

# Food Insecurity in Warrnambool 2022

South West  
Healthcare  
Regional Health Promotion



**Investigative report exploring  
food insecurity and how to address it**





# Acknowledgement of Country

We would like to acknowledge the traditional owners of this land, the Peek Whurrong people of the Gunditjamara/Maar Nation, and pay our respects to the elders past, present and emerging.

We recognize the importance of continued connection to Culture, Country and Community to the health and wellbeing of Aboriginal and Torres Strait Islander people and that this land, of which we are beneficiaries, was never ceded.

## Acknowledgements

SWH Health Promotion team would like to thank the following group of people who participated in and supported the food insecurity investigation project

- Service providers who participated in the interviews and surveys: We thank the 17 individuals, and their agencies for generously giving their time, and sharing their local insights. Your commitment to supporting those most in need in our community is inspiring and we thank you for the immensely positive contribution you are making to the lives of your clientele.
- Community members who participated in the interviews: To the 15 community members who kindly shared their own unique experiences, we are so appreciative of your time, your thoughts and your willingness to offer not only the challenges but also the solutions to this complex issue.
- Warrnambool and District Food Share; for generously giving your time, your feedback and openness to work collaboratively. Our community is so fortunate to have this vital resource, and your passion for delivering it.
- Warrnambool City Council; Thank you for consistently supporting the food insecurity project. In particular we thank you for your strength in partnerships and sharing your resources to enable us to reach key stakeholders.
- Members of the Warrnambool City Council Physical Health Community of Practice; thank you for your insights, and support in promoting this project.



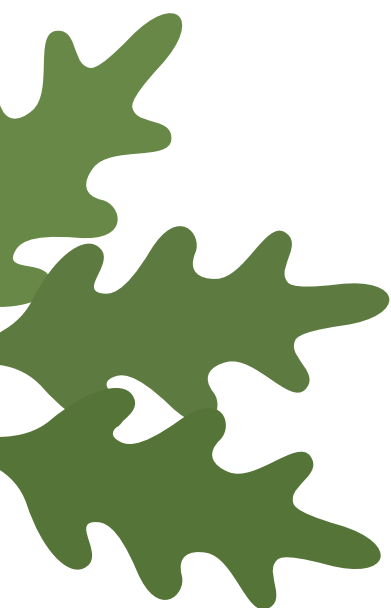


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# Background

The South West Healthcare (SWH) Health Promotion team receives *Community Health – Health Promotion program* funding from the Victorian Government to deliver prevention and health promotion initiatives. The Community Health – Health Promotion program's focus is aligned to the priority areas of the *Victorian public health and wellbeing plan 2019–2023* to address the significant contributors to the burden of disease in Victoria. The priority areas directed in the *Community Health – Health Promotion program* are aimed at increasing healthy eating, increasing active living and reducing tobacco and e-cigarette related harm, with a focus on more equitable outcomes across the Victorian population.

Healthy eating has far-reaching impacts on health and wellbeing and is a vital preventative measure for many chronic diseases. However, the ability to consume a healthy diet is inextricably linked with the social determinants of health, with some members of our community experiencing greater barriers to be able to consume a nutritious diet. For these reasons, it is important to consider the affordability and accessibility of food within our community to ensure our initiatives and actions are reaching those who would most benefit from them.

- In 2017, the Victorian Population Health Survey found that only **4% of adults in Warrnambool City Council were meeting the vegetable consumption guidelines and 40% were meeting the fruit consumption guidelines.**
- The Great South Coast Health Behaviours study showed that in 2019, only **22% of participating year 4 and year 6 students in Warrnambool City Council were meeting the vegetable consumption guidelines and 83% were meeting the fruit consumption guidelines** (Deakin, 2019).

With the cost of living steadily rising in Australia, the daily challenge of consuming nutritious foods is only getting harder. For many, the increased cost for essentials such as rent, mortgage, energy bills and petrol, can result in food becoming a discretionary expense. This means that many people may not have enough money to be able to afford adequate and nutritious food, contributing to the experience of food insecurity.

In 2022, the SWH Health Promotion team undertook a scoping investigation project to gain an understanding of the local context of food affordability and accessibility in the Warrnambool Local Government Area. We also wanted to hear from local residents to gather insights from their experience of food insecurity and what would be most beneficial for them and our community.

This report provides a summary of the process, and key findings of each of the steps taken in the food insecurity investigation. For readers who would like further detail, a thorough report of each step has been produced and is available by contacting SWH health promotion via [healthpromotion@swh.net.au](mailto:healthpromotion@swh.net.au)

# What we did?



## Key Learnings

- Having access to affordable healthy food should be a right, not a privilege
- The cost of living and low incomes are making it hard for many people to eat delicious healthy food
- Having access to affordable healthy food within walking distance or an easy commute can support our communities to enjoy nutritious foods
- Involving children in meal preparation and decision making can build lifelong skills and love of healthy foods
- When we work together, we can make it easier and more affordable for our community to enjoy delicious healthy food





# What is Food insecurity?

**Food security is defined as “when all people, at all times, have physical, social and economic access to sufficient, safe and nutritious food that meets the dietary needs and food preferences for an active and healthy life” (Food and Agricultural Organization, 2012). Food insecurity exists “whenever the availability of nutritionally adequate and safe foods, or the ability to acquire acceptable food in socially acceptable ways is limited or uncertain”(Food and Agricultural Organization, 2012).**

The dimensions of food security include:

- The economic and physical availability of food e.g. food store locations, price, quality and variety.
- Economic and physical access to food e.g. transport, mobility, income
- Food utilisation e.g. skills and equipment to be able to prepare and cook meals
- Stability of the other three dimensions over time e.g. consistent supply of food, economic stability, and household resilience.

Food security and insecurity can be viewed on a continuum from high food security to severe food insecurity and the coping strategies and potential impacts differ depending on the level of food insecurity experienced (United States Department of Agriculture, Economic Research Service, 2006).

*Figure 1. The four dimensions of food insecurity, taken from “Understanding Food Insecurity in Australia”*



# Step 1

## Looking at the evidence

Whilst food insecurity is a relatively under-researched area that has not been consistently measured in Australia, the literature review and environmental scan that was completed provided data regarding the prevalence of food insecurity, and evidence of best practice interventions to address food insecurity.

### Who is most impacted by food insecurity?

Food insecurity occurs alongside and is driven by economic factors, health issues and housing insecurity, with the experience of poverty an underlying key driver (Herault & Ribar, 2016). Food insecurity disproportionately impacts groups of Australian's that also experience other forms of disadvantage, marginalisation and inequity, including;

- Low income earners
- Unemployed people
- People experiencing homelessness
- Single-parent households
- Aboriginal and Torres Strait Islander Peoples
- Culturally and linguistically diverse people, including people seeking asylum and refugees
- Young people
- People living with a mental illness or disability

### Impacts of food insecurity

Experiencing food insecurity impacts on the physical, mental and social health of both adults and children. In adults, food insecurity has been shown to be associated with an increased risk of malnutrition, mental health problems, diabetes, hypertension, hyperlipidaemia, being in fair or poor health and poor sleep (Gundersen & Seligman, 2017). Diet-related diseases, such as coronary heart disease, stroke and type 2 diabetes are inextricably linked with these risks and are some of the leading causes

of mortality and morbidity in Australia (AIHW, 2019). In children, food insecurity has been shown to be associated with an increased risk of some birth defects, anaemia, malnutrition, cognitive problems, aggression and anxiety, behavioural problems, depression, suicidal ideation, being hospitalised, and asthma (Gundersen & Seligman, 2017).

Data from the Victorian Population Health Survey 2014 demonstrates an indication of these links in Victoria;

- Adults who were food insecure with or without hunger were more likely to drink sugar-sweetened beverages every day, to eat food from fast food outlets 2+ times a week and to eat less fruit and vegetables, compared with adults who were not food insecure (VAHI, 2018).
- There was a higher prevalence of psychological distress and fair or poor self-reported health status among the food insecure, compared with food secure people (VAHI, 2018).

Importantly, food insecurity impacts on a person's capacity to participate fully in society and to experience optimal health and wellbeing, contributing to intergenerational cycles of poor health outcomes and inequities.

### Prevalence

There is no standard or consistent way that food insecurity is measured in Australia so estimating the true burden is difficult. It is estimated that between 4% and 13% of the Australian population are food insecure, however, the grey literature has reported prevalence rates as high as 18% (Lindberg, Barbour & Godrich, 2021).

The COVID-19 pandemic had a dramatic impact on people's financial status and their ability to access and purchase food, and consequently resulted in an increase in the number of people reporting food insecurity.

#### Measure for food insecure households

People seeking food relief at least once per week

2019



2020



People going a whole day without food at least once per week



*Table 1. (Data is taken from the Foodbank Hunger Report 2020)*

Food insecurity is an issue locally in South West Victoria. Whilst the data we have available below does not provide a full picture due to inconsistent and irregular measurements, we do know:

**In 2020, the Victorian Population Health Survey found that**

# 6.6%

**of people in Warrnambool reported that they ran out of money to buy food in the last 12 months. This was an increase from 4.3% in 2014 and is higher than the Victorian average of 5.9%.**

**In 2014, the Victorian Population Health Survey found that**

# 9.3%

**of people in Warrnambool reported that they worried about food insecurity with hunger and**

# 14.8%

**of parents relied on unhealthy low-cost food (VAHI, 2018).**

#### Successful Initiatives:

The evaluation of whole of community policies and programs to tackle food insecurity is limited. However, there is some evidence to show that when developing interventions to prevent food insecurity, the most successful Australian models are based on community-led actions.

- Programs such as Community Kitchens and Community Gardens have been shown to positively impact community engagement in rural and regional Australia and have demonstrated increased social connection in the groups that participated. Both programs have displayed an increase in participant's skills, confidence and increased their access to food.
- Subsidised cafés and farmer's markets programs have shown to be effective for the community to have access to nutritious food at affordable prices, particularly those living on a low-income.
- Local government can address food security by influencing the local, built, and natural environments. Examples of council using land-use planning to support food security include implementing and facilitating community gardens in public spacing, and increasing local food production to help address economic, social and cultural barriers.
- Whole of community policies and strategies to positively influence the local food system have had minimal long term evaluation, yet have displayed promising impacts, and increased engagement across the community and between different sectors.



# Step 2

## Food affordability in Warrnambool, Victorian Healthy Food Basket Survey

Healthy food basket surveys have been used across Australia as a tool to monitor food cost, quality and variety (Palermo and Wilson, 2007). In 2006 Monash University developed the Victorian Healthy Food Basket (VHFB) survey, providing an instrument to monitor the cost and access to healthy food in Victoria. The VHFB was developed to reflect the nutritional needs for an array of family sizes and compositions, and the selected reference families were chosen to mirror those most affected by food insecurity (Palermo and Wilson, 2007).

The VHFB survey was conducted in Warrnambool on the 30th June, 2022. Data was collected from four major supermarkets, including three chain stores and one independent store in the Warrnambool CBD. The tool provided the weekly costs for a healthy food basket for different family types from each supermarket, as seen in table 2.

**Table 2. Cost of food per family:**

Store	Family of four	Single mum, 2 kids	Elderly woman	Single man
Store A	\$189.31	\$126.88	\$46.33	\$61.70
Store B	\$223.47	\$114.64	\$54.20	\$73.76
Store C	\$286.70	\$193.31	\$69.11	\$93.20
Store D	\$202.44	\$136.85	\$49.29	\$65.73

These results show there is significant disparity between Warrnambool's least expensive grocery store and it's most expensive, with average costs about 50% higher.

According to the 2021 Census data, the median weekly income of Warrnambool residents aged 15 and older was found to be significantly lower than both the Victorian and National rates, as seen in table 3.

**Table 3. Median weekly income**

	Warrnambool	Victoria	%Victoria	Australia	%Australia
Personal	\$759	\$803	95%	\$805	94%
Family	\$1,891	\$2,136	89%	\$2,120	89%
Household	\$1,420	\$1,759	81%	\$1,746	81%

In order to assess affordability, the cost of a healthy food basket was assessed against the median income in Warrnambool and approximate maximum Centrelink incomes for the varying household makeups. Table 4 shows the percentage of weekly income that a healthy food basket would cost each household.

**Table 4. Percentage of weekly income required to afford a healthy food basket.**

	Family of 4 – dual income (household)	Single mum, 2 kids	Elderly woman	Single man
Median income	13% to 20%	15% to 25%	6% to 9%	8% to 12%
Centrelink payment	25% to 37%	24% to 37%	9% to 14%	19% to 29%

**Important note: The literature shows that food stress occurs when food cost more than 25% of household income and healthy diets are unaffordable when they cost more than 30% of household income (Ward et al, 2013 & Lee et al, 2018).**

According to the 2021 Census, Warrnambool has a high proportion of families living on low incomes, single incomes or income support:



**Key Points:**

- A baseline healthy diet can cost anywhere from 6% to 37% of a household's weekly income, based on approximate median income and different forms of Centrelink assistance.
- Families, particularly single parent households and those who rely on income support are at high risk of experiencing food stress as a healthy diet can cost more than 25% of their weekly income.

# Step 3

## Food outlet mapping

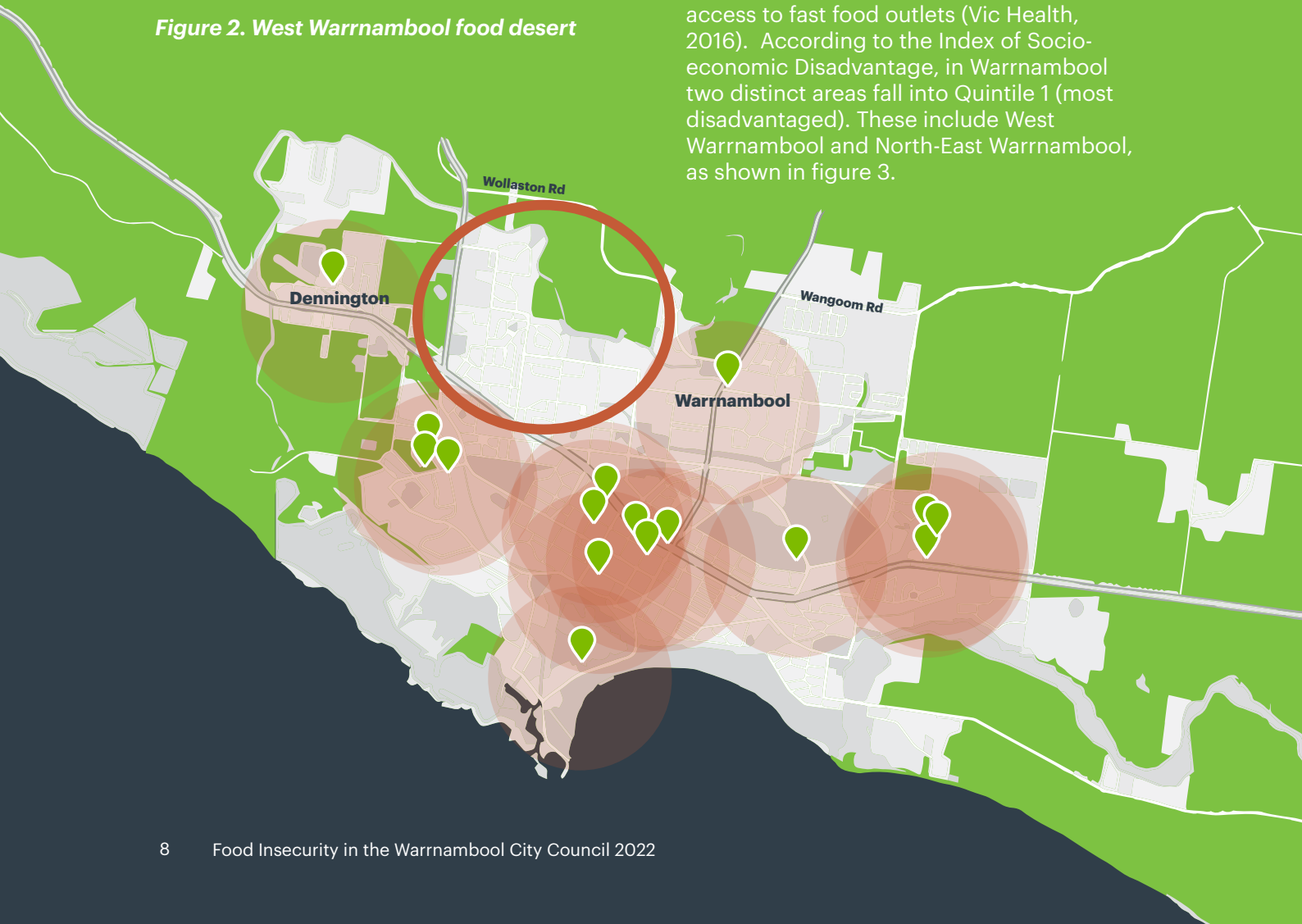
A food desert is defined, loosely, as an area that has limited access to affordable and nutritious food within a convenient travelling distance (Murphy et al, 2017). Some definitions also specify that a food desert occurs when there is easier access to an unhealthy food outlet, such as take-away or fast food, than a healthy food outlet, such as a grocery store or supermarket (Needham et al, 2022).

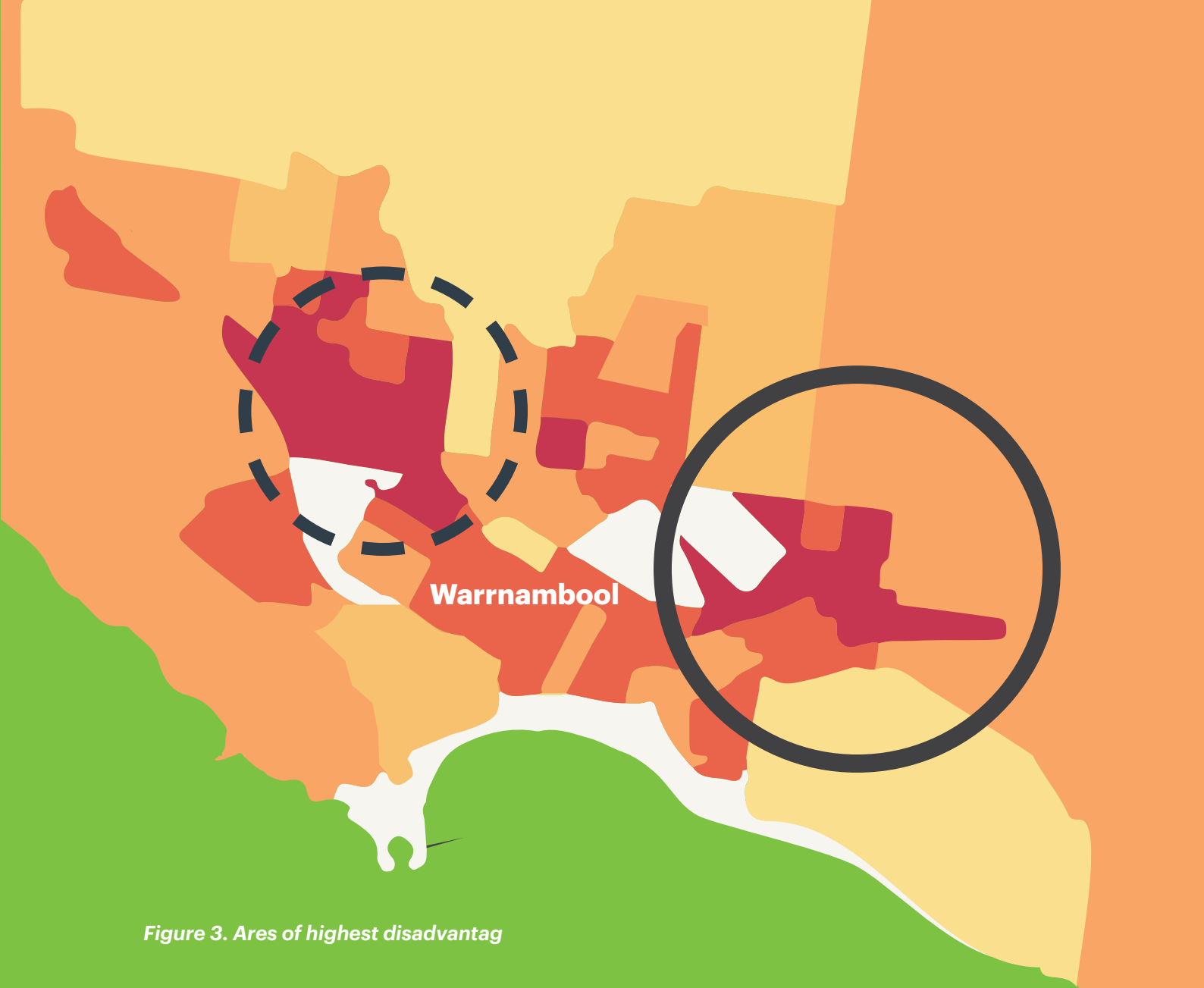
Different spatial measures have been used around the world to define a food desert, however, in Australia the distance of 1km is most commonly used. Evidence has shown that most people will not regularly walk distances greater than 800m-1km to destinations such as shops and services, especially if bulky purchases need to be carried (Gunn et al, 2017). Therefore, we have used a radius of 1km from a healthy food outlet to define a food desert.

Healthy food outlets include supermarkets, butchers, seafood shops, farmers markets or any smaller food store that sells a significant quantity of fresh produce. The below map shows a 1km radius around all healthy food outlets in Warrnambool. The map clearly exhibits a clear presence of a food desert in West Warrnambool (shown by the red circle). The only food outlets present within the area of West Warrnambool are two fish and chips shops.

The physical environment can directly influence household food behaviours, with the number and mix of food retail outlets, their walkability, proximity to public transport, the range, cost and quality of food all playing a critical role in shaping eating behaviours (Vic Health, 2015). Research reveals that more advantaged areas in communities have closer access to healthy food outlets, and conversely areas of lower socioeconomic status had closer access to fast food outlets (Vic Health, 2016). According to the Index of Socio-economic Disadvantage, in Warrnambool two distinct areas fall into Quintile 1 (most disadvantaged). These include West Warrnambool and North-East Warrnambool, as shown in figure 3.

**Figure 2. West Warrnambool food desert**





*Figure 3. Areas of highest disadvantage*



**West Warrnambool**  
– approximate  
population of 3000  
people



**North-East Warrnambool**  
– approximate population  
of 1865 people

**IRSD**

Quintile



(most disadvantage) (least disadvantage)

Identifying the location of food deserts in combination with socio-economic indicators highlights that certain pockets of our community, such as West Warrnambool, face greater barriers to accessing healthy foods.



# Community Consultation

**A vital aspect of the food insecurity investigation was asking the Warrnambool community about their experiences of accessing food, to identify the barriers to eating well and having enough food, as well as what they would like to see in the community to support this issue.**

The first step in the community consultation involved talking to community service providers that work with people who are at risk of, or are experiencing food insecurity to gain an understanding of the local context. Once we obtained an understanding of the local nuances, we invited input from all community members in the Warrnambool municipality via a community food survey and interviews, exploring their experience of accessing and preparing food. Service providers offered guidance as to how best reach and communicate with their clientele, so we were able to employ targeted communication, and invite those currently experiencing food insecurity to participate in the consultation. Our discussions supported the fact that food insecurity is a complex, socially determined issue that is a symptom of larger issues of inequity, marginalisation and poverty.





# Step 4

## Talking to Community Services

We completed interviews with 12 different service providers, with a total of 17 individuals. The participants interviewed were identified due to either a portion of, or their sole clientele being a population at greater risk of experiencing food insecurity and included; youth services, mental health services, disability services, family services, Aboriginal and Torres Strait Islander services, emergency relief services, community groups working with culturally and linguistically diverse people, neighbourhood houses and educational settings. Interviews were semi-structured, utilising open-ended questions that allowed some flexibility to explore themes that arose. The below themes emerged from the interviews;

### Key themes:

#### **The environment around people creates barriers to food security and healthy eating**

##### **Housing instability limits the ability to focus on food, and limits access to storage and cooking equipment**

A barrier that was identified consistently by service providers was housing instability and homelessness, *“the biggest barrier at the moment is housing. Because if people don't have cooking facilities, they can't meal prep. And so many people are in that boat”*. Whilst we know that the experience of homelessness or housing instability is often linked with financial stress, many participants noted that it created multiple barriers for storing and preparing food *“some of the barriers we have are the homelessness, or the no regular place to actually call home to be able to go and buy some groceries and cook a meal each night there when they're couchsurfing or living between places actually, obviously, don't eat nutritious food because they can't cook it”*.

People who are supported by services are often offered motel rooms and provided access to food relief. However, even with the support of emergency food relief, people are unable to utilise the food they receive because of lack of access to cooking facilities *“they don't have a saucepan to use... they don't have access”*.

##### **Challenges with transport, such as not having a car or accessible public transport makes it difficult to purchase healthy food, especially when people live far from food outlets**

Public transport is perceived by some in the community as being infrequent and unreliable and may contribute to difficulties in accessing food. Additionally, public transport in Warrnambool for people living with disabilities is described as being *“hit and miss”* and *“not where it should be”* in terms of accessibility. Whilst it was acknowledged that the bus system is *“transitioning across to accessible....a person with a disability would certainly have to ring ahead before they were able to access any”*. Proximity to accessible transport and community infrastructure is seen as essential to reducing barriers to food insecurity for people with disabilities.

Having access to a personal vehicle is seen as an enabler of food security and personal security, providing independence and autonomy, *“a lot of the families that we assist don't have a car. So even if you can get to the supermarket, then you're lugging all the bags home”*.

The location and type of food outlets therefore becomes more important in settings where public transport is infrequent or inaccessible and people do not have access to a car. It was noted by one participant that *“there's so many conveniently located fish and chip shops. There may not be a shopping centre close by, but there's always a fish and chip shop. \$5, you feed a family”*.

**Financial stress caused by low income, unemployment and the rising costs of living has a huge impact on the amount and variety of foods that households have access to.**

It was consistently mentioned by the majority of participants that low income is a major barrier to food security. The amount of income support provided to individuals and families is seen as insufficient for maintaining household food security because *"families who rely on support like a job seeker or parenting payment, after rent and fees for children...they only rely on about \$38 per day"*. Two participants highlighted single parents and sole individuals as most impacted by these low levels of income support *"probably single parent families seem to be the ones doing the toughest or lone people, especially on Job Seeker. Those ones seem to be really struggling"*.

It was common amongst participants to comment that people who were living on low incomes or income support would prioritise paying for other household costs and food would *"come last a lot of the time because people will spend their money on everything else and then come and get a food voucher"*.

The cost of fresh food was identified by multiple participants as a barrier to food security, and to healthy eating due to the increasing costs associated with fresh, quality produce. Participants commented *"cost of groceries (are) going up...that the budget they used to spend on shopping doesn't cover anymore"*. It was noted that the rising costs of food are impacting *"not just the people that are the poorest of the poor, might just be people that can't afford to buy the food they want to eat"*.

**Mental health, trauma and stress impacts a person's ability to prioritise food**

People who are experiencing poor mental health face additional challenges with managing food and meal preparation. According to one participant *"it's about...not being well enough to make good decisions, to actually get to the grocery store, to purchase food"*. Some of these challenges

were attributed to a lack of motivation associated with mental health challenges, *"you've got to be motivated to want to seek out good food options. Some people, if they're not feeling great in themselves, you're happy just to sit in bed and not even seek out food"*. The time and focus associated with cooking and preparing food is seen as contributing to this lack of motivation, particularly for those who are experiencing or dealing with trauma.

**Accessing support is made more difficult because of the stigma in seeking food assistance as well as a lack of culturally-appropriate food assistance**

Both food insecurity and asking for help were seen as attracting stigma. One participant who works in the disability sector noted, *"if you were to ask somebody about that they would say, I'm ashamed to ask someone for help or I'm ashamed to tell people that (I need) food or whatever"*.

Whilst the participants shared the view that FoodShare is an essential and well-used service, some limitations relating to food assistance in the region were raised. Participants noted that emergency food relief hampers are unable to accommodate the requirements of individuals with special dietary requirements or to be adapted for specific cultural backgrounds. One participant stated the contents of food hampers available in the area for *"(for) multicultural residents (the food) is not suitable...a lot of vegetables they provide, we don't know how to cook it and we are not used to the tastes as well"*.

Aboriginal and Torres Strait Islander people, who are at a greater risk of food insecurity because of the ongoing impacts of colonisation, structural racism and intergenerational trauma, also face stigma around food insecurity, *"we were given rations for such a long time. So that food security thing is really part of the trauma. I suppose that's the intergenerational trauma of housing and security and food security and freedoms to go and get a job as a lot of it was rationed out and you couldn't work and you could only do what we're gonna give you. So the stigma around Aboriginal people and not having food is huge"*.

# Step 5

## Community Food Survey

The community food survey contained 20 questions in total, comprised of multiple choice, short-answer, and tabulated questions and was available online and as a hard-copy survey. There were 130 responses to the survey, with 122 included in analysis. Eight survey responses were removed from analysis as only demographic questions were answered.

Hard copies of the survey were distributed to organisations that work with populations at risk of food insecurity, including the Salvation Army, Brophy and Warrnambool City Council (West Warrnambool Neighbourhood House, Archie Graham Centre and WCC childcare services).

The survey was promoted through social media channels, and was shared on three occasions on the South West Healthcare Facebook page. Other community agencies also promoted the survey via their Facebook pages, including Warrnambool City Council, Warrnambool District Food Share and Connect Warrnambool. Hard copy posters were distributed to community services within Warrnambool and flyers were distributed in Food Share hampers during the first week of the survey.

Below the key results from the community food survey have been summarised;

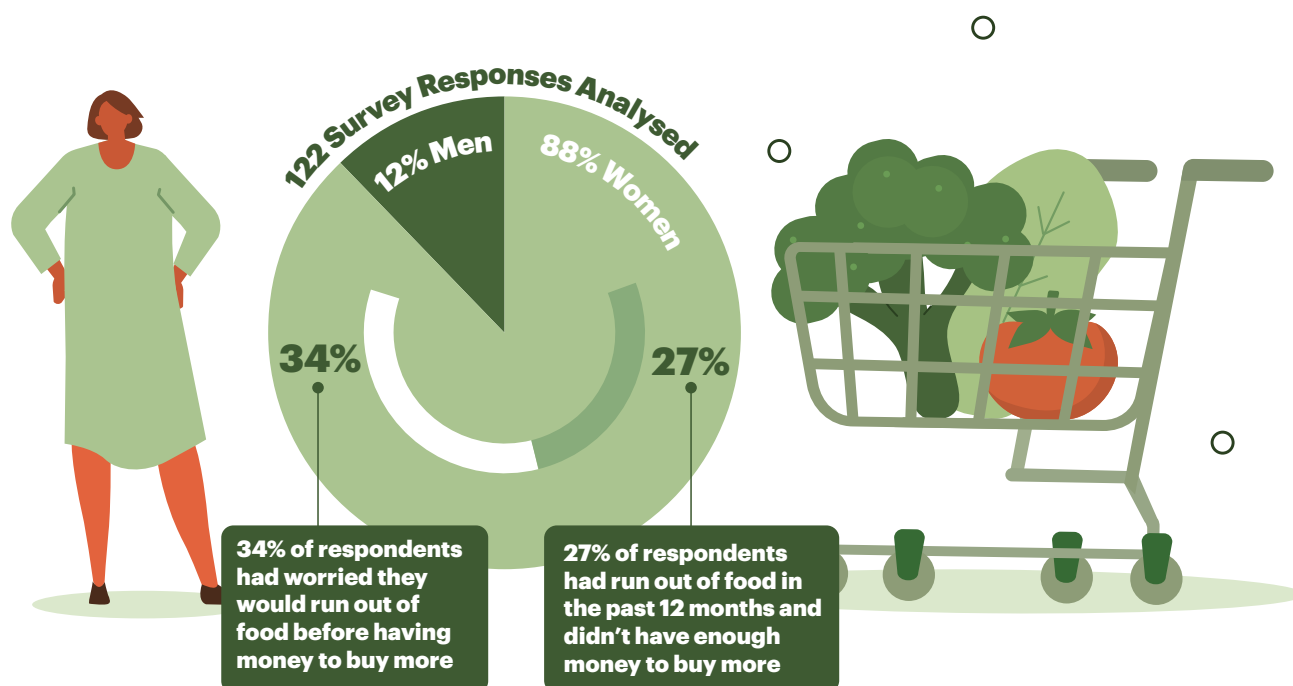


Figure 4. Household food situation

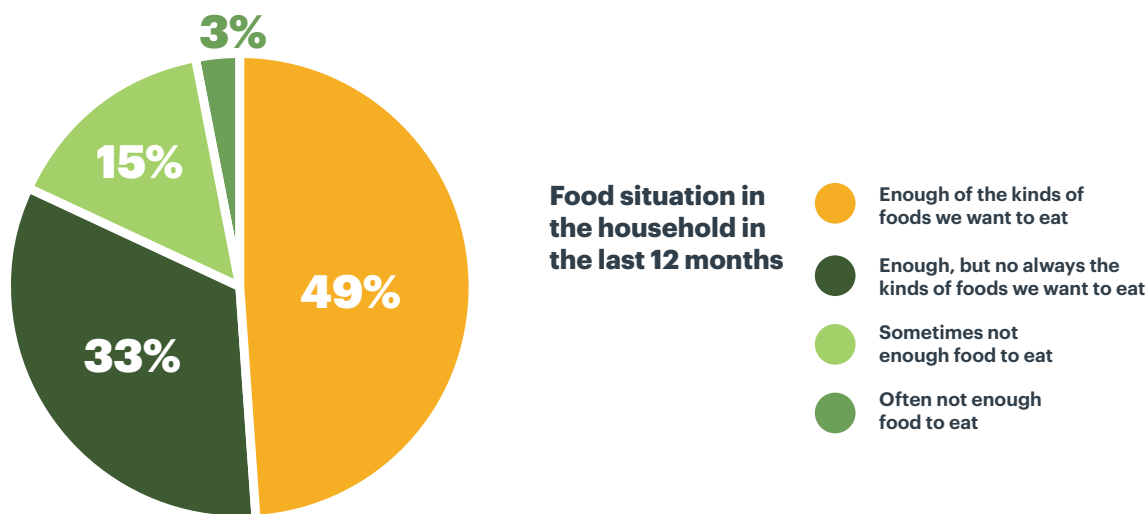
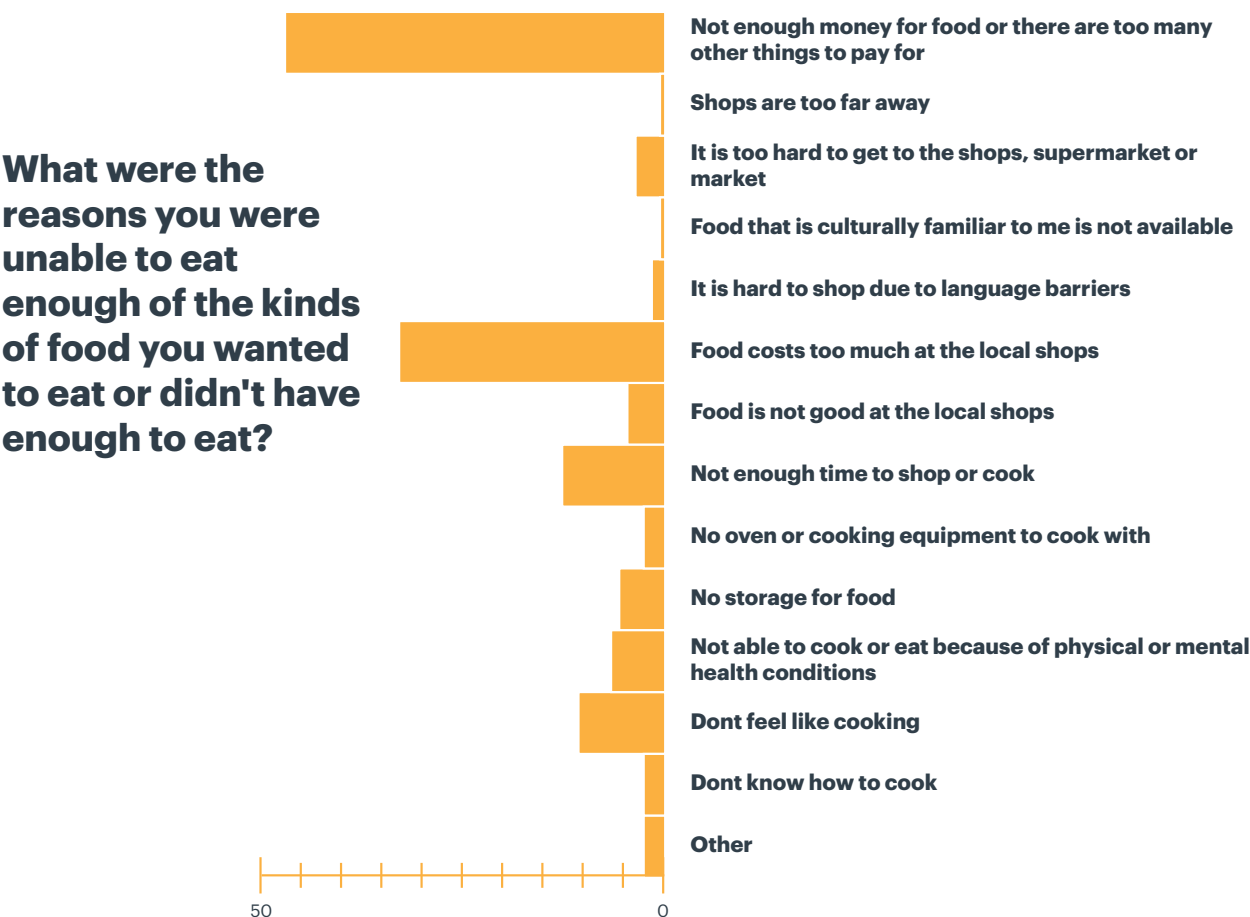


Figure 5. Reasons people were food insecure



Of the 61 respondents that indicated they had experienced food insecurity in the past 12 months, 77% answered that “not enough money” was a factor and 52% answered that “food costs too much at the local shops”.

Figure 6. Coping mechanisms

## What do you do when there is not enough food in your house or you have run out of food?

The 3 main coping strategies used by those experiencing food insecurity were to:

- Eat less meat
- Eat smaller meals
- Eat low-cost packaged foods

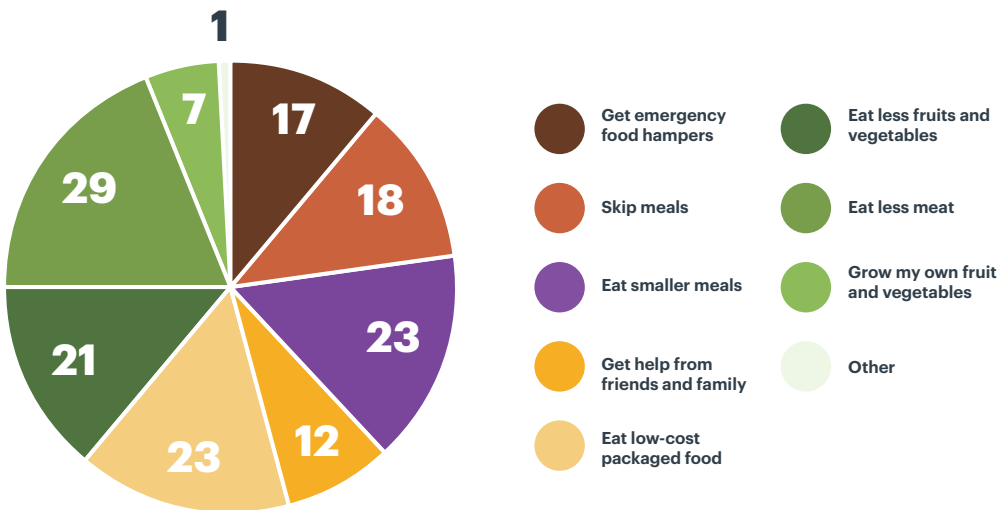


Figure 7. Impact on children

## In the last 12 months, have the children in your household ever:

The impacts of food insecurity are also felt by children. Of 45 people that had children live with them, in the past 12 months:

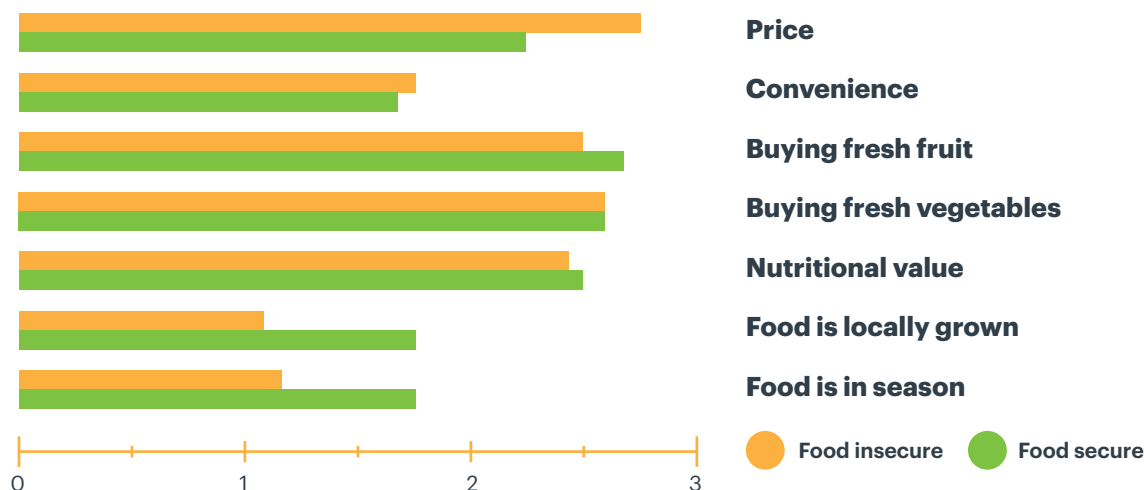
- 36% reported that children had a limited variety of food to eat,
- 16% reported that children had been unable to eat nutritious meals
- 13% reported that children had not been able to eat as much food as they needed.



## Food priorities

Priorities when it comes to food purchasing and consumption were fairly consistent between those experiencing food insecurity and those who were food secure. However results show those experiencing food insecurity prioritise price, and those who are food secure place higher value on whether food is grown locally and the seasonality of food. When cooking food, meals that can stretch to feed the family was of greater importance to those experiencing food insecurity, as well as meals that were child friendly.

**Figure 8. Food priorities when shopping**



**Figure 9. Food priorities when cooking and eating**



## Discussion

The community food survey targeted people who may be at greater risk of experiencing food insecurity, including the priority populations discussed previously. The survey was successful in reaching these populations with 27% of respondents answering that they had run out of food in the last 12 months and 34% worrying that they would run out of food in the last 12 months.



The survey found that 51% of respondents indicated that they had experienced some degree of food insecurity in the past 12 months. These measures do not reflect the overall prevalence of food insecurity in the local area due to sample size and method used. However due to the use of a broader definition of food security than the single item used to measure national prevalence, the results take in to account those people who are unable to eat the foods they want and rely on lower-cost or a smaller variety of foods to avoid food insecurity.

Results from the survey supported what was evident from the literature. People who had experienced food insecurity in the past 12 months were more likely to rent or live in social housing than people who are food secure, who were more likely to own their own home. Interestingly, a higher percentage of those who are food secure indicated that they are living in emergency or transitional housing as compared to those who indicated food insecurity.

Of the 61 respondents who had experienced food insecurity in the past 12 months, 77% answered that “*not enough money*” and 52% answered that “*food costs too much at the local shops*” as the reasons they were unable to eat enough of the foods they wanted. This was unsurprising as financial insecurity and poverty are shown in the literature as major determinants of food insecurity. However, people who experienced food insecurity in the past 12 months reported a variety of main income sources including full time work (34%), Centrelink benefits (31%) and part time work (24%). Whilst we did not collect information on income levels, this could suggest that it is not income alone that determines a person’s food security level, but multiple factors surrounding a person.

When people had run out of food or did not have enough food in the house the most common coping strategies reported were eating less meat, followed by eating smaller meals and eating low-cost, packaged foods. Whilst less people reported that they reduced the amount of fruit and vegetables they ate, 45% of people who had experienced food insecurity reported that they eat vegetables less than once per day, compared to only 18% of people who identified as food secure. This suggests

a lower intake of vegetables by people experiencing food insecurity in general. The main impact on children that was selected was that they had a limited variety of food to eat which is a result of the above coping mechanisms. This also supports the literature that shows that households often do what they can to protect children from the impacts of food insecurity, particularly in terms of missing or skipping meals. However, this reliance on low-cost, packaged foods and less variety in foods has far-reaching health impacts on both adults and children as well as impacting on a child’s eating habits and behaviours throughout their life.

The results from the food priorities section showed that both those respondents who are food secure and those who had experienced food insecurity in the past 12 months, prioritise buying fresh vegetables. It is a common suggestion by the general population that people who rely on low-cost, packaged foods or fast food due to financial and economic issues, do so purely from personal taste preference and choice. However, this finding suggests that this may not be the case and that there are other barriers to the ability to prioritise fresh produce. This further supports the need to increase the availability and accessibility of fresh produce for lower income households. It is important to note that people completing this survey may already have an interest in the topic of food and healthy eating which could skew the results. People who had experienced food insecurity in the past 12 months greatly prioritised cost of food and placed the least priority on locally grown and in-season foods.

There is a movement throughout Victoria and the country to push towards more localised, in-season food systems to develop more resilient communities in the face of the climate crisis and disruptions to food supply. However, as price is an important factor in what people buy, investment and support for local producers is necessary to ensure they can provide affordable options, remain competitive and ensure that our food system is equitable for all.

# Step 6

## Talking to the Community

Community members were invited to participate in an interview via the Community Food Survey. Participants were able to provide their contact details if they were happy to be followed up and invited to participate in an interview to further delve into their experience of purchasing and consuming food. A total of 15 community members participated in an interview, and we were able to hear voices from a variety of demographics within these interviews.

The word cloud below describes participant's answers when asked the question 'Can you tell me 3 words that describe how you feel when you think about buying and preparing food?' and demonstrates the complex emotions that surround food.

Figure 10. Emotions around buying and preparing food



### Key themes

#### Financial stress is caused by rising costs of food and living that is making it harder to manage household budget.

The rising cost of living was identified as making it difficult for individuals and families to prioritise food in the way that they would like to *"(it's) really hard because I feel like I should be doing a better job but financially like I can't really because that means that I'm not going to be able to pay the bills"*. For community members receiving welfare payments, the small increase in payments does little to combat the rising costs of living expenses; *"The pension isn't enough, rental costs are going up \$50-60 a week. More than half your pension goes on rent... you have insurances, you have phone, you have internet, you have all those things and sometimes just really struggle"*. In addition to the rising costs of living, cost of food was consistently identified as a barrier to people purchasing the types of foods that they want *"friends are talking about how expensive it is and in a way that it never ever has before. I think everyone's feeling the pinch on everything"*.

Community members employ many different coping mechanisms to deal with these challenges, such as; buying in bulk, using frozen foods, freezing leftovers/excess, shopping the specials, meal planning and cutting down on meat. For those experiencing food insecurity, access to food assistance was necessary.

#### Skills and knowledge are important aspects of food utilisation and are often learnt during childhood

The Food and Agricultural Organisation of the United Nations and the World Health Organisation describe food utilisation (the physical, social and human resources to transform food into nutritious meals) as one of the four dimensions that contribute to someone's experience of food insecurity. When asked about this, community members spoke about how they learned to cook;



*"I learned a bit off mum...but I think more so just seeing mum cook meals at home as we're growing up",*

*"I really do think it begins in childhood. It should not be assumed that every child would learn to cook at home, not every child has a grandmother or grandfather to teach them how to cook or a mother or father who can cook ...*

Community members spoke about the gaps in food literacy, and the opportunities that exist to close them *"It'd be nice to have, like more information about what fruit and veg are in season", "maybe an education program on healthy lunch boxes at school", "offer nutrition education while waiting for doctors", "I really think we could get into schools a lot earlier, I know they do food tech, but I think kids really need that information about healthy eating".*

**Food preference and behaviours are not only influenced by taste but also the impacts of early life.**

For the community members interviewed, early life experiences with food often went on to shape their food behaviours later in life. For one participant, they have maintained the routine they grew up with *"it's still the same, yeah ... we always get around the table for dinner, TV off, just a chance to talk for whether it be half an hour or an hour, and everyone is home".* For others, their experience growing up was intentionally very different from their current life *"It's something that I'm sort of passionate about at home. Because I don't believe I had that healthy eating when I was brought up, so my kids think I'm really fussy ... when I was younger we did a lot of travelling and we just went through the drive through wherever we went and I'm so the opposite with my kids".*

**Time and convenience are important considerations, particularly for people with young children.**

For families, having the time to prepare meals was identified as a barrier, with competing family demands minimising capacity *"mealtimes are stressful. I like cooking when I'm by myself. I don't like cooking when I've got kids running around, baby screaming and someone wants food but they don't want this".* For some participants, they turned to pre-prepared meals to alleviate some of the time constraints *"because it's convenient (to use a jar pasta sauce), and because I don't really know any better. Like I'll continue to use the packet food because it seems simpler".*

**Food supply and quality were identified by community members as challenges in South West Victoria with low quality produce, high cost and a lack of variety being key issues.**

At the time of the interviews, food supply in South West Victoria was experiencing the same interruptions felt across the rest of the country, where supply chain issues and extreme weather events affected the availability of food for purchase. Community members expressed food availability was unstable and impacted the food there were eating *"we're certainly not eating as much fruit and vegetables ... you've got to buy what's available, and it's limited, so yeah, what we seem to be cooking up doesn't seem to have the variety that we're used to".* In combination with food availability, the quality of food obtainable was also commented on, with participants stating *"you basically get the quality of food that's there, you don't have a choice if you want something you have to take what's on offer".*

Others noted that food culture in Warrnambool is lacking diversity, with community members unable to buy speciality items *"there's only one Asian supermarket and it's quite small" "I'd like to see some more eclectic food shops" "we tend to order online a lot", "food diversity is a bit difficult down here".*



**The quality and appropriateness of food assistance was also raised as a concern by community members as well as lack of choice in what they are able to access.**

Community members who accessed food assistance commented the quality of the fresh produce was sometimes lacking *“when you open them up (Brussel sprouts) there was mildew inside. We had to throw all them (out). If we got capsicums you’ve got to use them in a couple of days or they just go crumbly, they shrink. Apples and oranges and bananas they just go off so quick”*.

In addition to quality concerns, community members shared that the contents of the food hampers were not always appropriate to their needs. For a community member with allergies this was particularly challenging *“It’s hard because you can’t specify that because they just have boxes made up for people and sometimes you can’t even read what’s in the ingredients”*. Another person noted that the staple foods are great, but there are not always enough ingredients to make a whole meal *“They’ll give you a jar of sauce. But what do you do with this jar of sauce that you’ve got nothing else to go in the jar of sauce but a packet of noodles?”*

A concern echoed by several community members was food waste, and what to do with products that they couldn’t use, or didn’t know what it was/how to prepare; *“I prefer to like pick up, say produce or something from somewhere, where I could actually use it”*.

For several community members, there was a real reluctance to accept food assistance for fear of the stigma surrounding it. This stigma resulted in one community member expressing that *“recipients may be less likely to give honest feedback because they don’t want to sound ungrateful. You’re getting free food, you don’t want to complain about it”*.



# Step 7

## How to address food insecurity

### A summary of what the community wants

#### Service providers suggested:

- Building personal skills and knowledge
- Improved food assistance
- Safe and inclusive opportunities to participate

***"How can we put in some longer term supports? How can we get this to, in six months, you'll never have to come back here again, because we've done enough planning and worked with you to get that to work. Without making it shameful, but give people the tools to work with so even if it's showing people how to cook a meal out of \$4 that's going to feed the entire family".***

***"(a) community garden would be a good opportunity. If some of those spaces could be more easily utilised by some people, and then possibly even once things are starting to get ready for harvest, could there be a bit of a cooking, this is how you grow stuff and this is how you nurture it. Now this is what you do with it".***

***(practical skills such as) "how to mix and match what you have, such as take your pantry items and match them (with) some fresh produce, how to cook in season".***

#### Community survey suggested

"A cheap fruit and vegetable market in my area" was chosen by 66% of all respondents as something that would make it easier to have enough nutritious food to eat and was overall the most selected support. The next two most popular responses were:

- A guide to shops selling cheap food in Warrnambool – 31%
- Recipes for easy and cheap meals – 31%

For those who indicated some experience of food insecurity in the past 12 months, the top three things that were chosen were slightly different and included:

- A cheap fruit and vegetable market in my area – 69%
- Knowing how to grow my own fruit and vegetables – 31%
- A guide to shops selling cheap food in Warrnambool – 31%





## Community member interviews suggested

- Support for growing your own food and removing barriers such as cost of seeds and supplies
- Sharing excess produce or food to reduce waste and cut down costs

*"I love how Woolies have done it in the past, you know, seeds and stuff, they're always great. Growing your own food is really good".*

*"(speaking about grade six son's school gardening program) they do have some fruit and veggies that they bring home, mainly vegetables, but it'd be great if they had enough to send home with kids that may or may not need it",*

*"something like that could be promoted (grow carts), I think more people (need to be) encouraged to put any excess out for people to share it"*

# Recommendations

This food insecurity investigation provides insight into the way in which people in Warrnambool value food and nutrition and the challenges that people experiencing food insecurity face. For many, regardless of food security status, food is about much more than energy and nutrient intake. Food is health, ritual, celebration, necessity and dignity.

Whilst there are limitations to how the information gathered through this investigation can be applied to a population setting, there are some key themes that have been consistent through the literature and consultation, and these can be categorised into the three food security dimensions.

## Food Availability

Make affordable food more available in Warrnambool, particularly in food deserts and areas that experience greater disadvantage.

- Cost, quality and variety has been recognised throughout the survey and our interviews as a barrier to eating nutritious food and having enough food.
- A cheap fruit and vegetable market in my area" was selected by 66% of respondents in the survey as something that would make it easier for them to eat nutritious food.

Local initiatives that aim to address food insecurity, must mitigate the rising cost of food by offering affordable food options. Warrnambool and the surrounding region already has strong foundations on which to build to support more affordable local food including various supermarkets, farmers markets, local producers, road-side stalls and produce swaps. It is important to consider how we can support these sources to remain affordable and competitive. Additionally, considerations around the locations of these initiatives as well as food outlets is vital in ensuring affordable options are readily available to the people that need them most.

## Food Access

Remove barriers to accessing healthy food in Warrnambool:

- Improving emergency food relief and the increased promotion and connection to affordable options is important to ensure adequate access to food.
- Further explore the challenges experienced utilising public transport and identify opportunities to enhance convenience and access. Public transport that meets the community's needs may enhance access to healthy food, particularly for those located in food deserts.
- "A guide to shops selling cheap food in Warrnambool" was chosen by 31% of respondents in the survey as something that would make it easier for them to eat nutritious food.

Connecting people who are experiencing food insecurity to food producers and affordable food sources such as local markets, community gardens, food swaps and community based free food initiatives could assist in more dignified access to food (see Appendix 1 for examples in Warrnambool). This could happen through adaptation of these initiatives to enhance accessibility and inclusiveness or better promotion of them to ensure those who experience food insecurity are able to participate. Considering how people without cars can access these programs or food producers is vital, as well as ensuring equitable access for people with disabilities and of culturally and linguistically diverse backgrounds. Review into how local public transport could be improved to meet both these population groups' needs would be beneficial.

The community interviews indicated that whilst the emergency food relief hampers are an incredibly valued and important resource, there is opportunity to enhance the quality and freshness of the produce in the hampers, and to adapt hampers to ensure they meet the user's needs.

## Food Utilisation

Provide opportunities for people to learn about food:

- Cooking and food growing knowledge and skills were raised as areas for intervention and are often the focus of food initiatives.
- Recipes for easy and cheap meals was chosen by 31% of all respondents in the survey as something that would make it easier for them to eat nutritious food.
- Knowing how to grow my own fruit and vegetables was chosen by 31% of people who had experienced food insecurity in the last 12 months, as something that would make it easier for them to eat nutritious food.

Both the survey and our interviews with service providers and community members suggested that the community is interested in initiatives that focus on building skills and knowledge around cooking and growing food, with a focus on affordability. Warrnambool and the surrounding region has local community groups, community gardens and community organisations that are already doing work in this space and could benefit from increased support and promotion (see Appendix 1 for examples in Warrnambool). Community gardens are a wonderful resource for knowledge and skill building as well as community connection when they reach the groups that require them the most. Looking at how we can increase the accessibility and inclusiveness of these initiatives would benefit those most at risk of food insecurity.

Furthermore, the interviews identified the importance of skill building and habit forming throughout childhood, with many adults choosing to either continue on with childhood traditions or intentionally turn away from them depending on their food experience growing up. Intergenerational knowledge sharing and engaging children in conversations regarding food consumption and preparation can positively translate into lifelong skills and healthy behaviours.

## A note on Food Systems

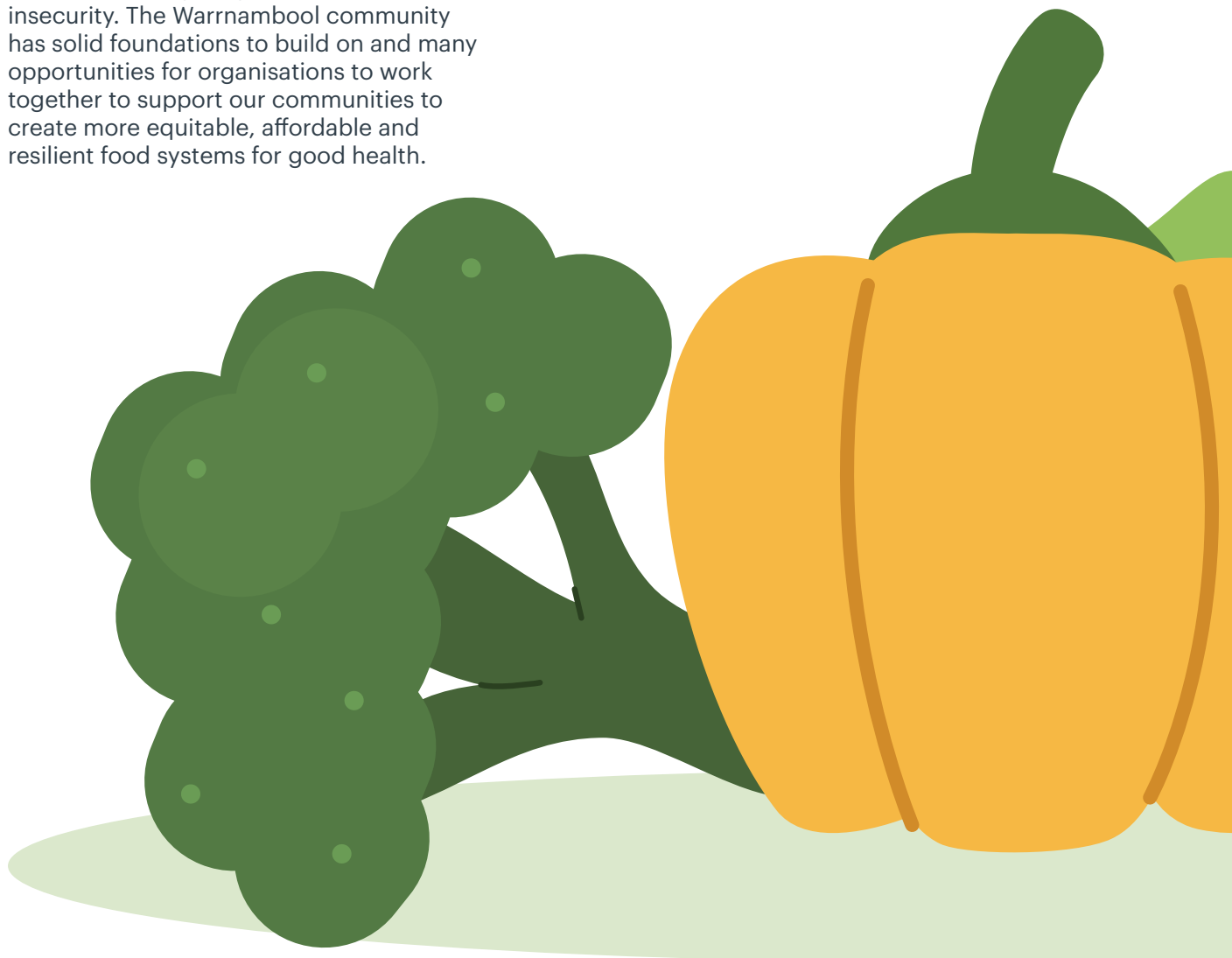
The findings from this investigation support the movement that is already happening across Victoria and Australia to create healthy, equitable and affordable food systems. Many community organisations, local governments and health promoting agencies are working together to drive further investment into local, resilient food systems that are accessible and affordable for all as demonstrated through the “Towards a Healthy, Regenerative and Equitable Food System in Victoria: A Consensus Statement”. See Appendix 2 for examples of Australian initiatives. Over the last few years we have seen the creation of various local government food policies and food system strategies to support this transition and priority such as:

- Cardinia Shire Community Food Strategy,
- City of Ballarat Good Food For All Food Strategy 2019-22,
- Greater Bendigo's Food System Strategy 2020-2030

These food system strategies bring together a broad range of community stakeholders to all work cohesively towards a common goal of improving their local food system. Warrnambool has the foundations to build a successful community food system strategy, such as a thriving local agriculture industry, buy in from key stakeholders and community receptivity. However significant relationship development would need to occur to build cross sector partnerships, as well as the need for a backbone organisation to drive collective action.

# Conclusion

The SWH Health Promotion food insecurity investigation has confirmed the need for increased investment into local food system and food security initiatives to support our community through these tough times. Increasing costs of living, food supply disruptions as well as the challenges that face regional areas around transport and accessibility, make eating nutritious foods a daily challenge for many households. We know that the residents of Warrnambool are not eating the recommended servings of fruits and vegetables and that eating a variety of nutritious foods improves health outcomes. Further investment and support for local initiatives that reduce barriers to food, increase household and community resilience and improve affordability of food are vital for mitigating the impacts of food insecurity. The Warrnambool community has solid foundations to build on and many opportunities for organisations to work together to support our communities to create more equitable, affordable and resilient food systems for good health.





# References

- Australian Institute of Health and Welfare. (2019). Dietary guidelines. <https://www.aihw.gov.au/reports/food-nutrition/poor-diet/contents/dietary-guidelines>
- Department of Health (2017). Victorian Population Health Survey 2017 Dashboard. Retrieved from <https://www.health.vic.gov.au/population-health-systems/victorian-population-health-survey-2017>
- Food Bank Australia (2020). Foodbank Hunger Report 2020. Retrieved from <https://www.foodbank.org.au/wp-content/uploads/2020/10/FB-HR20.pdf>
- Food and Agricultural Organization of the United Nations. (2012). Committee on World Food Security: Global Strategic Framework for Food Security and Nutrition, First Version. Retrieved from <https://www.fao.org/3/ME498E/ME498E.pdf>
- Gundersen, C., & Seligman, H. K. (2017). Food insecurity and health outcomes. *Economists' Voice*, 14(1), [20170004]. <https://doi.org/10.1515/ev-2017-0004>
- Herauld, N., & Ribar, D. C. (2017). Food insecurity and homelessness in the Journeys Home survey. *Journal of Housing Economics*, 37, 52-66.
- Lee AJ, Kane S, Lewis M, Good E, Pollard CM, Landrigan TJ, et al. (2018). Healthy diets ASAP – Australian Standardised Affordability and Pricing methods protocol. *Nutrition Journal*, 17(1), 88.
- Lindberg, R., Barbour, L., & Godrich, S. (2021). A rights-based approach to food security in Australia. *Health promotion journal of Australia: official journal of Australian Association of Health Promotion Professionals*, 32(1), 6-12.
- United States Department of Agriculture, Economic Research Service, 2006, *Household Food Security in the United States*, 2006, volume 49, 68 pp.
- Victorian Agency for Health Information (VAHI). (2018). Challenges to healthy eating – food insecurity in Victoria. Retrieved from [https://www.bettersafercare.vic.gov.au/sites/default/files/2019-09/190226-1\\_VAHI-food-insecurity-full%20report.pdf](https://www.bettersafercare.vic.gov.au/sites/default/files/2019-09/190226-1_VAHI-food-insecurity-full%20report.pdf)
- Victorian Agency for Health Information (VAHI). (2020). Victorian Population Health Survey 2020 Dashboard. Retrieved from <https://www.bettersafercare.vic.gov.au/reports-and-publications/vphs2020>
- Ward PR, Verity F, Carter P, Tsourtos G, Coveney J, Wong KC. (2013). Food stress in Adelaide: the relationship between low income and the affordability of healthy food. *Journal of Environmental and Public Health*.



# Appendix 1

Examples of food initiatives in Warrnambool

Initiatives	Food Security Domain	Warrnambool
Local food security or healthy eating networks, meetings and partnerships	All	Warrnambool City Council Community of Practice: Physical Health and Climate Change and the Community
Food and emergency relief	Food access	Warrnambool District Food Share and partner organisations.
Community Meals	Food access	Anglicare community breakfast Warrnambool Presbyterian Church community breakfast Brophy "Friday feed"
Community Gardens	Food availability Food utilisation	Warrnambool Community Garden
Neighbourhood Houses	Food access	Warrnambool Community House West Warrnambool Neighbourhood House
Educational programs	Food access Food utilisation	Everyday Foodies – SWH Stephanie Alexander Kitchen Garden Program – Numerous day cares, primary and secondary schools INFANT
Markets	Food availability	Warrnambool Fresh Market Warrnambool Community Garden Market
Print resources	Food access	Warrnambool Community Food Guide
Online resources	Food access	Connect Warrnambool Warrnambool Good Karma Network

# Appendix 2

Examples of state-wide or other local initiatives aimed at improving food security:

Program/ Project	What does it offer?	Which need does it meet?
<u><b>Uniting Care Little Pantry Recipe Videos</b></u>	Video recipes for cheap and easy meals that can be made from pantry items.	Utilisation
<u><b>Community Grocer</b></u>	Affordable fruit and vegetable market for people at risk of food insecurity	Availability and access
<u><b>Farms to Families pop-up markets</b></u>	Fresh produce market for people experiencing food insecurity	Access
<u><b>Food From Home</b></u>	Recipes, education about growing food, directory of community gardens, free seeds	Access, utilisation
<u><b>Open Food Network</b></u>	Online directory of local food producers	Access
<u><b>Local Food Connect</b></u>	Online directory of local food producers, in season produce guides, food swaps, community gardens	Access, utilisation
<u><b>Cardinia Food Hub</b></u>	Community space for growers, online produce box orders	Availability, access
<u><b>Oakhill Food Justice Farm</b></u>	Food is free initiative, skill-sharing and gardening workshops	Access
<u><b>Food is Free Ballarat</b></u>	Produce swap, education and gardening workshops, community composting	Access, utilisation





South West   
Healthcare