable food aid in Scotland has expanded, and continues to evolve, in the context of on-going, significant restructuring of the welfare state. The relationship between food aid and the welfare state will continue to be renegotiated here, and across other welfare states, as nations grapple with how to respond to contemporary social needs. Such rapidly changing landscapes will require on-going scrutiny and future analysis could draw on the empirical findings and theoretical framework presented in this thesis, in order to aid understanding of the food aid-welfare state relationship and its effectiveness in addressing food poverty.

Appendix A: A Breadline in Finland

Source: researcher's photograph taken during fieldwork visit to Finland, September 2016.

Appendix B Interview Schedule: GoWell Participants

Interview Section	Questions
Introduction	
General Questions/ background information	So can we start by you just telling me a bit about yourself? - How long have you lived here? - Do you rent here? - Who is your landlord? - Are you working at the moment? - How many hours? - What benefits are you receiving?
Financial difficulties (general)	How are you doing financially at the moment? And what about paying the bills, do you manage that ok? Compared to five years ago would you say your financial situation has stayed the same/got better or worse? Has your income been affected by any recent changes to the benefits system? Have you experience of claiming (different) social security benefits in the past? - Can you tell me about that (how was it different to current experience?) Do you struggle to pay for anything in particular? - How do you pay fuel bills? -How do you pay your rent`? - What other regular bills/payments do you have to make? Do you struggle to meet these?

Do ever have to make difficult decisions about how to spend the money you have every month?
- Has this changed over the past few years?
-
Thinking about your money for the week or the month. What are the most important things which you make sure you buy/pay for?

How do you decide what to spend on food?

Where do you usually do your food shopping?
- Would say that's changed at all over the past few years?
- How often do you shop for food?
   And has that changed over the past few years?

- What items/things/foods are the most important to buy when it comes to food shopping?

- What can't you or the family do without when it comes to food shopping?

- What would you say is less important to you? Why is that?

- Is there anything in terms of food which you have cut back on or stopped buying recently?
  Why?

- What do you think about when deciding what food to buy for yourself/family?
   Is price important?

- What food would you buy or buy more of if you could afford it?

Food shopping, cooking and eating habits	Do you go to friends or family for meals? - How often? Do you have friends or family for meals at your house? - How often? Has that changed at all over the past five years or so? Do you have enough money to buy the kinds of food you and your family want to eat? Do you ever worry about food running out before you have money to buy more? - Has this ever happened to you? Have you ever cut the size of your meals or skipped meals because you haven't had the money for food? Has your health been affected because you've not had enough money for food? Did you talk to anyone about not having enough money for food? (family; friends; Job Centre advisor; welfare advisor; housing officer; GP etc.)
Food banks	Have you ever used a food bank? - Which food bank/who runs it? - How did you find out about it?

| | Once or more often? What was the situation which led you to use the food bank? Why did you decide to go to the food bank? Can you tell me about that experience? Who did you speak to? What did you think of the food you were given? Did you get to choose? What did you do with it? Did you get any other help or advice beyond the food? Did you tell anyone you had been? Do you think the food bank is a necessary service? How would you say this experience of using a food bank compared with your experience of claiming (x benefit? How did you feel differently about it?

Why haven't you ever used a food bank?

Why haven't you used the food bank again?

What would you do if you were really struggling to afford food?
Would you talk to family/friends/neighbours about it?
Would you speak to any professionals/service providers about it? How do you think they might help/advise you?
How would you feel about using a food bank?

Do you know anything about food banks in this area? - Who runs them?

How do you know about food banks locally? Friends; neighbours; posters.. Have you ever been given any information on food banks from: housing; GP; health visitor; other professionals? |

	What do you think food banks are for? Who uses them? Have you ever donated to a food bank? - What did you give? - Why? Do you think food banks are a recent thing in Scotland? Do you think there are more now than in the past? - How do you know that? - why do you think that is?
Statutory services	Can you tell me about your experiences of (health services eg GP, health visitors; schools; housing services etc.) How do these experiences compare with experiences of using a food bank?
Community services	Do you use Gorbals Library or any other libraries in the city? Do you go to any community projects in the area – eg Bridging the Gap at the Greyfriars Centre on Ballater St? - What for? - How do you feel about these services?

Appendix C Interview Schedule: service providers in Glasgow

Interview Section	Question
Introduction	Set context – introduce research project, remind of confidentiality and consent
Background	Can we start with you telling me a bit about your job role?
	Can you tell me about the community/area you work in?
	And your clients – who is it that you are working with?
Food poverty	When working with clients, do you think about what they eat?
	How would you identify if someone didn't have enough money for food?
	What would you do if you thought someone was struggling to afford food?
	- Do you ask about sources of income and income levels if you think someone doesn't have enough money for food?
	How often would you say you identify that someone is not affording sufficient food?
	- Has that changed from say 5 years ago?
	Are there particular groups who you think are struggling with money for food?
	Have you ever given food to a client who didn't have money to buy it?
	- Is this something your organisation does often?
Knowledge of food	What do you know about food banks in the area?

banks	Who runs them?
	Where are they based?
	What do they provide?
	- How much food?
	- What sort of food?
	- What capacity do they have to provide for people with diet related health conditions?
Views on food banks	What are food banks for?
	Who uses them?
	Are food banks a new thing in Scotland?
	Are there more than in the past?
	- Why is that?
	Do you think food banks are a necessary service?
	How has the growth of food banks affected your organisation/job role?

Food banks – referring	Have you ever referred a client to a food bank?
	- Can you describe that process to me?
	- What leads you to make a decision to refer someone to a food bank?
	- How often would you say you make food bank referrals?
	- Do you generally refer as a one off or do you make repeat referrals for the same clients?
	- Who is it that you are referring to food banks?
	- Is referring clients to food banks something you have started doing recently?
	- Why?
	- Has the existence of food banks changed how you think about a patients food needs or the sort of help you offer?
	- Do you have a different approach now because of the existence of food banks?
	- How do clients react to being referred to a food bank?
	- How do you think the experience of going to a food bank compares with the experience of going to your service?
	- Has anyone ever refused it? - Has anyone asked you for a referral to a food bank?
	Does your organisation/employer have a policy on referring to food banks?
	Do you refer clients to other forms of voluntary sector activity involving food? How does that compare to making a food bank referral?
	Do you refer clients to other forms of voluntary sector activity?

Appendix D Interview Schedule: Stakeholders in Finland

Interview section	Topic
Introduction	Introduce research
	Thanks
	Consent - confidentiality
Background information	Organisation: remit, location, size
	Role of interviewee in organisation
Food interventions	Food interventions of organisation (Government agency, community organisation, faith group, charity)
	- Aims, target groups of interventions
	- Impacts
	- Changes over time
	- Interventions as responses to national policy change (changes in food policy and welfare policy)
Food poverty	Impact of food poverty in day-to-day work
	Organisation's response to food poverty

	- Food poverty in policy, strategy, work-planning
	Perspective on different focuses of food intervention by statutory and voluntary services – how activities and policy objectives have changed
Role of food banks	Organisation's response to growth in food banks in Finland
	- Place of food banks in policy, strategy, work-planning
	Knowledge of food banks in local area – how has changed in recent years
	- Food banks in local welfare/anti-poverty strategy
	- Food banks in national welfare/anti-poverty strategy
Views on food banks	Perceptions of impact of food banks: - on users - on voluntary activity - on statutory services - on public attitudes to poverty - on policy and political responses to poverty
	Views on future role of food banks
Views on changing nature of welfare state in Finland	Views on changes to welfare state in Finland as 'Nordic' country since 1990s: - comparison with other Nordic states - how growth in food banks relates to these changes - how social security is viewed in Finland
Conclusion	Any additional comments
	Remind of confidentiality

Appendix E Interview Schedule: Stakeholders in Scotland

Interview section	Question
Introduction	Consent form and reminder of confidentiality
Background information	Can you tell me a bit about your role at…? How long have you worked here? What did you do before?
	I am interested in the issue of people struggling to afford food and the growth of food poverty in Scotland – what are your impressions of what the drivers of this problem are? - What from your perspective have been the consequences of the problem of the growth of food poverty? Who would you say is particularly affected by food poverty? What groups of people?
Food poverty context	Who is it that is using food banks in Scotland? Why? Much of the existing research on reasons for food bank use in the UK points to acute income crises, including the impacts of recent welfare changes. In Finland food aid use appears largely to be a strategy for coping with chronic poverty. - What role has food aid come to play for people experiencing poverty in Scotland? - How has that role changed in recent years?

	- How do you anticipate the role of the food bank changing in the future? - How might the client group of food banks change in the future?
Who uses food banks and why	My quantitative work has found that being male, and being under 40, increases odds of food bank use among residents of deprived neighbourhoods in Glasgow (controlling for other factors). - Does this finding resonate with your experiences of the issues? - What do you think the reasons might be for this? - Do you have a sense of how this group experiences other areas of the welfare state?
Food banks and health	I am interested in the health of people using food banks. My research found that people who are out of work with long term illnesses or disabilities had greater odds of using a food bank than those in work. I also found a strong relationship between food bank use and mental health problems, What would you say might be the implications of this for public health policy/social policy/emergency food aid provision?
Food banks and safety net provision	- At the level of service provision, what is the relationship between food banks and other areas of the welfare state? - What is the relationship with other voluntary sector services? - How have those relationships changed in recent years? To what extent have food banks become an established part of the social safety net in Scotland?
Policy responses: Food banks	I am interested in the policy response to the growth of food banks and how the issue has been framed in political debate and in policy making. From my experience there it appears that national? policy makers and authorities in Finland see food aid as a threat to the social security system and the ideal of a Nordic welfare state. As a result it seems that they intentionally ignore it and don't engage with it as a policy issue.

	- To what extent have policy makers in Scotland engaged with the issue of the growth of food banks? - How have Government responses changed over resent years?
	- What areas of government see it as 'their issue' and why? Are there different views across different areas of government as to what the problem is and what the solution might be?
Food insecurity/poverty	It appears that the growth of food banks has prompted interest in issue of food poverty among researchers/policy makers. - To what extent has growth of food banks shaped how we understand problem of food poverty? - Has this changed how policy makers engage with the issue? Was food poverty a recognised problem before growth of food banks? - What is it about food banks that has influence? (their very existence/ symbolism, the role of the active FB agnecies, the donors, the nature of food banks (shaming etc), their incidence (plenty of them) , the users….? - Has this been a positive or a negative influence? - Who have been key players in shaping the current agenda around food poverty? What have been their roles ? Have perspectives on the nature of the problem/solution differed? Have these been reconciled?
Food waste	In Finland much of the discussion about food aid is linked to the environmental impact? issue of food waste and that food aid is seen as both a way to address that problem, and also to provide food for people in need. - To what extent has food aid been linked to the issue of food waste in Scotland? Has that position changed in recent years? Why? - Do you think it would be useful to link the two?

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- A number of different reports and initiatives have been developed recently in response to issues of food poverty and food insecurity – Report of Short Life Working Group on Food Poverty; the Fair Food Transformation Fund; the Scottish Food Commission also highlighted food poverty as key issue; at local level – Glasgow Food Policy Partnership – priorities around addressing food poverty.

- Which has been the most influential?

- What has been/ is likely to be their impact?

What do these statements/activities suggest about the direction of travel in Scotland in terms of the issues of food bank use and food poverty?

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Food aid and the welfare state

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To what extent might the growth of food banks be challenging or changing the role of the welfare state in Scotland?

In Finland the breadline appears to be considered a powerful symbol of poverty and the failure of the welfare state .

- How far have food banks come to characterise problems/failures of the welfare state in Scotland?

- Has the growth of food banks shaped where we perceive responsibility for meeting people's food needs to lie?

- In what ways have the welfare state had a role to play regarding food as an issue of poverty

The issue of food banks can be very emotive and has prompted moral outrage from areas of civil society and among some politicians.

- What is it about food banks which has this effect?

- What challenges does this pose for identifying adequate policy responses?

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For some in Finland, the fact that breadlines have existed for 20 years is evidence that they are here to stay and therefore the priority should be to try and 'do food aid better'. Others are wary that such intervention would further institutionalise food aid within Finish social

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	safety net.
	We spoke earlier about food bank use characterising the problem of food poverty, and also problems within the welfare state. There is something of a paradox in food bank use being at once both the problem and the solution.
	- How is that tension being navigated in Scotland?
	While some might view food banks as indication that we have failed as a society. Others might take a very different view – that they show the strength and compassion of civil society, and perhaps a preferable response to local need than distant and bureaucratic welfare state.
	- How would you respond to those different points of view?
	- What do you consider will be the future role of food banks in Scotland?
	- What do you feel the Scottish Government should be doing about the issue of food poverty?
Conclusion	Given the issues I am interested in learning exploring, is there anything else that is important which I haven't covered in this interview?

Appendix F Participant Information Sheet: GoWell Residents

University of Glasgow — College of Social Sciences

GoWell

Who am I and what am I doing?

My name is Mary Anne MacLeod and I am a PhD student at the University of Glasgow working on a project called GoWell. You may remember speaking to other members of the GoWell team previously.

I am now conducting some further research as part of this project for my PhD and would like to talk to you. The title of my PhD is: 'Understanding the role of food within the welfare state: A comparative study between Scotland and Finland'.

Before you decide if you would like to take part it is important for you to understand why the research is being undertaken and what it will involve. Please take time to read the following information carefully and take time to decide whether or not you wish to take part. Ask us if there is anything that is not clear or if you would like more information. Thank you for reading this.

What is it all about?

I am researching people's experiences of financial difficulties, particularly around food and how they access food when times are hard and their views and feelings about that.

What are we asking you to do?

I would like to talk to you about day to day life, for you personally, and in your household and community. I would like to ask about the different services you use and how things might have changed for you over the past few years. I expect the interview to last about 45 minutes. As a token of appreciation for your time, you will be reimbursed with a £10 shopping voucher.

How will the information be used?

Interviews will be recorded and that data will be stored securely at the University of Glasgow. Personal details will be protected using ID numbers and will be destroyed at the end of the research project. Anonymised data will be stored securely at the University for ten years after the end of the project, following the University of Glasgow Research Guidelines. Data will be offered to the Economic and Social Research Council, who fund this project, for archiving.

I will use the information I gather to build a picture of how people in your community are managing to access food in the current economic climate, and their experiences and views of different forms of support, including food banks. I will publish a final PhD thesis, journal articles and conference papers, as well as a summary report – none of these publications will include details of individuals involved in the study. The information might be of use to the council and other local services providers to help them decide how they can best support individuals and communities experiencing the effects of the recession and government spending decisions. As part of the Go Well project, the Scottish Government are also invited to receive a copy of the findings. You can contact me for a summary report of my research findings at the end of my study.

Please remember!

- ✓ It is entirely your decision to take part.

- ✓ You are free to withdraw at any time for any reason.

- ✓ You do not have to give us a reason if you do not want to participate.

- ✓ You are free to change your mind after agreeing to participate.

- ✓ Anything you tell me will be kept strictly confidential unless during our conversation I hear anything which makes me worried that someone might be in danger of harm, I might have to inform relevant agencies of this.

If you would like to ask some questions before deciding whether to take part please do get in touch.

For further information please contact:

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0141 330 4615

Any complaints should be directed to the University of Glasgow College of Social Sciences Ethics Officer, Dr Muir Houston, email: Muir.Houston@glasgow.ac.uk.

Appendix G Consent Form: GoWell Residents

University
of Glasgow

College of Social
Sciences

Consent Form

Project title: Understanding the role of food within the welfare state: A comparative study between Scotland and Finland

Researcher: Mary Anne MacLeod

Please read the statements below and tick the appropriate box.

- o I understand the general aims of the project and am happy to take part

- o I understand that it is my decision to take part in the research and I can stop at any time

- o I understand that if I do not want to take part, I do not have to give a reason and it will not affect any services or benefits I receive now or in the future

- o I understand that my name and address will not be publicised or used in any reports of the project

- o I understand that anything I say is confidential and will not be shared with any other organisation

- o I am happy for the interview to be tape recorded for the purposes of the research and understand that the data will be kept secure within the research team and anonymised so that no individual will be identifiable from the outputs of the research

- o I confirm that I have read the information sheet

- o I confirm that I have received a £10 token of appreciation for my time and that this is given regardless of any answers I give during the interview

Signature:_____

Appendix H Early Coding Framework

Food banks	Food	Finances	Family	Services
A. Reasons for food bank use	A. Food shopping	A. Income	A. Children	A. Social security services
- 1. Desperation	- 1. Food shops	1. Work	- 1. Children's health	- 1. Benefits received/mentioned
- 2. Benefits delay	i) supermarkets	i) low-pay	- 2. Children and money	i) ESA
- 3. Asylum seeking	ii) Corner shops	ii) part-time work	-3. Children and food	ii) DLA
- 4. Low income	iii) Specialist shops	iii) full-time work		iii) PIP
	- 2. Food choices	iv) looking for work	B. Family support	iv) disability benefit
	i) Price - Finding best price b) trading down	v) Work Programme	- 1. Financial i) managing finances ii) financial support in a crisis	v) JSA
B. Reasons for not using food banks	a) Quality	v) wages	- 2. Food i) food shopping ii) cooking/providing meals	vi) income support
- 1. Lack of awareness	ii) Religion/culture and food choices	2. Social security	- 3. Transport	vii) housing benefit
- 2. Food bank food	iii) Bulk-buying	3. Changes to income		viii) child benefit
- 3. Pride/shame	iv) Frozen food			Scottish Welfare Fund
- 4. Feeling undeserving	v) 3. Food and health			ix) child tax credits
- 5. Perceived ineligibility	- Healthy eating - expensive			x) asylum seekers allowance
- 6. Access to other help	vi) 'Poor food choices'	i) job loss		xi) carers allowance xii) pension credit
- 7. 'others are worse off than	vii) Obesity/diabetes/weight			viii) 2. Experiences

me'	management			of/feelings about social security services
- C. Feelings about food bank use	ix) Dental hygiene			i) paperwork
- 1. Shame	x) Health conditions and diet			ii) assessment
- 2. Anger	xi) 4. Running out of money for food			iii) mistrusting
- 3. Embarrassment	- Feelings			iv) impersonal
- 4. Acceptance	i) Strategies a) Skipping meals ii) Family support	B. Household budgeting		v) lacking empathy
- 5. Gratitude	b)	1. Bills		vi) unfairness
6. Indifference	B. Food and children	2. Saving		- Feeling let down
- 7. Last resort	Likes/dislikes	3. Prioritising spending		Poor quality service
- 8. Failure	i) Treats	4. Children and spending		3. Changes to social security system
- 9. Embarrassment related to conspicuousness of venue	ii) iii) Healthy eating	5. poor money management/wrong priorities		More barriers to access
- D. Food bank food	iv) Priority for food expenditure			b)less local/professional discretion
- 1. Types of food	Food indicators of child poverty/neglect	C. Debt		c)changed role of social work – fewer resources
- i) tins	iv) Poor dental hygiene	- 1. Sources of debt		d)SWF slower than previous crisis support
- ii) end of life food	v) Family mealtimes (lack of)	- i) catalogues		vi) e) online
- iii) damaged items	vii) Presenting hungry at	- ii) energy bills		viii) f) more

	school			rules/conditionality
- 2. Uses of food	ix)	- iii) rent arrears		-
- i)Creative uses	x)	- iv) bank loan		A) B. Health Services
- ii)Making it last	C. Food and socialising	- v) debts from asylum seeking		1. Experiences of/feelings about health services
-	i) eating out	- - 2. Worry about debt/fear of debt		i) gatekeepers/advocates to other services (food banks; social security)
-				ii) more empathetic
- iii) giving away	ii) eating with family			iii) anxiety
-	iii) eating with friends			iv) waiting times
E. Food bank users (perceptions of)				C.Social Work
- 1. People	D. Cooking			Changed role in crisis/destitution support
- i)homeless	a) cooking for others			-
- ii)addictions	b) cooking for yourself			D. Advice and other services and facilities
- iii)working poor	c) cooking and enjoyment/skill/pride			1. Types of services used/mentioned
iv)benefits claimants	d)cooking skills/knowledge – cooking from scratch (learning from parents)			i) Citizens Advice
v)families with children				ii) Welfare rights
vi) disabilities/disability benefit				
vii) mental health problems				iii) Carers support group
2. Why they use food banks				i) iv) money/debt

				advice service
i)addictions				v) housing officers – energy advice service
ii) money mismanagement				vi) disabled children's charity
iii) low income/low wages				- vii) support worker
iv) cost of living				
v) benefits sanctions				viii) community centre
vi) chaotic lifestyles				
vii) run out of money				
viii) awareness of the service				
ix)reductions in traditional family				
a) F. Knowledge of food banks				
b) Media (TV, newspapers)				
c) Supermarkets (collections)				
				ix) library
G. Food banks and charity				x)primary care community links worker
a) Identity as recipient of charity				xi)housing/homelessness support
ii) begging				
iii) queuing				
iv)pride				
v) shame				
vi) dependency				
H. Food bank access/referrals				
Process of accessing/referring				
i) Vouchers Official route				
Decision-making				
Reasons for food bank				

referrals			
Clients requesting vouchers			
Food bank referral as only option			
Food bank referral as quickest/best option			
Food bank referral as crisis intervention			
Food bank referral as response to food crisis			
Feelings about food bank referring			
Defeatism (only option)			
Demoralisation			
Uncomfortable (sensitive/personal issue)			
ii)			
iii) Reasons for increase in food bank use			
a) Increased awareness			
iv) Welfare changes - sanctions			
v) Increased cost of living			
vi) Cuts to services			
vii) Public attitudes – less supportive of welfare state			
Other types of food aid/food-related community projects			

References

Acheson, D. (1998) *Independent Inquiry into Inequalities in Health Report*. London: The Stationary Office. [Accessed 20 February 2015]. Available from: https://www.gov.uk/government/publications/independent-inquiry-into-inequalities-in-health-report.

Alber, J. (1995). A framework for the comparative study of social services. *Journal of European Social Policy*. 5, pp.131-149.

Alexander, A. and Smaje, C. (2008). Surplus retail food redistribution: An analysis of a third sector model. *Resources, Conservation and Recycling*. 52, pp.1290–1298.

All-Party Parliamentary Group on Hunger and Food Poverty. (2014). *Feeding Britain: A strategy for zero hunger in England, Wales, Scotland and Northern Ireland.* Available from: https://foodpovertyinquiry.files.wordpress.com/2014/12/food-poverty-feeding-britain-final.pdf.

Andersen, S. A. (1990). Core indicators of nutritional state for difficult-to-sample populations. *Journal of Nutrition.* 120, pp.1557–1600.

de Armino, J. (2014). Erosion of rights, uncritical solidarity and food banks in Spain. In: Riches, G. and Silvasti, T. eds. *First World Hunger Revisited*. New York: Palgrave MacMillan, pp.131-145.

Bacchi, C. (1999). *Women, Policy and Politics: The Construction of Policy Problems*. London, Sage Publishing.

Bambra, C. (2007a). Defamilisation and welfare state regimes: a cluster analysis. *International Journal of Social Welfare.* 16, pp. 326–338.

Bambra, C. (2007b). Going beyond The three worlds of welfare capitalism: regime theory and public health research. *Journal of Epidemiology in Community Health*. 61, pp.1098–1102.

Bambra, C. (2013). In defence of (social) democracy: on health inequalities and the welfare state. *Journal of Epidemiological Community Health*. 67, pp.713-714.

Bates, B., Roberts, C., Lepps, H. and Porter, L. (2017) *The Food & You Survey Wave 4*. London: The Food Standards Agency. [Accessed 8 May 2016]. Available from: https://www.food.gov.uk/sites/default/files/media/document/food-and-you-w4-dev-report.pdf.

BBC (2014) Councils spending £3m on food poverty and food banks. [Online]. 3rd March 2014. [Accessed 12 October 2015]. Available from: http://www.bbc.co.uk/news/uk-26369558.

Beatty, C. and Fothergill, S. (2013). *The local and regional impact of the UK's welfare reforms*. Sheffield: Sheffield Hallam University. [Accessed February 2018]. Available from: http://www.shu.ac.uk/research/cresr/sites/shu.ac.uk/files/hitting-poorest-placeshardest_0.pdf.

Beatty, C. and Fothergill, S. (2016a). The Uneven Impact of Welfare Reform: the financial losses to places and people. Sheffield: Centre for Regional Economic and Social Research Sheffield Hallam University.

Beatty, C. and Fothergill, S. (2016b). The Impact of the New Welfare Reforms on Scotland. Sheffield: Centre for Regional Economic and Social Research Sheffield Hallam University.

Big Lottery Fund (2013). *Support and Connect.* [Accessed 4 June 2018]. Available from: https://www.biglotteryfund.org.uk/global-content/programmes/scotland/support-and-connect.

Bloemen, O. Kontorravdis, E., Marshall, C., Mockford, C. and Wallace, C. (2018). *Dignity in Practice: Learning, tools and guidance for community food providers.* Nourish Scotland and the Poverty Truth Commission. [Accessed 30 January 2018]. Available from: http://www.nourishscotland.org/wp-content/uploads/2018/01/Nourish_Dignity_in_Practice_report_2018_short.pdf.

BMA (2014). *Food banks take a bite from surgery resources.* [Online]. 9 May 2014. [Accessed 8 March 2015]. Available from: https://www.bma.org.uk/news/2014/may/food-banks-take-a-bite-from-surgery-resources.

Boyd Orr, J. (1936). *Food, Health and Income: Report on A Survey of Adequacy of Diet Food Health and Income in Relation to Income*. Manchester: Socialist Health Association.

[Accessed 10th March 2016]. Available from: https://www.sochealth.co.uk/national-health-service/public-health-and-wellbeing/food-policy/food-health-and-income/.

Bradshaw, J., Middleton. S., Davis, A., Oldfield, N., Smith, N., Cusworth, L. and Williams, J. (2008). *A minimum income standard for Britain: what people think*. York: Joseph Rowntree Foundation.

Burnett, J. (1994). The rise and decline of school meals in Britain, 1860-1990. In: Burnett J., Oddly D., eds. *The Origins and Development of Food Policies in Europe.* London: Leicester University Press, pp.55-69.

Burnett, J. and Oddly, D. (1994). Introduction. In: Burnett J., Oddly D., eds. *The Origins and Development of Food Policies in Europe.* London: Leicester University Press, pp.1-6.

Butler, P. (2016). No money for over a month': how benefit delays lead to hunger. *The Guardian*. 22nd July 2016. [Accessed 8th May 2016]. Available from: https://www.theguardian.com/society/patrick-butler-cuts-blog/2016/jul/22/no-money-for-over-a-month-how-benefit-delays-lead-to-hunger.

Cairney. P. and Widfeldt, A. (2015): Is Scotland a Westminster-style Majoritarian Democracy or a Scandinavian-style Consensus Democracy? A Comparison of Scotland, the UK and Sweden. *Regional & Federal Studies*, pp.1-16.

Cairney P, Russell S and St Denny E. (2016). The 'Scottish approach' to policy and policymaking: what issues are territorial and what are universal? *Policy and Politics*. 44 (3), pp. 333-350.

Cantillon, S., and Nolan B. (2001). Poverty within Households: Measuring Gender Differences Using Non -Monetary Indicators. *Feminist Economics*. 7(1), pp. 5-23.

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*. Food Research Collaboration Policy Brief. [Accessed 2 February 2018]. Available from: http://foodresearch.org.uk/wp-content/uploads/2017/01/Final-Using-food-surplus-hunger-FRC-briefing-paper-24-01-17-.pdf.

Caraher, M., (2015). The European Union Food Distribution programme for the Most Deprived Persons of the community, 1987-2013: From agricultural policy to social inclusion policy? *Health Policy*. 119(7), pp. 932-40.

Caraher and Cavicchi (2014). Special Issue: Food Banks. *British Food Journal.* 116(9), pp.1392-1520.

Caraher, M. and Lang, T. (1998). Access to healthy foods: part II. Food poverty and shopping deserts: what are the implications for health promotion policy and practice? *Health Education Journal.* 57(3), pp.202-211.

Caraher, M. and Dowler, E. (2007). Food projects in London: Lessons for policy and practice - A hidden sector and the need for 'more unhealthy puddings ... sometimes'. *Health Education Journal.* 66(2), pp. 188-205.

Care Quality Commission (2015) Monitoring the Mental Health Act in 2014/15, London: CQC.

Carter, K., Krus, K., Blakely, T. (2011). The association of food security with psychological distress in New Zealand and any gender differences. *Social Science Medicine.* 72, pp.1463–1471.

Caruana, E. J., Roman, M., Hernández-Sánchez, J., and Solli, P. (2015). Longitudinal studies. *Journal of Thoracic Disease.* 7(11), pp.537–540.

Centre for Economic and Business Research. (2013). *Hard to Swallow: The Facts about Food Poverty.* Kellogs: Manchester. [Accessed 12 March 2015] Available from: file:///C:/Users/Username/Downloads/Facts+about+Food+Poverty+ReportFINAL%20(1).pdf.

Chase, E. and Walker, R. (2013). The co-construction of shame in the context of poverty: beyond a threat to the social bond. *Sociology.* 47(4), pp.739-754.

Child Poverty Action Group in Scotland. (2017). Social Security Committee Call for Evidence - Social Security (Scotland) Bill. [Accessed 13 March 2018]. Available from: http://www.cpag.org.uk/sites/default/files/CPAG%20Social%20Security%20Bill%20Response%20FINAL.pdf.

Che, J. and Che, J. (2001). Food insecurity in Canadian households. *Health Reports.* 12(4), pp.11-22.

Clarke, J. and Langan. M. (1993). Restructuring Welfare: the British Welfare Regime in the 80s. In: Cochrane, A. and Clarke, J. eds. *Comparing Welfare States: Britain in International Context.* London: Sage/ Open University.

Cloke, P., May, J. and Williams, A. (2017). The geographies of food banks in the meantime. Progress in Human Geography. 41(6), pp.703-726.

Cooper, N., Purcell S. and Jackson. (2014). *Below the Breadline: the relentless rise of food poverty in Britain*. London: Church Action on Poverty, Oxfam and Trussell Trust.

Cummins, S. and Macintyre, S. (2002a). "Food deserts"--evidence and assumption in health policy making. *British Medical Journal*. 325, pp. 436-438.

Cummins, S. and Macintyre, S. (2002b). A Systematic Study of an Urban Foodscape: The Price and Availability of Food in Greater Glasgow. *Urban Studies*. 39(11), pp. 2115 – 2130.

Cummins, S. (2014). Food Deserts. In: Cockerham, W. C., Dingwall, R. and Quah, S. The Wiley Blackwell Encyclopedia of Health, Illness, Behavior, and Society. New York: Wiley Blackwell, pp. 562-566.

Curl, A., Clark, J. and Kearns, A. (2017). Household car adoption and financial distress in deprived urban communities: A case of forced car ownership? *Transport Policy.* 65, pp.61-71.

Cresswell, J. (2009). *Research Design: Qualitative, Quantitative and Mixed Methods Approaches.* London: Sage Publications.

Creswell, J. W. and Plano Clark, V. L. (2018). *Designing and Conducting Mixed Methods Research*. London: Sage Publishing.

Daly, M. (2012). Gender and welfare. In: Gray, M. ed. *Handbook of Social Work*. London: Sage Publishing, pp.81 – 93.

Davis, O. and Baumberg Geiger, G. (2017). Did food Insecurity rise across Europe after the 2008 crisis? An analysis across welfare regimes. *Social Policy and Society*. 16(3), pp.343-60.

Davis, A., Hirsch, D., Padley, M. (2015) A Minimum Income Standard for the UK in 2014. York: Joseph Rowntree Foundation.

Davis, A., Hirsch, D., Padley, M. (2016) *A Minimum Income Standard for the UK in 2016*. York: Joseph Rowntree Foundation.

Defra (2006). Food Security and the UK: An Evidence and Analysis Paper. London: Defra. [Accessed 8 October 2015] Available from: file:///C:/Users/Username/Downloads/8916%20(1).pdf.

Defra (2010). *Food 2030.* London: Defra. [Accessed 8 October 2015]. Available from: http://appg-agscience.org.uk/linkedfiles/Defra%20food2030strategy.pdf.

Defra (2013). Family Food 2012. London: Defra. [Accessed 4 October 2015]. Available from: https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/265243/familyfood-2012report-12dec13.pdf.

Defra (2014). *Food Statistics Pocketbook 2014*. London: Defra. [Accessed 17 February 2015]. Available from: https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/361759/foodpocketbook-2014report-08oct14.pdf.

Denscombe, M. (2002) *Ground rules for good research: a 10 point guide for social researchers*. Buckingham: Open University Press.

Denzin, N. (1978) *Sociological Methods: A Sourcebook*. New York: McGraw Hill.

Department for Work and Pensions (2010). *21st Century Welfare*. London: Department for Work and Pensions. [Accessed 30 October 2016]. Available from: https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/181139/21st-century-welfare_1_.pdf.

De Schutter, O. (2013) Food banks can only plug the holes in social safety nets. *The Guardian.* 27 February 2013. [Accessed 18 March 2015] Available from: https://www.theguardian.com/commentisfree/2013/feb/27/food-banks-social-safety-nets.

Douglas F, Ejebu O, Garcia A, MacKenzie F, Whybrow S, McKenzie L, Ludbrook A, Dowler E. (2015). *The nature and extent of food poverty/insecurity in Scotland.* Edinburgh: NHS Health Scotland.

Dowler, E. and Calvert, C. (1995). *Nutrition and Diet in Lone-parent Households in London*. London: Family Policy Studies Centre.

Dowler, E., Turner. S. and Dobson, B. (2001). *Poverty Bites: Food, Health and Poor Families.* London: CPAG.

Dowler, E. (2002) Food and Poverty in Britain: Rights and Responsibilities. Journal of Social Policy and Administration. 36(6), pp.698-717.

Dowler, E. and Caraher, M. (2003). Local Food Projects - the New Philanthropy? Political Quarterly. 74(1), pp.57-65.

Dowler, E., Kneafsey, M., Lambie, H., Inman, A., Collier, R. (2011) Thinking about food security: engaging with UK consumers. *Critical Public Health*. 21, pp.403-416.

Dowler, E. and O'Connor (2012). Rights-based approaches to addressing food poverty and food insecurity in Ireland and UK. *Social Science and Medicine*. 74, pp.44-51.

Dowler, E. and Lambie-Mumford, H. (2015) How Can Households Eat in austerity? Challenges for Social Policy in the UK. Social Policy and Society. 14(3), pp.417-428.

Dwyer, P. (2017). Rewriting the contract? Conditionality, welfare reform and the rights and responsibilities of disabled people. In: Horsfall, D. and Hudson, J. eds. *Social policy in an era of competiton: from global to local perspectives*. Bristol: The Policy Press, pp.135-149.

Dwyer, P. and Wright, S. (2014) Universal Credit, ubiquitous conditionality and its implications for social citizenship. *Journal of Poverty and Social Justice*. 22(1), pp.27-35.

Ebbinghaus, B. (2012) Comparing Welfare State Regimes: Are Typologies an Ideal or Realistic Strategy? In: *ESPAnet Conference*, *September 6-8, 2012, Edinburgh*. [Accessed 21 June 2016]. Available from:
http://www.cas.ed.ac.uk/__data/assets/pdf_file/0005/89033/Ebbinghaus_-_Stream_2.pdf.

Egan, M., Kearns, A., Mason, P., Tannahill, C., Bond, L., Coyle, J., Beck, S., Crawford, F., Phil Hanlon, P., Lawson, L., McLean, J., Petticrew, M., Sautkina, E., Thomson, H., Walsh, D., for the GoWell Team (2010). Protocol for a mixed methods study investigating the impact of investment in housing, regeneration and neighbourhood renewal on the health and wellbeing of residents: the GoWell programme. *BMC Medical Research Methodology* 10(41).

Elliott, J. (2008). The Narrative Potential of the British Birth Cohort. *Qualitative Research.* 8(3), pp.411 – 421.

Esping-Andersen, G. (1990) *The three worlds of welfare capitalism*. London: Polity.

European Commission (2013). *Your Social Security Rights in Finland.* [Accessed 12 October 2016]. Available from: http://ec.europa.eu/employment_social/empl_portal/SSRinEU/Your%20social%20security%20rights%20in%20Finland_en.pdf.

Eurostat (2016). *People at risk of poverty or social exclusion*. [Accessed 20 June 2017]. Available from: http://ec.europa.eu/eurostat/statistics-explained/index.php?title=People_at_risk_of_poverty_or_social_exclusion

Evans, C. and Harper, C. (2009) A history and review of school meal standards in the UK. *Journal of Human Nutrition and Dietetics*. 22, pp.89-99.

Evers, A. and Laville, J. (2004) Defining the Third Sector in Europe. In: Evers, A. and Laville, J. eds. (2004) *The Third Sector in Europe*. Cheltenham: Edward Elgar Publishing, pp.11-44.

FAO (2016). *Methods for estimating comparable rates of food insecurity experienced by adults throughout the world*. Rome: FAO.

FAO, IFAD, UNICEF, WFP and WHO (2017). The State of Food Security and Nutrition in the World 2017. Building resilience for peace and food security. Rome: FAO.

Feeding America (2015). Feeding America's Website. [Accessed 20 October, 2015]. Available from: http://www.feedingamerica.org/our-work/.

Feilzer, M. (2010). Doing Mixed Methods Research Pragmatically: Implications for the Rediscovery of Pragmatism as a Research Paradigm. *Journal of Mixed Methods Research*. 4(1), pp.6–16.

FESBAL (no date). *Federación Española de Bancos de Alimentos' Website*: [Accessed 4 May 2015]. Available from: https://www.fesbal.org/.

Field, A. (2009) *Discovering Statistics Using SPSS*. London: Sage Publications.

Finnish National Board of Education (2008) *School meals in Finland Investment in learning*. Helsinki: Finnish National Board of Education. [Accessed 18 September 2015] Available from: https://www.oph.fi/download/47657_school_meals_in_finland.pdf.

Fitzpatrick, S., Bramley, G., Sosenko, F., Blenkinsopp, J., Johnsen, S., Littlewood, M., Netto, G. and Watts, B. (2016). *Destitution in the UK*. York: Joseph Rowntree Foundation.

Fletcher, D. and Wright, S. (2018). A hand up or a slap down? Criminalising benefit claimants in Britain via strategies of surveillance, sanctions and deterrence. *Critical Social Policy*. 38(2), pp.323-344.

Food Banks Canada (2016). *Hunger Count 2016.* Toronto: Food Banks Canada. [Accessed 2 December 2016]. Available from: https://www.foodbankscanada.ca/getmedia/6173994f-8a25-40d9-acdf-660a28e40f37/HungerCount_2016_final_singlepage.pdf.

Gardner, D. (1985) Education and the Welfare State: The School Meals and Milk Service, 1944-1980. *Journal of Educational Administration and History*. 17(2), pp.63-68.

Garthwaite, K. (2013) Fear of the Brown Envelope: Exploring Welfare Reform with Long-Term Sickness Benefits Recipients. Social Policy and Administration. 48(7), pp.782-798.

Garthwaite, K. (2016a) Hunger Pains: Life Inside Foodbank Britain. Bristol: Policy Press.

Garthwaite, K. (2016b) 'Stigma, shame and 'people like us': an ethnographic study of foodbank use in the UK. Journal of Poverty and Social Justice. 24(3), pp.277–89.

Garthwaite, K., Collins P., and Bambra C. (2015) Food for thought: an ethnographic study of negotiating ill health and food insecurity in a UK foodbank. *Social Science and Medicine*. 132, pp.38-44.

Gentilini, U. (2013) *Banking on Food: The State of Food Banks in High-income Countries*. London: Institute of Development Studies. [Accessed 12 June 2015]. Available from: http://www.ids.ac.uk/files/dmfile/Wp415.pdf.

Glennerster, H., Hills, J., Piachaud, D. and Webb, J. (2004) *One Hundred Years of Poverty and Policy*. York: Joseph Rowntree Foundation.

Göçmen, I. (2013) The Role of Faith-Based Organizations in Social Welfare Systems: A comparison of France, Germany, Sweden, and the United Kingdom. *Nonprofit and Voluntary Sector Quarterly*. 42(3), pp.495–516.

Gubrium, E, Pellissery, S and Lødemel, I. eds. (2013) *The shame of it: Global perspectives on anti-poverty policies.* Bristol: Policy Press.

Hamelin, A.M., M. Beaudry, and J.P. Habicht. (2002) Characterization of household food insecurity in Quebec: food and feelings. *Social Science and Medicine*. 54(1), pp.119-32.

Hansard (2017) HC Deb. vol.632 cols.363-5, 29 November 2017. [Accessed 12 March 2018] Available from: https://hansard.parliament.uk/commons/2017-11-29/debates/CBDC9A1F-1EC2-4E68-AB52-6BCF8B92662F/FoodInsecurity.

Hansard (2015) HC Deb. Vol 597 col 608-9. 22 June 2015 [Accessed 12 March 2018] Available from: https://hansard.parliament.uk/Commons/2015-06-22/debates/1506227000022/FoodBanks.

Hansard (2013) HL Deb. 2 July 2013 vol 1072-3. [Accessed 2 February 2016] Available from: https://publications.parliament.uk/pa/ld201314/ldhansrd/text/130702-0001.htm.

Hantrais. L and Mangen, S. (1996) *Cross-national research methods in the social sciences*. New York and London: Pinter.

Harris, J. (1997). *William Beveridge: A Biography*. Oxford: Clarendon Press.

Heflin, C.M., Siefert, K., and Williams, D.R. (2005) Food insufficiency and women's mental health: findings from a 3-year panel of welfare recipients. *Social Science of Medicine*. 61, pp.1971–1982.

Helliwell, J., Layard, R. and Sachs, J. (2018). *World Happiness Report 2018*. New York: Sustainable Development Solutions Network.

Hellman, M., Monni, M. and Alanko, A. (2017). Declaring, shepherding, managing: The welfare state ethos in Finnish government programmes, 1950-2015. *Research on Finnish Society*. 10, pp. 9-22.

Hiilamo, H. (2012). Rethinking the role of church in a socio-democratic welfare state. *International Journal of Sociology and Social Policy*. 32(7/8), pp.401-414

Hiilamo, H. (2014). Solidarity in a Nordic Welfare State: the Case of Finland. In: Laitinen, A. and Pessi, A.B. (2014) *Solidarity: theory and practice*. Lanham: Lexington Books, pp.299-317.

Hoekstra, J. (2003). Housing and the Welfare State in the Netherlands: An Application of Esping Andersen's Typology. *Housing, Theory and Society*. 20(2), pp.58-71.

Hogg, E. and Baines, S. (2011) Changing Responsibilities and Roles of the Voluntary and Community Sector in the Welfare Mix: A Review. *Social Policy and Society*. 10, pp 341-352.

Holstein, J. A., and Gubrium, J. F. (2004) The active interview. In: D. Silverman. ed. *Qualitative Research: Theory, Method and Practice*. (2nd edition). London: Sage Publishing, pp. 140-146.

Hood, A and Waters, T. (2017) *Living standards, poverty and inequality in the UK: 2017–18 to 2021–22*. London: The Institute for Fiscal Studies. [Accessed January 2018] https://www.ifs.org.uk/uploads/publications/comms/R136.pdf.

Iacovou, M., Pattieson, D., Truby, H., & Palermo, C. (2013). Social health and nutrition impacts of community kitchens: A systematic review. *Public Health Nutrition*. 16(3), 535-543.

Independent Food Aid Network (2017). *Mapping the UK's Independent Food Banks*. [Accessed 20 December 2017]. Available from: http://www.foodaidnetwork.org.uk/mapping.

Independent Food Aid Network (2018). *Our response to the Asda, Fareshare & Trussell Trust Announcement*. [Accessed 1 March 2018]. Available from: http://www.foodaidnetwork.org.uk/asda-response.

International Labour Organisation (2014). *World Social Protection Report.* Geneva: International Labour Organisation. Available from: http://www.ilo.org/wcmsp5/groups/public/---dgreports/---dcomm/documents/publication/wcms_245201.pdf.

Independent Working Group on Food Poverty (2016). *Dignity: Ending Hunger Together in Scotland*. Edinburgh: Scottish Government. Available from: http://www.gov.scot/Publications/2016/06/8020.

Ippolito M.M., Lyles C.R.,, Prendergast K., Marshall M.B.,, Waxman E., Seligman H.K. (2017). Food insecurity and diabetes self-management among food pantry clients. *Public Health Nutrition*. 20(1), pp.183-189.

Jauhiainen, A., and Mäkinen, J.H. (2017). Why Finland's Basic Income Experiment Isn't Working. *The Economist*, July 20 2017, [Accessed 19 November 2017]. Available from: https://www.nytimes.com/2017/07/20/opinion/finland-universal-basic-income.html.

Jonung, L., Kiander, J. and Vartia, P. (2008). *The great financial crisis in Finland and Sweden*. European Commission: Brussels.

Kainulainen, K., Benn, J., Fjellstrom, C. And Palojoki, P. (2012). Nordic adolescents' school lunch patterns and their suggestions for making healthy choices at school easier. *Appetite*. 59, pp.53-62.

Kangas, O. (2016) *From idea to experiment: Report on universal basic income experiment in Finland*. Helsinki: Kela. [Accessed 12 January 17]. Available from: https://helda.helsinki.fi/bitstream/handle/10138/167728/WorkingPapers106.pdf.

Kela (2018). *Basic Income Experiment Report 2017-18.* [Accessed 2 April 2018]. Available from: http://www.kela.fi/web/en/basic-income-experiment-2017-2018.

Kemeny, J. (2001). Comparative Housing and Welfare: theorising the relationship. *Journal of Housing and the Built Environment*. 16(1), pp.53–70.

Kempson, E. (1996). *Life on a Low Income*. York: Joseph Rowntree Foundation.

Kersbergen, K. (2014). The Great Recession and Welfare State Reform: Is Retrenchment Really the Only Game Left in Town? *Social Policy and Administration.* 48(7), pp.883-904.

Kettunen, P. (2001). The Nordic Welfare State in Finland. *Scandinavian Journal of History*. 26(3), pp.225-247.

Kirkpatrick S, and Tarasuk V. (2009). Food insecurity and participation in community food programs among low-income Toronto families. *Canadian Journal of Public Health*. 100, pp.135-138.

Kirkpatrick S., McIntyre, L., Potestio, L. (2010). Child hunger and long-term adverse consequences for health. *Archives of Paediatrics and Adolescent Medicine*. 164(8), pp.754-762.

Kirkpatrick, S. and Tarasuk, V. (2010). Assessing the relevance of neighbourhood characteristics to the household food security of low-income Toronto families. *Public Health Nutrition*. 13(7), p.1139-1148.

Kuhnle, S and Hort, S. (2004). *The Developmental Welfare State in Scandinavia: Lessons for the Developing World*. Geneva: United Nations Research Institute for Social Development. [Accessed 30 September 2015]. Available from:

http://www.unrisd.org/80256B3C005BCCF9/%28httpAuxPages%29/9C6E3A3338E09652
C1256D8100457272/$file/kuhnle.pdf.

Kuivalainen, S. and Nelson, K. (2012). Eroding minimum income protection in the Nordic
countries? Reassessing the Nordic model of social assistance. In: Kvist, J., Fritzell, J.,
Hvinden, B. and Kangas, O. eds. *Changing Social Equality: the Nordic Welfare Model in
the 21st Century*. Bristol: Policy Press.

Kuivalainen, S. and Niemela, M. (2010). From universalism to selectivism: The ideational
turn of the anti-poverty policies in Finland. *Journal of European Social Policy*. 20(3),
pp.263–276.

Lambie-Mumford, H. (2013a). ''Every town should have one': Emergency food banking in
the UK. *Journal of Social Policy*. 42(1), pp.73-89.

Lambie-Mumford, H. (2013b). Food poverty and regeneration in the UK: Learning from
the New Deal for Communities programme. *Community Development Journal*. 48(4),
pp.540-554.

Lambie-Mumford, H., Crossley, D., Jensen, E., Verbeke, M. and Dowler, E. (2014).
Household Food Security in the UK: A Review of Food Aid Final Report. Warwick: Food
Ethics Council and University of Warwick.

Lambie-Mumford, H. & Snell, C. (2015). *Heat or Eat: Food and Austerity in Rural
England: Final Report*. Working Papers of the Communities & Culture Network, 6.

Lambie-Mumford, H. (2017). *Hungry Britain: The Rise of Food Charity*. Bristol: Policy
Press.

Lang, T. (2001). Forward. In: Dowler, E., Turner. S. and Dobson, B. *Poverty Bites: Food,
Health and Poor Families*. London: CPAG.pp. i-xv.

Lang, T., Barling, D. and Caraher, M. (2009). *Food Policy: integrating health,
environment and society*. Oxford: Oxford University Press. [Accessed: August 20, 2015].
Available from:
http://www.oxfordscholarship.com/view/10.1093/acprof:oso/9780198567882.001.0001/ac
prof-9780198567882-chapter-8.

Lang, T. Caraher, M., Carr-Hill, R., and Dixon, P. (1999). *Cooking Skills and Health.*
London: Health Education Authority.

Law, A. and Mooney, G. (2006). "We've never had it so good': the 'problem' of the working class in devolved Scotland. *Critical Social Policy*. 26(3), pp.523-542.

Leather, S. (1996). *The Making of Modern Malnutrition*. London: Caroline Walker Trust.

Legard, K. and Ward (2003). In-depth Interviews. In: Richie J. and Lewis, J. eds. *Qualitative Research Practice*. London, Sage Publishing, pp.138-169.

Leibfried, S. and Mau, S. (2008). *Welfare States: Construction, Deconstruction, Reconstruction*. Cheltenham: Edward Elgar Publishing. [Accessed 20 November 2016]. Available from:
 http://www.sfb597.uni-bremen.de/download/en/publikationen/sfbReihen_toc_Welfare_States.pdf.

Lewis, J. (1999). Reviewing the Relationship Between the Voluntary Sector and the State in Britain in the 1990s. *International Journal of Voluntary and Nonprofit Organizations*. 10(3), pp.255-270.

Lewis, J., Campbell, M. and Huerta, C. (2008). Patterns of paid and unpaid work in Western Europe: gender, commodification, preferences and the implications for policy. *Journal of European Social Policy*. 18(1), pp.21-37.

Lister, R. (2009). A Nordic Nirvana? Gender, Citizenship, and Social Justice in the Nordic Welfare States. *Social Politics: International Studies in Gender, State & Society*. 16(2), pp.242–278.

Lister, R. (2004). *Poverty*. Oxford: Polity Press.

Lister, R. (1997). *Citizenship: Feminist Perspectives*. London: Macmillan.

Lødemel, I. (1997). *The Welfare Paradox. Income Maintenance and Personal Social Services in Norway and Britain, 1946-1966*. Oslo: Universitetsforlaget.

Loopstra, R. (2014) *Household Food Insecurity in Canada: Towards an Understanding of Effective Interventions.* PhD Thesis, University of Toronto, Toronto.

Loopstra, R. and Tarasuk, V. (2012). The Relationship between Food Banks and Household Food Insecurity among Low-Income Toronto Families. *Canadian Public Policy*. 38(4), pp.497-514.

Loopstra, R. and Tarasuk, V. (2013). Severity of household food insecurity is sensitive to change in household income and employment status among low-income families. *Journal of Nutrition.* 143(8):1316-23.

Loopstra, R. and Tarasuk, V. (2015) Food Bank Usage Is a Poor Indicator of Food Insecurity: Insights from Canada. *Social Policy and Society.* 14(3), pp.443–455.

Loopstra, R., Reeves, A., Taylor-Robinson, D., Barr B., McKee M., and Stuckler D. (2015). Austerity, sanctions, and the rise of food banks in the UK. *British Medical Journal.* [Accessed 12 March 2015]. Available from: https://www.bmj.com/content/350/bmj.h1775.

Loopstra, R., Reeves, A., McKee, M. and Stuckler, D. (2016). Food insecurity and social protection in Europe: Quasi-natural experiment of Europe's great recessions 2004-2012. *Preventive Medicine.* 89, pp.44-50.

Loopstra, R. and Lalor, D. (2017) *Financial Insecurity, Food Insecurity, and Disability: The Profile of People Receiving Emergency Food Assistance from The Trussell Trust Foodbank Network in Britain.* Salisbury: Trussell Trust, University of Oxford, ESRC, King's College London.

Loopstra, R., Fledderjohann, J, Reeves, A and Stuckler, D (2018). The impact of welfare benefit sanctioning on food insecurity: a dynamic cross-area study of food bank usage in the UK. *Journal of Social Policy.* 1-21.

Lorenz, S. (2012). Socio-ecological consequences of charitable food assistance in the affluent society: The German Tafel. *International Journal of Sociology and Social Policy.* 32, pp.386–400.

Mack, J. and Lansley, S. (1985) *Poor Britain.* London: George Allen and Unwin.

MacLeod, M.A. (2015). *Making the Connections: A study of emergency food aid in Scotland.* Glasgow: Poverty Alliance.

MacLeod, M.A. (2016) *Food aid in Finland: Learning from a Nordic Welfare State.* Poverty Alliance. [Accessed 10 October 2016]. Available from: https://povertyalliance.wordpress.com/2016/10/18/food-aid-in-finland-learning-from-a-nordic-welfare-state/.

MacLeod, M.A., Curl, A., and Kearns, A. (2018). Understanding the Prevalence and Drivers of Food Bank Use: Evidence from Deprived Communities in Glasgow. *Social Policy and Society*. 1-20.

Main, G and Bradshaw, J. (2014). *Child poverty and social exclusion: Final report of 2012 PSE study.* York: Poverty and Social Exclusion in the UK. [Accessed 13 November 2015]. Available from: http://www.poverty.ac.uk/sites/default/files/attachments/PSE-Child-poverty-and-exclusion-final-report-2014.pdf.

Manow, P., and Van Kersbergen, K. (2009). Religion and the Western Welfare State-The Theoretical Context. In: Manow, P. and Van Kersbergen, K. eds. *Religion, class coalitions and the welfare states*. Cambridge: Cambridge University Press, pp.1-38.

Mason, R. (2016). No scrapping of triple-lock pension protection before 2020, says No 10. *The Guardian*, July 2016. [Accessed 18 January 2016]. Available from: https://www.theguardian.com/money/2016/jul/31/triple-lock-pension-protection-to-stay-downing-street-ros-altmann.

Matheson, J., and McIntyre, L. (2014). Women respondents report higher household food insecurity than do men in similar Canadian households. *Public Health Nutrition*. 17(1), pp.40-8.

May J, Cloke P and Williams A (2014) *Emergency food provision in the UK: A preliminary survey.* Submitted to the All-Party Parliamentary Inquiry into Hunger and Food Poverty in Britain, July 2014.

May, J., Williams, A., Cloke, P. (2018). *The variegated geographies of rural food banking in the UK*. UK Food and Poverty Conference, 16-17 April 2018, Kings College London.

McCartney, G. (2011) Illustrating health inequalities in Glasgow. *Journal of Epidemiology and Community Health*. 65(1), p.94.

McIntosh, A. and Zey, M. (1989) Women as gatekeepers of food consumption: A sociological critique. *Food and Foodways: Explorations in the History and Culture of Human Nourishment*. 3(4), pp.317-332.

McEwen, N. (2002). State welfare nationalism: The territorial impact of welfare state development in Scotland. *Regional and Federal Studies*. 12(1), pp.66–90.

McIntyre L., Travers K., and Dayle J.B. (1999). Children's feeding programs in Atlantic Canada: reducing or reproducing inequalities? *Canadian Journal of Public Health*. 90(3). pp.196-200.

McIntyre L., Williams J.V., Lavorato, D.H., Patten S. (2012) Depression and suicide ideation in late adolescence and early adulthood are an outcome of child hunger. *Journal of Affective Disorders*. 150(1), pp.123-9.

McIntyre, L., Patterson P., and Mah, C. (2016). A framing analysis of Canadian household food insecurity policy illustrates co-construction of an intractable problem. *Critical Policy Studies*, pp.1-20.

McNeill, J., Scullion, L., Jones, K. and Stewart, A.B.R., (2017). Welfare conditionality and disabled people in the UK: claimants' perspectives. *Journal of Poverty and Social Justice*. 25(2), pp.177-180.

Meier Jæger, M. (2012). Do we all (dis)like the same welfare state? Configurations of public support for the welfare state in comparative perspective. In: Kvist, J., Fritzell, J., Hvinden, B., Kangas, O. *Changing social equality: The Nordic welfare model in the 21st century.* Bristol: Policy Press, pp.45-68.

Midgely, J. (2013). The logics of surplus food redistribution. *Journal of Environmental Planning and Management*. 57(12), pp.1872-1892.

Mikkonen, J. (2013). The Politics of Poverty in Finland. *Social Alternatives*. 32(1). [Accessed 20 October 2016]. Available from: http://mikkonen.kapsi.fi/archive/Mikkonen-2013-The_politics_of_poverty_in_Finland.pdf

Millar, J., and Bennett, F. (2017). Universal Credit: Assumptions, Contradictions and Virtual Reality. *Social Policy and Society*. 16(2), pp.169–182.

Mooney, G. and Poole, L. (2012). 'A land of milk and honey'? Social policy in Scotland after Devolution. *Critical Social Policy*. 24(4), pp.458–483.

Mooney, G. and Scott, G. (2016). Welfare, equality and social justice: Scottish independence and the dominant imaginings of the 'New' Scotland. *Ethics and Social Welfare*. 10(3), pp.239–251.

Morgan, K. (2015). Nourishing the city: The rise of the urban food question in the Global North. *Urban Studies*. 52(8), pp.1379-1394.

Munro, J. (2015) Crisis? What crisis? How politicians ignore the existence of food banks. *The Guardian.* 22nd April 2015. [Accessed 17th January 2017]. Available from: https://www.theguardian.com/commentisfree/2015/apr/22/crisis-what-crisis-politicians-ignore-food-banks.

Narayan, D., Chambers, R., Shah, M. and Petesch, P. (2000). *Voices of the Poor: Crying out for Change*. New York: Oxford University Press/World Bank.

National Centre for Social Research (2008). *Low Income Diet and Nutrition Survey, 2003-2005*. UK Data Service. Available from: https://discover.ukdataservice.ac.uk/catalogue/?sn=5808&type=data%20catalogue.

National Institute for Health and Welfare (2015). *Adequacy of basic social security in Finland 2011–2015*. Helsinki: National Institute for Health and Welfare. [Accessed 2 December 2016]. Available from: https://helda.helsinki.fi/bitstream/handle/10138/156544/WorkingPapers80.pdf?sequence=1

Nordensvard, J. and Ketola, M. (2015). Nationalist Reframing of the Finnish and Swedish Welfare States – The Nexus of Nationalism and Social Policy in Far-right Populist Parties. *Social Policy and Administration*. 49(3), pp.356-375.

Northern Housing Consortium (2015). Real Life Reform: Report 6. Sunderland: Northern Housing Consortium. [Accessed 2 November 2015]. Available from: https://www.northern-consortium.org.uk/wp-content/uploads/files/real-life-reform/Report%206.pdf.

Oakley, A (1981). Interviewing women: A contradiction in terms? In: Roberts, H. ed. *Doing Feminist Research*. London: Routledge and Kegan Paul, pp.30–61.

O'Connor, N., Farag, K. and Baines, R. (2016). What is food poverty? A conceptual framework. *British Food Journal*. 118(2), pp.429-449.

OECD (2018a) *General government spending (indicato*r). [Accessed 4 April 2018], Available from: https://data.oecd.org/gga/general-government-spending.htm.

OECD (2018b) *Income distribution and poverty.* [Accessed 4 April 2018]. Available from: http://www.oecd.org/social/income-distribution-database.htm.

Office for National Statistics (2017). *Living Costs and Food Survey.* [Accessed 8 May 2018]. Available from:

https://www.ons.gov.uk/peoplepopulationandcommunity/personalandhouseholdfinances/incomeandwealth/methodologies/livingcostsandfoodsurvey.

Padley, M., Valadez, L., and Hirsch, D. (2015) Households Below a Minimum Income Standard: 2008/09 TO 2012/13. Joseph Rowntree Foundation. [Accessed 3 May 2015]. Available from: http://www.jrf.org.uk/sites/files/jrf/WEB_Padley%20Findings.pdf.

Panjunen, T. (2016) Hapeallisia almuja. 24 November 2016. *Kotimaa.* [scanned article received via email].

Pareliussen, J., Hwang, H. and Viitamäki, H. (2018). Basic income or a single tapering rule? Incentives, inclusiveness and affordability compared for the case of Finland. *OECD Economics Department Working Papers*. No. 1464. Paris: OECD Publishing.

Pearson, T., Russell J., Campbell M.J., Barker, M.E. (2005) Do 'food deserts' influence fruit and vegetable consumption? A cross-sectional study. *Appetite*. 45(2), pp.195-7.

Perry, J., Sefton, T., Williams, M., Haddad, M. (2014) *Emergency Use Only: Understanding and Reducing the Use of Food Banks in the UK*. Oxford: Oxfam GB. [Accessed 2 February 2015]. Available from: http://policy-practice.oxfam.org.uk/publications/emergency-use-only-understanding-and-reducing-the-use-of-food-banks-in-the-uk-335731.

Pessi, A.B., Angell, O., Pettersson, P. (2009). Nordic Majority Churches as Agents in the Welfare State: Critical Voices and/or Complementary Providers? *The Finnish Society for the Study of Religion*. 45(2), pp.207–34.

Pessi, A.B., and Grönlund, H. (2012). The Place of the Church: Public Sector or Civil Society? Welfare Provision of the Evangelical Lutheran Church of Finland. *Journal of Church and State*. 54(3), pp.353-374.

Pfeiffer, S., Ritter, T. and Hirseland, A. (2011). Hunger and nutritional poverty in Germany: quantitative and qualitative empirical insights. *Critical Public Health*. 21(4), pp.417–428.

Pfeiffer, S., Ritter, T., & Oestreicher, E. (2015). Food Insecurity in German households: Qualitative and Quantitative Data on Coping, Poverty Consumerism and Alimentary Participation. *Social Policy and Society*. 3, pp.483-495.

Piachaud, D. and Webb, J. (1996). *The Price of Food: Missing out on Mass Consumption*. London: London School of Economics.

Pietinen, P., Mannisto, S., Valsta, L. and Sarlio-Lahteenkorva, S. (2010). Nutrition policy in Finland. *Public Health Nutrition*. l13(6), pp.901-906.

Platts, A. and Waterton, J. (2015) *Becoming a Good Food Nation: An analysis of consultation responses*. Edinburgh: Scottish Government. [Accessed 12 June 2016]. Available from: http://www.gov.scot/Resource/0046/00469837.pdf.

Poppendieck, J. (2014). Food Assistance, Hunger and the End of Welfare in the USA. In: Riches, G. and Silvasti, T. eds. *First World Hunger Revisited: Food Charity or the Right to Food*. New York: Palgrave MacMillan, pp.176-190.

Poppendieck, J. (1998). *Sweet Charity? Emergency Food and the End of Entitlement*. New York: Viking.

Power, E. (1999). Combining Social Justice and Sustainability for Food Security. In: Koc, M. ed. *For Hunger-proof Cities: Sustainable Urban Food Systems*. Ottawa: International Development Research Centre, pp.30-35.

Prattala, R., Roos, G, Hulshof, K. and Sihto, M. (2002) Food and nutrition policies and interventions. In: Mackenbach, J. and Bakker, M. eds. *Reducing Inequalities in Health: A European Perspective*. London: Taylor and Francis, pp.104-121.

Prayogo, E., Chater, A., Chapman, S., Barker, M., Rahmawati, N., Waterfall, T., Grimble, G. (2017). Who uses foodbanks and why? Exploring the impact of financial strain and adverse life events on food insecurity. *Journal of Public Health*.

Purdam, K., Garratt, E. and Esmail, A. (2015). Hungry? Food insecurity, social stigma and embarrassment in the UK. *Sociology*. 50(6), pp.1072–88.

Radimer, K.L., Olson, C.M., Greene, J.C., Campbell, C.C. and Habicht, J.P. (1992). Understanding hunger and developing indicators to assess it in women and children. *Journal of Nutrition Education*. 24(Suppl), pp.36–45.

Radimer, K.L. (2002). Measurement of household food security in the USA and other industrialised countries. *Public Health Nutrition*. 5(6), pp.859-64.

Raulio, S., Roos, E. and Prattala, R. (2010). School and workplace meals promote healthy food habits. *Public Health Nutrition*. 13(6), pp.987-992.

Reeves, A., Loopstra, R. and Stuckler, D. (2017). The growing disconnect between food prices and wages in Europe: cross-national analysis of food deprivation and welfare regimes in twenty-one EU countries, 2004–2012. *Public Health Nutrition.* 20(8), pp.1414-1422.

Ribar, D., and Hamrick, K. (2003). *Dynamics of Poverty and Food Sufficiency*. United States Department of Agriculture. [Accessed 12 September 2017]. Available from: https://naldc.nal.usda.gov/download/34141/PDF.

Riches, G. (1997) Hunger, food security and welfare policies: issues and debates in First World societies. *Proceedings of the Nutrition Society*. 56, pp.63-74.

Riches, G. (1999). Advancing the human right to food in Canada: social policy and the politics of hunger, welfare, and food security. *Agriculture and Human Values*. 16, pp.203-11.

Riches, G. and Tarasuk, V. (2014) Canada: Thirty Years of Food Charity and Public Policy Neglect. In: Riches, G. and Silvasti, V. eds. *First World Hunger Revisited*. New York: Palgrave MacMillan, pp.42-56.

Richie, J., Lewis, J. and Elam, G. (2003a) Designing and Selecting Samples. In *Qualitative Research Practice* Richie J. and Lewis, J. eds. London: Sage Publishing, pp.77-108

Richie, J., Spencer, L., and O'Connor, W., (2003b) Generalising from Qualitative Data. In: Richie J. and Lewis, J. eds. *Qualitative Research Practice*. London, Sage Publishing, pp.219-262.

Richie, J. and Ormston, R. (2014). The application of Qualitative Methods in Social Research. In: Richie J. and Lewis, J. eds. *Qualitative Research Practice*. London, Sage Publishing, pp.27-46.

Rittakallio, V. (2001) Multidimensional Poverty in the Aftermath of the Recession: Finland in 1995 and 2000. In: *Down from the heavens, Up from the Ashes: The Finnish economic crisis of the 1990s in the light of social and economic research*. Government Institute for Economic Research: Helsinki, pp.411-433.

Roos, G., Lean, M., and Andersen, A. (2002) Dietary interventions in Finland, Norway and Sweden: nutrition policies and strategies. *Journal of Human Nutrition and Dietetics*. 15, pp.99-110.

Rose D and Oliveira V (1997) Nutrient intakes of individuals from food-insufficient households in the United States. *American Journal of Public Health.* 87(6), pp.1956–1961.

Rothstein, B. (1998) *Just Institutions Matter: The Moral and Political Logic of the Universal Welfare State*. Cambridge: Cambridge University Press.

Sahota, P., Woodward, J., Molinari, R., and Pike, J. (2014). Factors influencing take-up of free school meals in primary- and secondary-school children in England. *Public Health Nutrition*. 17(6), 1271–1279.

Sainsbury, D. (1993). Dual Welfare and Sex Segregation of Access to Social Benefits: Income Maintenance Policies in the UK, the US, the Netherlands and Sweden. *Journal of Social Policy*. 22, pp.69-98.

Salamon, L. (1987). Of Market Failure, Voluntary Failure, and Third-Party Government: Toward a Theory of Government-Nonprofit Relations in the Modern Welfare State. *Nonprofit and Voluntary Sector Quarterly*. 16(1-2), pp.29-49.

Salamon, L. (1995). *Partners in Public Service: Government-Nonprofit Relations in the Modern Welfare State*. Baltimore: The Johns Hopkins University Press.

Salamon, L., and Anheier, H. (1998). Social Origins of Civil Society: Explaining the Nonprofit Sector Cross-Nationally. *Voluntas: International Journal of Voluntary and Nonprofit Organizations*. 9(3). pp.213-248.

Salonen, A.S. (2014) The Christmas celebration of secondary consumers: Observations from food banks in Finland. *Journal of Consumer Culture*. 16(3), pp.870-886.

Salonen, A.S. (2016). 'You can vote with your feet if you want'. Users' responses to religious services in the context of food charity in a Finnish city. *Social Compass*. 63(1), pp.109-124.

Salonen, A.S. (2017). Lining up for charity: A study of the social organization and communal qualities of breadlines in a Finnish city. *International Journal of Sociology and Social Policy*. 37(3/4), pp.218-230.

Savvides. N., Al-Youssef, J., Colin, M., and Garrido, C. (2014). Journeys into Inner/Outer Space: Reflections on the Methodological Challenges of Negotiating Insider/Outsider Status in International Educational Research. *Research in Comparative and International Education*. 9(4), pp.412 – 425.

Scheff, T. (2000). Shame and the Social Bond. *Sociological Theory*. 18, pp.84–98.

Schmuecker, K. (2017). *Universal Credit: a Joseph Rowntree Foundation briefing*. York: Joseph Rowntree Foundation.

Scottish Executive (2003). *Hungry for Success - A Whole School Approach to School Meals in Scotland*. [Accessed 17 September 2018]. Available from: https://www.gov.scot/Publications/2003/02/16273/17588.

Scottish Government (2014a). Foodbank fund open for applications [Press Release] [Accessed 22 July 2015] Available from: https://news.gov.scot/news/foodbank-fund-open-for-applications.

Scottish Government (2014b) *Recipe for Success: Scotland's National Food and Drink Policy - Becoming a Good Food Nation*. [Accessed 5 June 2018]. Available from: https://beta.gov.scot/publications/recipe-success-scotlands-national-food-drink-policy-becoming-good-food/documents/00453219.pdf?inline=true.

Scottish Government (2014c). *JSA Sanctions in Scotland: An analysis of the sanctions applied to claimants of Jobseeker's Allowance in Scotland*. Edinburgh: Scottish Government.

Scottish Government (2016a). *Government Expenditure and Revenue: Scotland 2015-16*. [Accessed 13 April 2018]. Available from: http://www.gov.scot/Resource/0050/00504649.pdf.

Scottish Government (2016b). *Food poverty: response to short-life working group report*. [Accessed 4 June 2018]. Available from: https://beta.gov.scot/publications/food-poverty-response-to-working-group/.

Scottish Government (2016c). Fair Food Transformation Fund. Edinburgh: Scottish Government. [Accessed 30 August 2016]. Available from: http://www.gov.scot/Topics/People/fairerscotland/tacklingpovertyinscotland/food-poverty.

Scottish Government (2016d) *Scottish Index of Multiple Deprivation 2016*, Edinburgh: Scottish Government. [Accessed 4 October 2016]. Available from: http://www.gov.scot/Topics/Statistics/SIMD.

Scottish Government (2017a). *Scotland's Baby Box Pilot Research*. Edinburgh: Scottish Government.

Scottish Government (2017b). *New Scots Integrating Refugees in Scotland's Communities 2014 - 2017 Final Report*. Edinburgh: Scottish Government. [Accessed 12 December 2017]. Available from: http://www.gov.scot/Publications/2017/06/8891/2.

Scottish Government (no date). *Social Security: Scottish Welfare Fund.* [Accessed 4 June 2018]. Available from: https://beta.gov.scot/policies/social-security/income-related-benefits/.

Scottish Human Rights Commission (2017). *Written evidence to the Social Security Committee*. [Accessed 3 April 2018]. Available from: http://www.parliament.scot/S5_Social_Security/Inquiries/068._Scottish_Human_Rights_Commission.pdf

Scottish Parliament (2001). *School Meals (Scotland) Bill.* Scottish Parliament: Edinburgh. [Accessed 17th September 2018]. Available from: http://www.parliament.scot/S1_Bills/School%20Meals%20(Scotland)%20Bill/b42s1en.pdf

Scottish Parliament (2014) *2nd Report (Session 4) Food Banks and Welfare Reform*. Scottish Parliament: Edinburgh. Accessed 12 December 2015. Available from: http://www.scottish.parliament.uk/S4_Welfare_Reform_Committee/Reports/wrr-14-02w.pdf.

Seligman, H., Laraia, B. and Kushel, M. (2010). Food insecurity is associated with chronic disease among low-income NHANES participants. *Journal of Nutrition*. 140, 304–310.

Sen, A. (1981). *Poverty and Famines: An Essay on Entitlement and Deprivation*. Oxford: Clarendon Press.

Shannon-Baker, P. (2016). Making Paradigms Meaningful in Mixed Methods Research. *Journal of Mixed Methods Research*. 10(4), pp.319-334.

Silvasti, T. and Karjalainen, J. (2014). Hunger in a Nordic Welfare State: Finland. In: Riches, G. and Silvasti, T. eds. *First World Hunger Revisited Food Charity or the Right to Food?* New York: Palgrave MacMillan.

Silvasti, T. (2015). Food Aid – Normalising the Abnormal in Finland. *Social Policy and Society*. 14(3). pp.471–482.

Sipila, J. (ed.) (1997). *Social Care Services: The Key to the Scandinavian Welfare Model*. Avebury: Aldershot.

Smith, D.M., Cummins, S., Taylor, M., Dawson, J., Marshall, D., Sparks, L. and Andersen, A.S. (2010). Neighbourhood food environment and area deprivation: spatial accessibility to grocery stores selling fresh fruit and vegetables in urban and rural settings. *International Journal of Epidemiology*. 39(1), pp.277-284.

Sosenko, F., Livingstone N., and Fitzpatrick, S. (2013) *Overview of Food Aid Provision in Scotland*. Scottish Government: Edinburgh.

Sustainable Food Cities (no date). *Sustainable Food Cities Website*. [Accessed 3 May 2016]. Available from: http://sustainablefoodcities.org/about.

Tarasuk, V. (2001) A critical examination of community-based responses to household food insecurity in Canada. *Health Education Behaviour*. 28(4), pp.487-99.

Tarasuk, V, and Eakin, J. (2003). Charitable Food Assistance as a Symbolic Gesture: An Ethnographic Study of Food Banks in Ontario. *Social Science and Medicine*. 56(7), pp.1505–1515.

Tarasuk V. and Eakin J. (2005) Food assistance through 'surplus' food: insights from an ethnographic study of food bank work. *Agriculture and Human Values*. 22, pp.177-86.

Tarasuk, V., Mitchell, A., McLaren, L., McIntyre, L. (2013) Chronic Physical and Mental Health Conditions among Adults May Increase Vulnerability to Household Food Insecurity. *The Journal of Nutrition*. 143(1), pp 1785 – 1793.

Tarasuk, V., Mitchell, A. and Dachner (2014) *Household Food Insecurity in Canada, 2014*. Toronto: Research to identify policy options to reduce food insecurity (PROOF). [Accessed 20 September 2015]. Available from: http://proof.utoronto.ca/wp-content/uploads/2016/04/Household-Food-Insecurity-in-Canada-2014.pdf.

Taylor-Gooby, P., Leruth, B.and Chung H. (2017a). 'The European Context'. In: Taylor-Gooby, P. Leruth, B.and Chung H. Eds. *After Austerity: Welfare State Transformation in Europe after the Great Recession*. Oxford: Oxford University Press, pp.1-27.

Taylor-Gooby, P., Leruth, B. and Chung, H. (2017b). Where next for the UK Welfare State? . In: Taylor-Gooby, P. Leruth, B.and Chung H. Eds. *After Austerity: Welfare State Transformation in Europe after the Great Recession*. Oxford: Oxford University Press, pp.48-67.

They Work for You (2018). Scottish Parliament Debate. 25 January 2018. [Accessed 8 March 2018]. Available from: https://www.theyworkforyou.com/sp/?id=2018-01-25.2.0.

Thomas, G. (2009) *How to do your Research Project.* London: Sage.

Tikkanen, I. and Urho, U. (2009) Free school meals, the plate model and food choices in Finland. *British Food Journal*. 111(2), pp.102-119.

Timonen, V. (2003). *Restructuring the Welfare State: Globalization and Social Policy Reform in Finland and Sweden*. Cheltenham: Edward Elgar Publishing.

Townsend, P. (1993). *The international analysis of poverty.* London and New York: Harvester Wheatsheaf.

Trichopoulou, A., Naska, A., and Costacou, T. (2002). Disparities in food habits across Europe. *Proceedings of the Nutrition Society*. 61, pp.553–558.

Trussell Trust (2017). *Latest Stats, 2017*. [Accessed 20.10.2017]. Available from: https://www.trusselltrust.org/news-and-blog/latest-stats/.

United Nations Human Rights Office of the High Commissioner, (2017). *Special Rapporteur on the right to food*. [Accessed 12th May 2017]. Available from: http://www.ohchr.org/EN/Issues/Food/Pages/FoodIndex.aspx.

University of Sheffield (no date). *Dr. Hannah Lambie-Mumford.* [Accessed 20 November 2017]. Available from: http://speri.dept.shef.ac.uk/people/hannah-lambie-mumford/.

Uusitalo, H. (2000). *Social policy in a deep economic recession and after: The case of Finland*. National Research and Development Centre for Welfare and Health: Helsinki. [Accessed 9 March 2017]. Available from: https://www.issa.int/html/pdf/helsinki2000/topic4/2uusitalo.PDF.

Van der Horst, H., Pascucci, S. and Bol, W. (2014). The "dark side" of food banks? Exploring emotional responses of food bank receivers in the Netherlands. *British Food Journal*. 116(9), pp.1506-1520.

Van de Velde, S., Bambra, C., Van der Bracht, K. Eikemo, T., and Bracke, P. (2014). Keeping it in the family: the self-rated health of lone mothers in different European welfare regimes. *Sociology of Health & Illness*. 36(8), pp.1220-1242.

Vesa, M. (2016) Skottitutkija tyrmistyi näkyä ja hajua Helsingin kadulla: "Voimme oppia, kuinka asioita ei kannata tehdä". 20 October 2016. *Ilta Sanomat*. [Accessed 22 October 2016]. Available from: http://www.iltasanomat.fi/kotimaa/art-2000001934083.html.

Vozoris, N. and Tarasuk, V. (2003) Household Food Insufficiency Is Associated with Poorer Health. *The Journal of Nutrition*. 133(1), pp.120–126.

Wakefield, S., Fleming, J., Klassen, C. and Skinner A. (2012) Sweet Charity, revisited: Organizational responses to food insecurity in Hamilton and Toronto, Canada. *Critical Social Policy*. 33(3), pp. 427-450.

Walker, R. (2014) *The Shame of Poverty*. Oxford: Oxford University Press.

Walker, R., Kyomuhendo, C., Chase, E. and Choudry, S. (2013) Poverty in Global Perspective: Is Shame a Common Denominator? *Journal of Social Policy*. 42(2) pp.215-233.

Walsh, D., McCarthey, G., Collins, C., Taulbat, M., Batty, D. (2016). *History, Politics and Vulnerability: explaining excess mortality in Scotland and Glasgow*. Glasgow: Glasgow Centre for Population Health. Accessed 19 April 2018. Available from: file:///C:/Users/Username/OneDrive/Documents/Excess_mortality_final_report_with_appendices.pdf.

Ware, J., Kosinski, A., and Keller, S. (1998). *SF-12: How to Score the SF-12 Physical and Mental Health Summary Scales*. Boston: New England Medical Centre. [Accessed 19 March 2018]. Available from: https://www.researchgate.net/publication/242636950_SF-12_How_to_Score_the_SF-12_Physical_and_Mental_Health_Summary_Scales.

Watts, B., Fitzpatrick, S., Bramley G. and Watkins, D. (2014). *Welfare Sanctions and Conditionality in the Benefits System*. York: Joseph Rowntree Foundation. [Accessed 7 August 2017]. Available from: https://www.jrf.org.uk/sites/default/files/jrf/migrated/files/Welfare-conditionality-UK-Summary.pdf.

Weipking, P. and Handy, F. (2015). *The Palgrave Handbook of Global Philanthropy*. London: Palgrave MacMillan.

Weisbrod, B. (1977). *The Voluntary Nonprofit Sector*. Lexington, Massachusetts: Lexington Books.

Wells, R. and Caraher, M. (2014). UK print media coverage of the food bank phenomenon: from food welfare to food charity?, *British Food Journal*. 116(9), pp.1426 – 1445.

Wijkström, Filip. (2004). The Role of Civil Society. The Case of Sweden in International Comparison. *The 1st International Korean Studies Workshop on: "Civil Society & Consolidating Democracy in Comparative Perspective" May 21-22, 2004*. [Accessed 30 April 2017]. Available from:
https://www.researchgate.net/publication/5093173_The_Role_of_Civil_Society_The_Case
_of_Sweden_in_International_Comparison?enrichId=rgreq-
13e255e5bfe0af7f3f44144e355260d1-
XXX&enrichSource=Y292ZXJQYWdlOzUwOTMxNzM7QVM6MTUxMDY4MTkzMz
MzMjQ5QDE0MTMwMjg4NzI0NTk%3D&el=1_x_3&_esc=publicationCoverPdf.

Wilkinson, R. and Pickett, K. (2009). *The Spirit Level: Why Equality is Better for Everyone*. London: Penguin Books.

WRAP (2015). *Household Food Waste in the UK, 2015*. [Accessed 9 February 2016]. Available from:
http://www.wrap.org.uk/sites/files/wrap/Household_food_waste_in_the_UK_2015_Report.
pdf.

Wrieden, W.L., Andersen, A.S., Longbottom, P., Valentine, K., Stead. M., Caraher, M., Lang, T., Gray, B. and Dowler, E. (2007). The impact of a community-based practical food skills intervention on cooking confidence, food preparation methods and dietary choices – an exploratory trial. *Public Health Nutrition*.10(2), pp.203-211.

Wrigley, N. (2002). 'Food Deserts' in British Cities: Policy Context and Research Priorities. *Urban Studies*. 39(11), pp. 2029–2040

Yee, JL and Niemeier, D. (1996). Advantages and Disadvantages: Longitudinal vs. Repeated Cross-Section Surveys. Project Battelle 94-16, FHWA, HPM-40.

Zerafati Shoae, N., Omidvar N, Ghazi-Tabatabaie M, Houshiar Rad A, Fallah H, Mehrabi Y. (2007) Is the adapted Radimer/Cornell questionnaire valid to measure food insecurity of urban households in Tehran, Iran? *Public Health Nutrition*. 10(8), pp.855-61.