Local Food Projects - the New Philanthropy?

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Introduction and Background

The number and range of initiatives at local level described as 'local food projects' funded by the statutory services has increased over the last decade as the link between food and health becomes more evident and local priorities are dominated by reducing inequalities in health and social exclusion. In this paper we review the nature and remit of such projects, their policy location, the challenge they pose to society in being structured as a main solution to the impact of the food economy on poor households in the UK.

We argue that local food projects meet some short and long term needs, including the development of skills and confidence to buy and prepare food, improvement of physical and to a lesser extent, economic access to quality food, and better health outcomes. However, they cannot address longer term changes needed in economic structures, or food access, and they can pose challenges to social justice in that the realities of life lived on a low income, faced on a daily basis by diverse households, are bypassed in favour of quick solutions. Furthermore, the rhetoric of dignity and self-help are 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'. In some instances, local food projects have empowered some members of hitherto excluded communities to speak for themselves over issues of retail siting and management, food provision of all kinds in schools, and usage of locally produced food for public procurement. However, all too often, local food projects are used as something of a 'quick fix': addressing exclusion, poor food access or skills, or hungry and disaffected school children. The challenge for

planners and funders is to harness the energy, vision and skill development within local food projects, and to develop the capacity to build on and listen to the experience of local people engaged in them.

Food issues have been climbing the public agenda in recent years: anxieties about safety and trustworthiness, school meals and children's eating habits, and obesity/anorexia trigger media and anecdotal attention. The gradually increasing visibility of the new Food Standards Agency has also contributed to raised expectations that 'something must be done'. In particular, local authorities and health authorities charged with reducing inequalities, exclusion and poverty, have seized on community based food initiatives as a means of solving what are perceived to be the particular food problems of those who are poor, lack skills and decent affordable shops nearby. 'Food projects' thus figure in proposals and funding applications for local regeneration and public health, often, with the same projects being reconstituted to meet different agendas.

A lethal combination of market forces and public policy in the UK has led to wider inequalities in income, wealth, and health than almost any other European country. Perhaps unsurprisingly, the fairly widespread development of local level 'food projects' is also a UK phenomena not replicated to the same extent elsewhere in Europe. In that other countries may be moving along the same route, we here set out the key consequences of a policy development which focuses on individual community effort, drawing on research in which we have been involved. [i] [ii]

Local food projects their scope and variety

'Local food projects' are hard to characterise consistently. The term is used by a range of professionals and sectors to indicate initiatives which have in common: *food* (its production, preparation or consumption), *local involvement* (management, delivery, paid/unpaid workers) and *state support* (funding, space, professional input, transport, equipment). The term does not usually include farmers markets or delivery systems such as meals-on-wheels. It ranges from practical sessions on cooking, food co-ops or transport schemes, community cafés, gardening clubs to breakfast clubs in schools. They have a variety of management and organisational structures, and can encompass local activities run by volunteers to those where a statutory worker has been given time to engage with the local community in developing food work. The funding or other support can come from local authorities or health authorities (now Primary Care Trusts), lottery monies or other charitable sources.

Food projects have some similarities with other community and voluntary sector initiatives, such as healthy living centres, stop-smoking groups, drug projects, credit unions or advice centres. These are also orientated to personal change, some in addition attempt to address structural and access problems faced by low-income households and may rely on volunteers to support them. However there are important differences. Food is more complicated issue for individuals, household and communities than credit or clothing. Food choice and management is a daily habit, yet also part of self and family identity, deeply embedded in cultural, social and religious beliefs and practice. Food is

private, in that it is stored and consumed in the domestic domain, but it is also communal (shopping, eating) and therefore is a public good, because few in the UK grow or rear their own food. Access to food, that is the shops or markets people can reach, what they can buy and how much, is governed by decisions in which few ordinary citizens play any part. Initiatives to change factors within the complex business of obtaining, preparing and consuming food will inevitably be varied in nature and outcomes.

The current policy climate

The current policy climate in the UK is to reduce inequalities in health and social exclusion, using a judicious mix of public and private sector partnerships. The rhetoric and some of the realities are towards devolution of decision making and resource allocation, both to Scotland, Wales, N Ireland and England, and to regional authorities. Community led initiatives are encouraged, and the New Opportunities Fund, set up to manage the National Lottery charitable donations, is charged with resourcing many public sector pilot initiatives such as distribution of free fruit to young primary school children.

In these circumstances, professionals have seen food projects as a way of attaining targets such as reductions in heart disease or cancer rates, or contributing to sustainable food supplies (under Local Agenda 21), without the need to engage in protracted debate or conflict with regeneration or business/planning developments, some of which potentially contribute to the problems of food poverty. In practice, local community members engage with food projects in various ways, not necessarily primarily to improve their health. For

those who are poor or live in areas of multiple deprivation, such concerns are not unimportant but inevitably take a back seat to ensuring that children and other family members do not go hungry. Local food projects have a role nonetheless, as they may enable people to access the basics of life and not to feel socially excluded from the cultural norms.

Food poverty and food choice in the UK

Good food is important in its own right as a contributor to health but it is also an indicator of wider social ex/inclusion. Compared to the rich (or even the average) those on low incomes eat less well, often pay more for their food, often face worse access, with a poorer quality/range, and suffer more diet related ill-health. The extent of poverty in the UK is astounding: 13-14.4 million people - one in three children - live in households whose income is below half the average (the EU definition of poverty). There is an increasing gap between the top 10% and the bottom 10% in the income distribution, and one in five working age households has no work.[iii] There has also been a geographic concentration of poor households in areas of multiple deprivation, such that the poorest communities have substantially more unemployment and experience higher levels of poor housing. They have also seen a withdrawal of basic services and amenities, including the major food retailers, who increasingly site either out-of-town for car owning consumers, or in areas where richer people live or work.

People who live on state benefits or the minimum wage often lack sufficient money to buy enough or appropriate food for a healthy diet, especially if they have to meet other

essential expenditures of rent or fuel costs, or are indebted. If they have to rely on small corner stores, they may have to pay anything from 6-13% more for a nutritionally adequate diet than they would if they shopped in one of the main retail outlets. They cannot afford to experiment in food purchase or meal preparation; and, in common with the majority of the population (particularly those who are younger), may lack confidence to cook and prepare unfamiliar foods. The consequence is that people struggle to feed the household, often going hungry, or borrowing food or money to pay for food.[iv] To get access to a healthy diet can necessitate the expense (financial and temporal) of travel by car or public transport. Thus the price of transport is an additional or externalised cost. There is also some evidence that healthier foods cost more. In a comparison of a 'regular' basket of foods with a 'healthier' basket – in the latter replacing skimmed milk for full-fat, wholemeal bread for white, low fat for full fat products, etc.- the more healthy basket of goods costs considerably more than the less healthy.

In practice, food choice and availability are influenced by many factors other than price. They are a function of wider structural issues mediated not only by personal tastes and cultural beliefs but also through public and private sector policies, responding to financial clout and market forces. [v]. Food and nutrition policy in the UK has tended to focus on personal behaviour: on food as part of 'lifestyles' rather than as a basic entitlement. The emphasis is 'downstream' rather than on the 'upstream' determinants of food choice. While people should be free to eat what they want, within reason, many who live on low incomes in practice can exercise very little choice over what food they can buy in their

local shops, or consume at school or at work. In practice, they are excluded from one of the dynamic, leading sectors in society.

Food has become a conspicuous consumer product and subject to the vagaries of the market. Amartya Sen [vi] [vii] in his work on food and inequality notes that food occupies both the realms of citizenship where as citizens people and communities have a right to an adequate amount of safe and wholesome food; at the same time food is also a consumer good where the entitlement may be dictated by trade and financial rights. Food poverty, he argues, is rarely the result of a lack of food but of a lack of entitlement to access that food. Food projects have the potential to address some elements of improving entitlement but funders need to allow some latitude for this to be recognised as a legitimate outcome.

What local food projects can achieve

The problems of inequalities are on such a scale, with the nature of health and food dimensions being structurally based, that one could question the feasibility that food projects could achieve any positive outcomes, particularly those located in the realm of individual behaviour. In practice, such evaluations as have been done have shown that local food projects can have some impact where they are based on sound principles of community involvement and needs assessment, have clear aims and objectives and have been allowed time to establish themselves. For instance, Dobson et al in their evaluation of a community food project with a number of different activities conclude that 'by the end of each initiative, people had made small sustainable changes to their own and their

families;' diet. Perhaps most importantly interest in, and enjoyment of, food had increased.' [viii]

The research cited above also highlights the key issue that success is judged in different ways, not only by different professionals and funders, but also by community members. The former may look for impact on targets reflecting their sectoral interests, such as increased healthy eating practices, reductions in heart attacks or an increase in community capital. For community members, what may matter more is whether or not the initiative survives and thrives – how many people take part, whether they enjoy themselves and make new friends, for example. The characteristics facilitating projects' sustainability are those of sound community development, such as community consultation, ongoing involvement and ownership, the scope for reconciling differing agendas, and continuity of funding. By contrast, projects which are exclusively owned, meeting only professional agendas, and parachuted into a community with short-term, start-up funding, are likely to flounder.[1] Dynamic local workers and discrete professional support also contribute to project success.

On the ground, the majority of funded local food projects are in fact food co-operatives and school-based initiatives; few fit into an overall local strategic plan. The declared aim of many local food projects is to tackle food poverty but the practical application is often on skills acquisition or improving individual food access. Few projects address the upstream determinants of food choice for poor households because these factors are beyond their control. For instance, the local siting of a supermarket or retail strategy for

small shops and businesses is not something that many local communities feel they can influence, although in fact the planning process is meant to include consulting local communities. In practice, even where consultations on regeneration have occurred, local communities often say their concerns have not been heard or addressed.

Over time, many local food projects also face the problem of shifting their aims and activities, or their focus. Although a project may continue as a co-operative or a café, a change of funding stream may, for example, dictate that the focus shifts from 'the elderly' to 'young mothers'. Local food projects often have to 'reinvent' themselves year-in, year-out, to take advantage of funding initiatives. Furthermore, professionals' targets may also change, to reflect local funding or sectoral interests. Again, local food projects have to change if they are dependent on professionals' support and/or funding. Rarely are professionals or community groups able to use the potential of food projects to challenge the dominant food system, or even to give recognition to other positive fallouts outside their remit. For instance, people may be enabled to fulfil personal agendas, of contributing to their local community or gaining confidence and skills that enable them to move from volunteering into paid work. For professionals, the latter can be a mixed blessing: a project seems continually to lose its core, volunteers, yet in practice, such an outcome could be regarded as a success if it was reflected in appropriate objectives such as helping skills development.

Some professionals, and some local community members, may in fact see local food projects as a way of meeting wider objectives such as social inclusion, or as a

contribution to local economic regeneration, or to reduce local inequalities in health outcomes. Food projects thus become a means to an end whereas for many engaged in running them their continuation is an end in itself.

Conclusions

Local food initiatives are being championed as a way of meeting the needs of low-income households for good quality food at prices and distance that can be afforded. They are important parts of anti-poverty, and social exclusion strategies but they should not be the main focus for the food element.

The current plethora of food projects, while being promoted as a way of meeting the needs of low-income groups, in fact are not realising their full potential to act as a means of advocacy. In practice, such a potentially radical focus is not encouraged by funders, who tend to resist behaviour which may be construed as 'political'. In addition, because food projects are increasingly relying on funding from state institutions, albeit only short-term, any radical edge is further blunted as projects become proxy service deliverers for the state so that their advocacy role is compromised. Our observation, however, is that this radical voice of advocacy has been retained in local food projects in Scotland, although they do obtain funding from the Scottish Office, mediated via the Scottish Community Diet Project (SCDP). This mediation may in fact protect the projects in their activities; certainly the SCDP is involved in training, developing and itself campaigning on behalf of local food projects, reflecting a long Scottish commitment to community involvement and development.

Parallels have been drawn between food project and micro-finance initiatives, such as credit unions. Not only do such initiatives, it is said, provide a service that mainstream private sector institutions refuse to countenance, but they also empower and equip low income communities to address their own problems, owning their own solutions and gaining useful skills and confidence at the same time. Marr, summarising recent research on micro-finance initiatives in central America, highlighted sustainability, and reduction in poverty and vulnerability (particularly for women) as twin objectives, but also stressed that many credit unions hovered on the boundaries between small, struggling local initiatives and networked, larger institutionalised systems, sometimes operating within a semi-commercial framework.[ix] She observed that this trend towards institutionalisation tends to lead to 'cherry-picking' the best clients and services to offer, thus excluding the poorest either actively or through self-selection, and reducing the range of options on offer. There are some striking parallels with food initiatives. Food projects may attract the more committed within a community, those with an existing commitment to better health through good food and while they may adequately serve their members the contribution they make to the overall community improvement may be limited.

State support for health initiatives to bring, for example, fruit and vegetables to a local community, have tended to ignore the potential contribution of small retailers, seeing them as part of the problem rather than contributing to solutions. The focus on local food projects distracts from the difficulties of the commercial wholesale market for fruit and vegetables, which has struggled to survive the hegemony of the big retailers over the last decade. People running small green-grocers do not seem able to access networks of

support and presumably lack entry to funding support from institutions such as the National Lottery. Yet their turnover, even in a deprived area, can outrank that of a food co-op. [1]

This dichotomy between local projects and the role of food retailing is one that requires more policy attention. The two are not often connected in policy documents, other than the PAT13 report from the Social Exclusion Unit.[x] To date the major retailers who control the UK economy [2] have not had a commitment to locating in low income or socially excluded areas. The issue is not that the commercial sector should lead on regeneration but that the their place in social and community regeneration needs to be better understood and placed in a policy context. The role and relation of regeneration and retailing is an issue that demands our attention. Work by Carley and colleagues[xi] shows sensitive and well planned food retailing initiatives can contribute to improvements in the social structure of an area including improvements in social amenities and greater social cohesion as in lower crime rates etc. These wider issues are difficult for local food projects to address.

Health sector policy documents have highlighted the problems of retail access, but locate the solutions in local food projects, because retail and regeneration strategies are outside their capacity. There is some evidence of recognition that sustainability and participation,

[1] For instance, a struggling greengrocers in a deprived ward in the English midlands has an annual turnover of approx £50,000; of this, about £30-35,000 goes on purchases, £5,000 on rent and rates, leaving the (quite enterprising) shop-manager with about £10-15,000 to pay her staff and herself; by contrast, the local, reasonably successful community food co-op serving the whole borough has an annual turnover of £42,000, and relies heavily on voluntary labour.

[2] Five UK food retailers -Sainsbury, Tesco, Safeway, Asda and Gateway- accounted for 70% of the total UK grocery market

shared ownership and capacity building are key to reducing inequalities and deprivation. Nonetheless, community food projects are seized on as 'the' local answer. They are highlighted in local Health Action Zone plans; many health authorities and now PCTs, and/or local authorities run training days about them. The Departments of Health and Education and Skills launched a joint initiative on School Breakfast clubs. Local projects are also promoted and supported by non-governmental organisations such as Sustain: the Alliance for Food and Farming, and Oxfam UK, not least for the empowerment and achievement for local community members they engender. Over £50million has been made available through lottery funds for piloting school and community based initiatives designed to improve uptake of fruit and vegetables in areas of deprivation. The irony is that national objectives and funding are being channelled through local food projects, as the best way to reach deprived communities, but without recognition of the factors outlined above essential for project sustainability and 'success', of which community ownership, shared agendas, ongoing funding are key factors. Indeed, the targets to be achieved and the indicators of success are still laid down at the centre; local accountability is retained, as is the domination of the food supply chain by a small number of retailers.

Food projects also continue to exist within a policy framework dominated by models of ideologies of consumer and individual choice as opposed to public health and citizenship approaches. Suppose, for example, we consider food as a product of basic utility; like water, food is both consumed, and produced/distributed by private sector businesses run for profit, and public utilities such as water and sewerage were originally devised as

public health services. There is not yet a requirement incumbent on those who live in areas where water is expensive and/or difficult to provide to organise a chain of buckets to a community standpipe. Why is that then the solution for food, as in a co-operative? We don‘t expect the rich to get up at 4.30 a.m. to buy vegetables for 45 families for a week, and then spend all morning weighing and bagging them up, unpaid: why should the poor have to do it every week?

Food is in fact treated as a utility by government in that no VAT is levied on it. Indeed, people who live on low incomes themselves see food as on a par with water, gas or electricity: they weigh up which bits of their weekly bills they will pay, juggling one versus another. Some try to protect food expenditure, running up other debts, with the consequence that that they regularly face “a week of jam sandwiches and tea” when there is no money left for other food. Others prioritise the utilities that can disconnect, fine or imprison a continual defaulter; food is what is continually cut. However, the policy approaches to food are rather different from those for other public utilities. The water industry, for instance, is highly regulated, but the regulator’s primary responsibility is to ensure that the industry provides customers with a good quality and efficient service at a fair price (discharged by controlling the prices water companies can charge). There is no comparable economic regulator for food. No agency has statutory or any other responsibility for measuring and monitoring food access (economic and physical) or food security. Yet, like water, food must not only be safe, it is a necessary condition of public health for all, rather than simply for those who can afford it.

This concept mirrors the tradition of public health work related to food in the nineteenth century, when, for instance, the original Victorian covered food markets were seen as public health initiatives to bring wholesome food to the urban classes. They were not left to the vagaries of the free-trade philosophy but were firmly embodied in the work of local authorities as a contributor to the public good. Since then, along with other public health utilities (water, sewage and housing) food has entered the realm of consumerism and commodity culture shifting the responsibility from the state to the individual. The individual has been reconfigured as a consumer as opposed to a citizen, which chimes with the focus on the individual's actions and behaviours in many current local food projects.[xii]

Traditionally one key principle of food security is precisely that, as far as possible, people should be free from fear and anxiety about being able to eat healthily, or even at all. Society generally expects that those who have little money to budget with care to meet essential needs. However, until recently, members of households with low incomes have in effect borne all the responsibilities: they have had no say in how much money they earn or can claim, under what conditions, what happens to the local shops, what prices they have to pay, how they get to cheaper shops. They have had to struggle to make the best they could in extreme circumstances, and the consequences for health and well-being have been widely documented. The current focus on partnership and participation is creative but the challenge is to ensure the creativity and voices go in both/all directions. Local food initiatives clearly have a place, but only as part of a range of solutions, to

enable those on the lowest incomes to obtain and eat sufficient, appropriate food for their present and future well-being.

Food projects are in danger of becoming a 'new philanthropy': in the days when owners of factories like Cadbury and Carrs sponsored workplace canteens and food for the workers of their families, they did it out of a sense of duty and obligation, reflecting their Quaker traditions. However, their efforts were probably more like oil on troubled waters as it was only with the intervention of the state into nutrition that the health of the population improved (for example, targeted and then universal school meals, or welfare foods). Today we are seeing a reversal of this, with the state adopting the role of philanthropist and tackling food poverty on a piecemeal basis through encouragement of local food projects.

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