Food Poverty and Food Insecurity in Fife

Final Report

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Fife Health and Wellbeing Alliance
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Summary

1 Fife Health and Wellbeing Alliance (FHWA) commissioned this study to build a better understanding of food poverty and food insecurity in Fife. The study responds to the Dignity: Ending Food Poverty in Scotland report which highlighted the lack of a robust evidence base in Scotland and recommended the development of local community food plans.

2 The study aims were to: identify key issues emerging from national and local evidence; establish baseline data on the extent and nature of food poverty and food insecurity in Fife; map the diverse range of local initiatives to tackle the issues; and assess the extent to which initiatives are effective, sustainable, meet the underpinning principles set out in the Dignity report, and contribute to reducing health inequalities.

3 A mixed methods approach was adopted consisting of: consultation with stakeholders, service providers and people with direct experience of food poverty and food insecurity; a review of local and national documents and data; a comprehensive mapping exercise; assessment of the initiatives against the stated criteria; and a stakeholder workshop to discuss emerging findings.

4 Following a literature review and discussion at the stakeholder workshop, the phrase ‘household food insecurity’ was identified as the most appropriate term and is proposed for future use in Fife in place of food poverty and food insecurity. The term is defined as:

   Household food insecurity is the inability of one or more members of a household to consume an adequate quality or sufficient quantity of food that is useful for health in socially acceptable ways, or the uncertainty that they will be able to do so.

5 The evidence clearly demonstrates the inextricable link between household food insecurity and a series of income-related issues including changes to the welfare system, rising living costs, increasing food and energy costs, low wages, and job insecurity.

6 Other factors that contribute to household food insecurity were identified as: limited availability of and access to retailers selling affordable, nutritious food; access to transport; access to cooking, storage and preparation facilities; and appropriate skills and knowledge relating to nutrition and the preparation of meals.

7 The detrimental impact household food insecurity has on health was highlighted with evidence cited that poor diet is a risk factor in obesity, cancer, coronary heart disease and diabetes.

8 The personal and variable nature of food insecurity was also highlighted with evidence showing it can be dynamic, experienced in mild, moderate or severe forms, and be a chronic and/or acute experience.

9 There was evidence of increasing household food insecurity in Scotland indicated by use of foodbanks. Data from the Trussell Trust showed how the use of foodbanks had increased by over 900% since 2012/13 with approximately 146,000 food parcels provided to those in need in 2016/17. While foodbank data is useful it was noted that it was only a partial measure of household food insecurity as many people choose not to use foodbanks for a variety of reasons. Robust data on the nature and extent of household food insecurity in Scotland was found to be limited.
The long-term policy ambition in Fife focuses on sustainable solutions that address the underlying causes of household food insecurity. This local approach, which mirrors the national approach outlined in the Dignity report, was supported by consultees during this study.

Using UK data from the Food Standard Agency’s Food and Your Survey it was estimated that 24,300 adults aged 16 and over in Fife could live in low or very low food secure households. Using UK data from a United Nations’ Food and Agriculture Organisation study it was estimated that 31,100 adults aged 15 and over in Fife could be moderately food insecure and 13,800 could experience a severe level of food insecurity. Although these estimates were based on the assumption that the situation in Fife would mirror that of the UK as a whole and could therefore be challenged, they do provide an indication of the level of household food insecurity in Fife. The first estimate is considered more robust than the second given its greater sampled size.

SIMD income deprivation data showed that approximately 45,400 people (adults and children) in Fife are income deprived (the main cause of household food insecurity) and the small area SIMD data showed the distribution of income deprived people across Fife. The proportion of income deprived people in parts of Buckhaven, Kirkcaldy, Methil, Baltingry, Burntisland, Dunfermline, and Glenrothes was shown to be amongst the highest in Scotland.

SIMD data also illustrated that parts of Fife suffer from relatively poor access to services including a retail centre (another possible cause of household food insecurity). The areas identified were Newburgh, Valleyfield, Culross, Torryburn, Oakley, Comrie, Blairhall, Saline, Gowkhall, Falkland and Freuchie. Income deprived people in these areas would be at greater risk of household food insecurity.

Evidence from the literature review identified that several vulnerable or disadvantaged groups are at risk of household food insecurity. There was a gender aspect to some of the groups which included women, mothers, lone parents and families with young children. There was also an age aspect with young people, young carers, and older people identified. Other at risk groups included homeless, people with mental health issues, long term sick and disabled, refugees and asylum seekers, and travellers and gypsies. Child food insecurity was also noted as a key issue.

The mapping exercise focused on services in Fife with a specific remit of addressing household food insecurity and excluded broader anti-poverty services, of which there are many. The comprehensive exercise utilised information supplied by services, stakeholders and online research.

There are eight foodbanks with outlets spread across 14 communities in Fife. Due to different mechanisms for recording data, it was not possible to compare foodbank usage precisely. It was estimated they provided approximately 12,100 food parcels with 22,300 adults and children benefitting from these parcels in 2016. However, care should be taken with these figures which are estimates and include double counting as repeat users are recorded more than once by providers. Kirkcaldy Foodbank reported the highest number of beneficiaries and it was suggested this reflected their accessible model which includes six outlets in the town, extended opening times, and flexibly applied eligibility criteria (although this is likely to increase the level of double counting compared to other foodbanks which tend to limit the number of repeat visits).
A total of 22 community cafés operated by 18 organisations were identified in Fife. They were concentrated in the main towns of Glenrothes, Kirkcaldy, Dunfermline, Levenmouth, Cupar and Cowdenbeath. Although community cafés exist in Oakley, Kennoway, Anstruther, Methil and Wormit, most smaller settlements in Fife did not have a community café. Service user figures were relatively low however the value of the cafés was evident when the limited opening times were taken into consideration.

The mapping exercise also identified 14 community growing projects (community gardens, allotments, and orchards) that provide opportunities for individuals and groups to grow their own fruit and vegetables. This included the Edible and Tasty Spaces (EATS) initiative that uses unfenced public spaces to grow fruit and vegetables that local people can help themselves to or which is distributed to community groups. Given the nature of the projects it was not possible to quantify participant numbers.

Services providing advice on food issues and practical cooking sessions to tackle household food insecurity were also mapped. These services were provided by several organisations involved in the provision of food parcels, cooked/prepared meals and community growing projects, as well as organisations that incorporate such services into their broader support and advice. The unique role of Fife Community Food Project and their Food Champions training was highlighted; the Project could potentially have a key role in future attempts to tackle the underlying causes of household food insecurity.

Generally speaking, existing services in Fife were well regarded by local people with direct experience of household food insecurity.

Services were deemed to be reasonably effective at ameliorating the effects of household food insecurity although gaps were identified in terms of their reach and the number of people engaged. It was also noted that few services reviewed within the scope of this study currently focus on tackling the underlying causes of food insecurity.

The mapping exercise demonstrated that services rely heavily on volunteers and food donations. While this was sustainable in the sense it provided some insurance from a dependence on external funding, it also means the services are reliant on the continued time and goodwill of the volunteers and the continued supply of food donations.

The assessment of the extent to which existing services meet the underpinning principles of the Dignity report found that people with direct experience had limited involvement in decision making, services did generally recognise the social value of food, they also provided opportunities for people to contribute although limited numbers chose to do so, and gave people the power to choose.

Overall community food initiatives in Fife contribute to reducing health inequalities and examples were highlighted across the three themes (changing the way organisations work, creating healthier places and communities, and supporting healthier lives for individuals and families). However, their contribution to some aspects of reducing health inequalities was more limited. Some stakeholders and providers primarily see services as alleviating hunger rather than addressing health inequalities.

In conclusion, the study has addressed the previous lack of robust evidence around household food insecurity in Fife. The findings provide FHWA with a sound theoretical basis for a coherent approach to tackle the underlying causes of household food insecurity in Fife.
1 Introduction

1.1 Fife Health and Wellbeing Alliance (FHWA)\(^1\) commissioned this study to build a better understanding of food poverty and food insecurity across Fife. The study responds to the *Dignity: Ending Food Poverty in Scotland* report published by the Independent Working Group on Food Poverty in June 2016 which highlighted the lack of a robust evidence base in Scotland around food poverty and food insecurity, and recommended the development of local community food plans by local authorities in partnership with other agencies.

1.2 The specific aims of the research were to:
- Identify key themes and issues emerging from national and local evidence, reports and policy documents.
- Set out clear definitions of food poverty and food insecurity.
- Establish baseline data on the extent and nature of food poverty and food insecurity in Fife.
- Map the diverse range of initiatives currently in place in Fife to alleviate and tackle food poverty and food insecurity.
- Assess the extent to which initiatives are effective, sustainable and meet the underpinning principles set out in the Dignity report.
- Review food initiatives’ contribution to reducing health inequalities, through use of FHWA’s Health Inequalities Checklist.

1.3 To address the study brief, a mixed methods approach was adopted consisting of:
- A review of local and national strategy documents, policies, and previous research.
- Analysis of a range of local and national data.
- A mapping exercise involving initial research which identified approximately 100 potentially relevant services followed by the distribution of a pro-forma to gather detailed information from services. In total 34 services returned pro-formas. Where necessary additional information on services was gathered from fact finding visits, telephone calls or online research.
- Consultation with 23 local people with direct experience of food poverty and food insecurity. The majority (18) of those interviewed were users of one of a community café, foodbank, or community growing project. In addition, five people, accessed through a homeless hostel, did not use any food related support services.
- Consultation with 13 key stakeholders. This included public sector representatives from NHS Fife and Fife Council whose responsibilities included health inequalities, Fife Community Food Project, Scottish Welfare Fund, housing, community learning and development, and allotments. Third sector consultation involvement representatives from Trussell Trust, Citizens Advice and Rights Fife, CLEAR Buckhaven, Greener Kirkcaldy, Link Up Gallatown, FareShare, and Scottish Christian Alliance.
- A workshop in May 2017 attended by stakeholders from Fife’s public and third sector, the study commissioners, and the study team to discuss the emerging findings and how the learning could be applied in the future.

1.4 Food poverty and food insecurity are sometimes used interchangeably yet it is important at

\(^1\) FHWA is a cross-sectoral strategic partnership which forms part of Fife’s community planning structure and has the lead for improving health and narrowing the health inequalities gap in Fife.
the outset of this report to clarify the difference between the two. The Dignity report defined the terms as follows:

**Food insecurity** is ‘the broad phenomenon when people are worried about not having enough food for themselves and their families’.

**Food poverty** describes ‘the more extreme, but sadly not unusual, occasions when lack of food results in people going hungry because of a lack of resources’.

1.5 Furthermore, the Dignity report accepted the most widely used definition of food poverty by Professor Elizabeth Dowler\(^2\) that recognises the importance of being able to participate in ways of accessing food which are common to a society and of being free from anxiety about a future ability to do this:

‘Food poverty is the inability to consume an adequate quality or sufficient quantity of food that is useful for health in socially acceptable ways, or the uncertainty that one will be able to do so’.

1.6 Stakeholders attending the study workshop in May 2017 acknowledged the difference between food poverty and food insecurity as defined by the Dignity report but noted that such a division can be confusing given the interchangeable use of the terms. Throughout the study it was noted that not all consultees fully understood the distinction between the terms. At the workshop, stakeholders agreed that the Dowler definition should be adopted in Fife as it was the most widely accepted definition and it captured the social aspects of food insecurity. Stakeholders also discussed the existence of food insecurity at the household level and suggested applying the term household food insecurity to capture all aspects of food poverty and food insecurity. Therefore, the following definition is proposed for future use in Fife:

*Household food insecurity is the inability of one or more members of a household to consume an adequate quality or sufficient quantity of food that is useful for health in socially acceptable ways, or the uncertainty that they will be able to do so.*

1.7 The term household food insecurity is used in the remainder of this report.

**Report Structure**

1.8 This report is structured as follows:

- Key themes and issues surrounding household food insecurity (Section 2).
- Extent and nature of household food insecurity in Fife (Section 3).
- Mapping (Section 4) and assessment (Section 5) of existing services to tackle household food insecurity in Fife.
- Conclusions (Section 6).

2 Key issues surrounding household food insecurity

2.1 In this section we identify the key themes and issues surrounding household food insecurity which emerged from our review of national and local reports and policy documents, and from a wide-ranging consultation with stakeholders and people with direct experience of household food insecurity in Fife. The issues are: the link between income and household food insecurity, the influence of other factors, the detrimental impact on health, the personal and variable nature of household food insecurity, increasing demand (indicated by the use of foodbanks), the limited availability of robust data, and the national and local policy context.

Income-related causes of household food insecurity

2.2 A review of research on household food insecurity clearly shows that the issue is inextricably linked to income – see for example Below the Breadline: The Relentless Rise of Food Poverty in Britain. NHS Health Scotland’s Position Statement on Food Poverty stated that ‘food poverty is one specific dimension of poverty... (and) as with all poverty, food poverty is primarily driven by income deprivation’. The following income-related factors are identified in the Position Statement as impacting on the number of people in Scotland experiencing household food insecurity:
  - rising living costs
  - increasing food and energy costs
  - low wages
  - job insecurity
  - changes to the welfare system including benefit sanctions.

2.3 The UK Government has implemented a series of changes to social security conditions and entitlements which have affected households dependent on benefits for all or part of their income. A recent report by the Trussell Trust Early Warnings: Universal Credit and Foodbanks found that foodbanks in areas where Universal Credit had been fully implemented had recorded a 17% rise in referrals for emergency food, which was more than twice the increase recorded nationally (7%). One of the main causes of this was the average wait of six weeks for the first Universal Credit payment. Rollout of Universal Credit in Fife is timetabled for 2017 and if the Trussell Trust’s experience elsewhere is mirrored locally, then an increase in foodbank use can be expected. Several stakeholders stated that Scotland had not yet experienced the full impact of benefit changes and they anticipated it would, in all likelihood, lead to an increase in the number of people experiencing household food insecurity.

2.4 For those in work, the increased use of so-called zero hours contracts and wage stagnation have resulted in more people being in ‘precarious, insecure, low-paid work’³. The Trussell Trust report noted that people in insecure and seasonal work were particularly affected by the rollout of Universal Credit. A number of consultees also noted that families in work were increasingly experiencing household food insecurity and this was largely explained by stagnating wages, reducing in-work benefits, unpredictable incomes linked to short-term contracts or zero hours contracts, as well as rising energy and food costs.

³ Tackling Poverty Together (Devlin and Ramsay, 2016).
2.5 Recent figures from *Poverty and Income Inequality in Scotland 2015/16* (Scottish Government, 2017) show that one fifth of the population in Scotland - approximately one million people - were living in relative poverty (after housing costs) and these figures were rising over time. The situation was more pronounced for children with over a quarter - approximately a quarter of a million in number – living in relative poverty (after housing costs) and these figures were also increasing over time. The statistics also showed that in-work poverty was a significant and increasing issue with approximately two thirds of working-age adults living in relative poverty (after housing costs) living in working households. A second recent publication from the Scottish Government - *Persistent Poverty in Scotland: 2010-2015* – showed that 9% of the people in Scotland had lived in poverty for at least three of the last four years and were therefore classified as suffering from persistent poverty (after housing costs).

2.6 Experiences of household food insecurity can be exacerbated by the so-called ‘Poverty Premium’ whereby people on low income pay disproportionately higher charges for utilities such as energy, access to internet and mobile phone bills. The average annual poverty premium paid by low income households was estimated at £1,280 in 2014. These extra charges can be critical in pushing people into a cycle of poverty.

2.7 The *Nature and Extent of Food Poverty in Scotland* study involved extensive qualitative and quantitative research to better understand the prevalence and nature of household food insecurity. A recurring view among consultees was that ‘much of the problem of household food insecurity in Scotland was due to people having insufficient and or unpredictable levels of income arising from either being in poorly paid, unpredictable employment, or, because of recent changes to the social security system i.e. associated with the changes to eligibility, perceptions about the local application of the eligibility rules, and of the levels of benefit available to recipients. This was thought to be further exacerbated by higher costs of living’. The study’s statistical analysis revealed that poorer households spent less in total on food and non-alcoholic drink, and less per person than households with above average incomes. However, poorer households spent almost twice the proportion of their household income on food and non-alcoholic drink compared to those with above average incomes showing the disproportionate impact of household food insecurity.

2.8 Stakeholders and local people with lived experience of household food insecurity identified income-related issues as the main cause which supports the literature-based evidence highlighted above. All the local people we met talked about living on a limited income. For the majority of people benefits were the main source of household income and they pointed to recent changes in eligibility, delays in processing claims/receiving payments, and the falling value of benefits relative to the cost of living, as factors which compounded their situation, although none had been sanctioned.

“Everything seems to go up but benefits don’t”. (Foodbank user)

“I pay more out than comes in”. (Community café user)

“I always pay my bills first because if I fall behind then I might get too deep into...

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5 *Food, fuel, finance: Tackling the poverty premium* (McBride and Purcell, 2014).

6 *Still Addressing the Poverty Premium* (Citizens Advice Scotland, 2015)
Several local people mentioned the rising cost of food and energy which made it more difficult to manage their finances. Some reported, as a result, that they frequently had to decide between spending money on food or energy bills. Such comments demonstrate the stark reality facing some people as they choose between two basic human rights – eating and warmth.

“Choices are made every fortnight. All day, every day, I need heat more than 20 degrees (because of a health issue). I am struggling to even buy food. Choices are basically food or heat”. (Foodbank user)

“I have to budget fuel or food. I pay monthly fuel and need it more in winter”. (Hostel resident, non-user of food poverty services)

“Sometimes I prefer to spend on gas than food…..can’t make pot of soup in case gas runs out”. (Community café user)

“Working families pay more fuel and make savings on food”. (Hostel non-service user)

Another indication of the stark choices facing households came from comments that some people were choosing not to eat so other members of the family, particularly children, could eat. In other words, even when money for food was available, there were still times when some people had to make difficult choices.

“Gas or electric? Do I feed myself or kids?”. (Community café user)

“I’d never use the foodbank if it wasn’t for my daughter”. (Foodbank and community growing project user)

Discussions illustrated how limited income influenced shopping patterns. Most people bought their food from low cost retailers such as Aldi, Farmfoods, and Iceland. Respondents felt that prices are rising in these stores however they still considered them more affordable than the alternatives. Other retailers, including the large supermarkets, were generally perceived as expensive and several people reported that they would travel further away to buy food from a more affordable retailer, although cost again comes into the equation with one foodbank noting that catching the bus to access cheaper food than their local retailer would cost them £9.

“The Co-op is expensive…I want to eat healthy but fruit alone costs like two quid”. (Foodbank user)

Several stakeholders suggested that the income-related issues were exacerbated when people lacked budgeting skills. Some of these stakeholders added that people were either unaware that budgetary advice was available or were reluctant to use it.

Other causes of household food insecurity

Although income is a key factor in household food insecurity, previous research demonstrates that there are other determinants. NHS Health Scotland’s Position Statement on Food Poverty noted that it is a complex and multidimensional issue with an array of factors (in addition to income) contributing to it including:

- Local availability of and access to retailers selling affordable, nutritious food.
- Access to transport.
Access to cooking, storage and preparation facilities.
- Appropriate skills and knowledge relating to nutrition and the preparation of meals.

2.14 Access to retailers selling affordable, nutritious food can be more difficult in rural areas – such as parts of Fife – where transport links are less well developed. There can therefore be a compound effect facing some households. Combined with the above income-related issue this means some people have limited finances with which to fulfil their basic needs including food, but they can also struggle to buy fresh, healthy and affordable food where there are no stores in their area selling affordable food, they face transport barriers to access such food elsewhere, or their incomes are too low to buy what is available locally.

Locally, Fife Council has introduced measures that aim to address access barriers. For example, Kirkcaldy Foodbank volunteers can hand out bus fare vouchers – provided by Community Learning and Development – for service users they assess as requiring assistance to make the journey home; a volunteer described the scheme as very useful and explained that it was used for those with a significant bus journey or who were frail or disabled. Another consultee highlighted a pilot project funded by Dunfermline Area Committee to cover public transport costs to and from local foodbank outlets; a Dunfermline foodbank user made the following comment.

“You need a bus or taxi to get to the foodbank (in Dunfermline). It’s only accessible if you’re in the high street”.

2.15 Skills and knowledge was identified by consultees in the Nature and Extent of Food Poverty in Scotland study which the Position Statement drew on. This issue was described as ‘the underlying problem of a perceived general de-skilling of people in relation to food, due to social and cultural norms surrounding food and eating in Scotland, e.g. the perceived collective tendency to eat ready-made, convenience food on a regular basis in this country’. Skills and knowledge were perceived by the study authors to be the least important of the contributory factors they identified as determinants of household food insecurity. The study also highlighted the lack of family support nearby as a further factor affecting those experiencing household food insecurity.

Health impact

2.16 NHS Health Scotland’s Position Statement on Food Poverty stressed the issue is a significant threat to health and wellbeing which can result in malnutrition and contribute to ‘numerous non-communicable diseases’.

2.17 Poor diet is a risk factor in obesity, cancer, coronary heart disease (CHD) and diabetes. Poor diet is characterised by excessive intakes of saturated fat, salt or sugar which are common in processed food, and an insufficient consumption of fruit and vegetable, and dietary fibre. The Faculty of Public Health Food Poverty and Health Briefing Statement cited evidence that poor diet is related to 30% of life years lost in early death and disability and specifically contributes to:
- almost 50% of CHD deaths
- 33% of all cancer deaths

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7 The Nature and Extent of Food Poverty (Douglas et al, 2015).
8 Understanding Food in the Context of Poverty, Economic Insecurity and Social Exclusion (Food Standards Agency in Northern Ireland, 2015)
9 Food Poverty and Health Briefing Statement (The Faculty of Public Health of the Royal Colleges of Physicians, 2005)
- increased falls and fractures in older people
- low birthweight and increased childhood morbidity and mortality
- increased dental caries in children.

2.18 FHWA raised the nutritional intake of those experiencing household food insecurity as an area of interest at the outset of the study. This issue has received less attention than other aspects of household food insecurity and relevant literature is therefore limited.

2.19 The Nature and Extent of Food Poverty in Scotland study did examine data on dietary intake including fruit and vegetable consumption. It found that low income households in Scotland tended to have poorer dietary intake than those in less deprived areas, although this was set within the overall context that the population as a whole falls short of the Scottish Dietary Goals. The authors’ qualitative research raised questions about the usability and dietary quality of the food available from foodbanks in Scotland, and suggested the issue be subject to further investigation. The Trussell Trust has produced detailed nutritional guidelines which are applied when their food parcels are made up for service users although a small number of consultees noted that this was within the constraints of the supplies available to the Trust and they questioned the quality of the food donated to foodbanks. In addition, research into community cafés in Scotland found that the majority of cafés involved in the study aimed to offer healthy food, although this was not rigorously defined or examined and only one of the 12 cafés had achieved the Healthy Living Award for example. Some stakeholders were concerned about the quality and nutritional value of food available to those experiencing household food insecurity and their views mirror the Dignity report recommendation that ‘community food providers (including those providing food in an emergency) should work together to improve the quality of the food provided and create opportunities to enable the sharing of meals, the provision of choice, and culturally appropriate nutritious foods’.

Personal and variable nature of household food insecurity

2.20 The term household food insecurity is an important recognition that the issues affect households and the individuals within it. Earlier interpretations of food poverty and food insecurity tended to apply at the macro-level in respect of regions or countries, particularly in developing countries. The prevalence of household food insecurity in the UK - one of the richest countries in the world - is commented on in much of the literature.

2.21 Previous research demonstrated that household food insecurity can be a variable issue dependent on the interplay of the income and other factors discussed above. This results in a situation which tends to be:
- Dynamic insofar as people can regularly move in and out of household food insecurity according to the availability of household income on a weekly or monthly basis.
- Can be experienced in mild, moderate or severe forms.
- Can be a chronic and / or acute experience.

2.22 The personal scale of household food insecurity is very evident in the Dignity report. It was informed by personal accounts of those with experience and is underpinned by the call for a dignified response that respects individuals experiencing household food insecurity. The Independent Working Group identified four principles which they proposed should guide a dignified response to household food insecurity:
- Involve in decision making people with direct experience.
- Recognise the social value of food.
• Provide opportunities to contribute.
• Leave people with the power to choose.

2.23 Generally local people with direct experience of household food insecurity interviewed during the study thought that many other people in Fife were in similar situations and were worried about being able to feed themselves or their family. Although they felt the number who may be experiencing hunger through a lack of food would be less, nonetheless they still thought this situation existed. It was noteworthy that those we spoke with felt the true extent of household food insecurity may be greater than they or policymakers were aware of as it was a hidden issue for some.

“It’s very common here but swept under the carpet”. (Foodbank user)

“In Fife I think its hidden because people are ashamed”. (Community café user)

“Insecurity is very common, probably every other person feels this”. (Community café user)

Limited data

2.24 The Nature and Extent of Food Poverty in Scotland was a significant study which is referenced throughout this report, not least in Section 3 which examines the extent and nature of food poverty and food insecurity in Fife. The study noted that household level food insecurity data is not collected in Scotland or the UK unlike other countries such as Canada. In the absence of robust food poverty data, the study examined several datasets and as an indicator of household food insecurity used households with an income below 60% of the median household equivalised income which is a widely used measure of those at risk of poverty. The report also noted that data gathering by foodbanks was limited overall and did not systematically record information on household conditions or practices. The report recommended that data on household food insecurity in Scotland, including specific groups deemed to be at high risk, were urgently required. Likewise, the Dignity report recommended that ‘food insecurity is measured more systematically in Scotland, as it is in many other countries, so that we can focus action more effectively and measure results over time’. We understand that the Scottish Health Survey (SHeS) will include questions on household food insecurity from 2017. SHeS data is available at the Fife level and this data will be very useful for FWA and partners. FHWA may wish to consider with others how to routinely gather local information on the nature and extent of household food insecurity within Fife. Such evidence would put Fife at the forefront of evidence gathering in Scotland and could help inform future policy and practice.

2.25 Canada routinely records household level data on household food insecurity in annual community health surveys and has done so for more than a decade. Recent figures estimate that 13% of the Canadian population experience some degree of household food insecurity, ranging from marginal to severe, with trends indicating an increase since 2011. Canadian data also clearly shows variation in the experiences of household food insecurity geographically and by household type. For example, ‘the prevalence of food poverty and food insecurity is most marked in Canadian households with children under the age of 18, with those food insecure households headed by a female lone parent most badly affected of all’. The quality of Canadian data also showed that only 20-30% of people who are food insecure reported visiting a foodbank. This is an important finding that is relevant to any review of household food insecurity including this Fife study as the use of foodbanks is often
used as an indicator of the broader issues yet the Canadian evidence shows the full extent of household food insecurity can be three to five times greater.

**Increasing demand (indicated by the use of foodbanks)**

2.26 Foodbanks are the most high profile of a range of services available for those experiencing food poverty and food insecurity. There is strong evidence that the use of foodbanks in Scotland is increasing. Figures from the Trussell Trust show the total number of three-day emergency food supplies handed out rose by over 900% from 14,318 in 2012/13 to 145,865 in 2016/17.

**Figure 1 – Trussell Trust Emergency Food Supplies in Scotland**

2.27 The above figures relate to the number of times food supplies are provided and do not count unique foodbank users as a person exchanging more than one food voucher over the year would be counted in the figures each time they received emergency food supplies. The Trust estimate that on average people used a foodbank twice a year. Therefore, they estimate number of households using foodbanks in Scotland has increased from approximately 7,200 in 2012/13 to 72,900 in 2016/17.

2.28 Such a rise will have been *influenced* by the income-related and other factors summarised above. It has been *facilitated* by the Trussell Trust’s expanded network of foodbanks which are supplied by an increasingly efficient system of food collection from retailers and individual donations.

2.29 The *Nature and Extent of Food Poverty in Scotland* noted the increasing number of foodbanks in Scotland. In addition to rising number of standalone foodbanks such as those operated by the Trussell Trust, the report highlighted that ‘long-standing community food programmes had added foodbank operations to their work in recent years. The impetus to include emergency or free food provision had arisen either in response to requests for help from local health or social care professionals for people believed to be in food crisis, or had been due to requests from members of the local community, who were aware of their existing presence as a local food hub’. One of the Fife stakeholders reported that a broader range of
services had started to supply emergency food parcels because some people were too proud to use a foodbank. Several stakeholders discussed the perceived stigma associated with the use of foodbanks by those in need.

2.30 It should be noted however that the sustainability of the foodbank model has been questioned as retailers seek to reduce food waste (some of which is supplied to foodbanks) and in terms of the reliance on volunteers at the foodbanks. More fundamentally, some academic papers have questioned the foodbank model\(^\text{10}\). Evidence from other countries indicates that foodbanks are ineffective as a means of addressing household food insecurity for a number of reasons not least because there are significant numbers of households that could benefit from foodbanks but choose not to use them due to 1) feelings of embarrassment and shame, 2) a belief that it does not offer them what they need, 3) because there is not one available locally, or 4) that the local foodbank is open so infrequently that it is not perceived as accessible. Older people, particularly older carers, were identified in the *Nature and Extent of Food Poverty in Scotland* as a specific group who were less likely to accept referrals to foodbanks.

2.31 Questions regarding the role foodbanks have in tackling household food insecurity are apparent in the evolving policy response in Scotland.

**National and local policy**

2.32 Under Article 11 of the UN International Covenant on Economic, Social and Cultural Rights (ICESCR), the UK is committed to providing adequate food for every individual as part of the right to an adequate standard of living.

2.33 In Scotland, the Scottish Government has a vision to create a Good Food Nation which includes an aspiration that ‘everyone in Scotland has ready access to the healthy, nutritious food they need’. To take forward these ambitions the Scottish Government is planning consultation during 2017 on a Good Food Nation Bill which is expected to contain proposals to underpin the right to food in law. The *Food Commission*, the *Scottish Government Malnutrition Summit*, and the *Independent Working Group on Food Poverty* have been important elements of this process to date.

2.34 The Independent Working Group produced the Dignity report which has provided the broad policy framework for addressing household food insecurity across Scotland. The report contained 19 recommendations that seek to:

- Promote dignity and transition away from emergency food aid such as foodbanks.
- Improve information and understanding.
- Address income and benefit issues to prevent food poverty.
- Respond to acute food insecurity including by widespread use of the Scottish Welfare Fund as the first port of call for emergency support.
- Invest in appropriate actions including the development of community food hubs and the development of Community Food Plans.

2.35 The Working Group’s findings have been supported by the Poverty and Social Exclusion Division of the Scottish Government and the Working Group has recently been reconvened at the request of the Minister for Social Security. The Scottish Government’s Fair Food Transformation Fund made £1million available annually to develop more dignified responses

\(^{10}\) Is it appropriate to use surplus food to feed people in hunger? Short-term Band-Aid to more deep-rooted problems of poverty* (Caraher, 2017).
to household food insecurity.

2.36 The Dignity report’s recommendation that Scotland transitions away from emergency food aid appears to be widely supported by stakeholders and discussion papers such as Professor Martin Caraher’s recent paper referenced above. Doing so will require concerted effort by a range of organisations to address the root causes particularly the inextricable link to income. In addition, the Nature and Extent research highlighted that there may be potentially unrealistic expectations about alternative solutions such as community gardening and grow-your-own schemes as a means of addressing household food insecurity in Scotland.

2.37 In Fife, the Health and Wellbeing Alliance commissioned this research as part of process to develop a more coherent and sustainable approach to household food insecurity. In the absence of a specific strategy or policy document on the issues, the Alliance’s overarching health inequalities strategy 2015-20 Fairer Health for Fife is an important reference. The strategy is built on the three themes shown opposite. The approach to supporting healthier lives for individuals and families includes ‘creating opportunities and reducing barriers for people to improve their health and wellbeing e.g. access to affordable, healthy food’. The strategy’s three themes provide the structure for the Alliance’s Health Inequalities Checklist which has been produced to enable partnerships, organisations and services in Fife to identify whether they are working in ways most likely to reduce health inequalities. The Checklist forms part of our assessment of Fife’s existing services in Section 5. Another important local reference is Fife’s Health and Social Care Integration Strategic Plan 2016-2019 which contains Food and Health as one of its strategic priorities.

2.38 Fife Council established the Fairer Fife Commission in 2014 to take a strategic overview of the scale, scope and nature of poverty in Fife and the effectiveness of activity undertaken to address poverty. Its report Fairness Matters was published in November 2015 and urged greater ambition, set out 40 policy and practice recommendations, and challenged the Council and its partners to look again at their ways of working. Although the report’s recommendations did not explicitly address food poverty, the Commission heard from people who had faced food poverty, and the report includes examples of their experiences. A Fairer Fife Action Plan has subsequently been developed and in recent months the Fife Partnership Executive Group has agreed to add food insecurity as an additional priority. This will give it added status and profile, and progress in addressing food insecurity will be monitored. The long-term ambition in Fife focuses on sustainable solutions that address the root causes of household food insecurity. This local approach, which mirrors the national approach outlined in the Dignity report, was supported by several consultees during this study.

2.39 Welfare and Poverty Action Groups have been established in Fife’s localities with membership from a range of public and third sector partners. The groups are an important forum for plans to tackle food poverty and food insecurity.

2.40 Fife Community Food Project (FCFP) has existed since 2006. Its two full-time development
workers are based in Fife Council’s Community Learning & Development (CLD) team, and the project is overseen by a steering group of representatives from NHS Fife / Health and Social Care Partnership, Fife Housing Associations, Fife Council Housing and Neighbourhoods Services, CLD and the third sector. The project undertakes a wide range of activities aimed at increasing access to affordable, healthy food amongst those facing household food insecurity. These include affordable healthy eating programmes for low income families, homeless people, unemployed people and those experiencing poor mental health; training and support for staff and volunteers of agencies supporting vulnerable groups, including CLD teams, Children’s Services staff, Fife Gingerbread, Home-Start, Greener Kirkcaldy and others; support to foodbanks across Fife in the form of volunteer induction training and provision of guidance around the use of emergency food aid; and supporting the development of partnerships and locally appropriate responses to food poverty. FCFP also provides training and ongoing support to a network of Community Food Champions – staff and volunteers who work within local communities to promote positive food and health messages, and practical cooking skills. FCFP contributes to the development of local and national policy, and was regarded by some stakeholders as having a unique body of knowledge and expertise in food and household food insecurity issues across Fife. FCFP has in recent years been supported by short-term funding from Fife Health and Wellbeing Alliance and from some of Fife’s Local Area Committees.

2.41 Fife has been shortlisted to be one of three delivery areas for the Menu for Change: Cash, Rights and Food initiative which will be launched in summer 2017. A partnership of Oxfam Scotland, Child Poverty Action Group in Scotland, Nourish and The Poverty Alliance has secured £1million from the Big Lottery Fund to work intensively in three areas and apply the lessons more broadly in the future. Menu for Change will pilot alternative approaches to reduce the need for, and reliance on, emergency food aid. This will involve improving household finances, including by strengthening links to the Scottish Welfare Fund, and promoting alternative, more dignified ways of supporting people experiencing household food insecurity such as access to healthy food through community cafés or food cooperatives.
3 Extent and nature of household food insecurity in Fife

3.1 In this section we examine the extent and nature of household food insecurity in Fife. In particular, we seek to answer three questions: 1) How many people in Fife could be affected by household food insecurity? 2) Where could those affected by household food insecurity live within Fife? 3) Which groups of people in Fife could be affected by household food insecurity?

3.2 The previous section noted that data on household food insecurity in Scotland is limited. We therefore adopted two approaches to answer the above questions. The first used UK data on household food insecurity to estimate the situation in Fife. The second used Fife data on poverty and deprivation as potential indicators of household food insecurity in Fife.

How many people in Fife could be affected by household food insecurity?

3.3 In the absence of household food insecurity data for Scotland, we draw on UK evidence from the Food and You Survey to estimate the number of people who could be affected by the issue in Fife. The survey is the Food Standards Agency flagship consumer survey on a range of food issues including food security. The most recent fieldwork, in 2016, consisted of 3,118 interviews with a representative sample of adults aged 16 and over across England, Wales and Northern Ireland. In Scotland, Food Standards Scotland undertakes biennial survey work with the population - Food in Scotland Consumer Tracking Survey - however it does not contain questions on food security.

3.4 Food security is defined in the Food and You survey as ‘having access at all times to enough food that is both sufficiently varied and culturally appropriate to sustain an active and healthy life’. Household food security is measured by responses to a series of questions about behaviours and experiences associated with difficulty in meeting food needs such as being worried in the last 12 months about running out of food before there was money to buy more, and experiencing not being able to afford to eat balanced meals in the last 12 months. Responses are allocated a score and households are categorised as follows:

- High food security – Households had no problems, or anxiety about, consistently accessing adequate food.
- Marginal food security – Households had problems at times, or anxiety about, accessing adequate food, but the quality, variety, and quantity of their food intake were not substantially reduced.
- Low food security – Households reduced the quality, variety, and desirability of their diets, but the quantity of food intake and normal eating patterns were not substantially disrupted.
- Very low food security – At times during the year, eating patterns of one or more household members were disrupted and food intake reduced because the household lacked money and other resources for food.

3.5 The 2016 survey found that 8% of respondents lived in low or very low food secure households (food insecure) while a significant majority lived in highly food secure households.
3.6 Assuming the survey findings would be replicated in Fife, we estimate that 24,300 adults aged 16 and over in Fife could live in low or very low food secure households i.e. 8% of the adult population in Fife\textsuperscript{11}. We are aware this assumption is a simple one which could be challenged on the grounds that Fife may not reflect the situation found elsewhere. However, the Food and You Survey is the most robust data presently available on food security in the UK and our estimate provides an indication of the prevalence of food insecurity in Fife.

3.7 The Dignity report quotes findings from a United Nations’ Food and Agriculture Organisation study that measured household food insecurity across 140 countries including the UK. The UK survey interviewed 1,000 people aged 15 or over and found that 10.1% were moderately food insecure in 2014 meaning they reported experiencing a struggle to get enough food to eat and 4.5% experienced a severe level of food insecurity, typically having gone a whole day without eating at times during the year because they could not afford enough food. The Dignity report noted that situation in Scotland is likely to be similar to that in the UK although the sample size did not allow for a Scottish figure to be reported. Assuming the survey findings would be replicated in Fife (subject to the caveats noted above) we estimate that 31,100 adults aged 15 and over in Fife could be moderately food insecure and 13,800 could experience a severe level of food insecurity.

3.8 The third and final evidence source we highlight to inform debate on the number of people in Fife who could be affected by household food insecurity is Scottish Index of Multiple Deprivation (SIMD). This data uses administrative data for Fife and is therefore more robust statistically than the UK level survey data although it does not directly measure food insecurity. We noted in Section 2 that household food insecurity had been linked to a number of income-related issues with NHS Health Scotland’s Position Statement on Food Poverty stating ‘food poverty is primarily driven by income deprivation’. The SIMD income deprivation domain shows that 12% of Fife’s total population (adults and children) or 45,400

\textsuperscript{11} Mid 2015 population estimates produced by National Statistics Scotland.
people were income deprived. It would be inaccurate to conclude that all income deprived people experienced household food insecurity or the reverse that all people facing household food insecurity were income deprived (as it is a measure of the number of people in receipt of certain benefits and tax credits\textsuperscript{12}) however the figure of 45,400 adults and children is a further indication of the level of household food insecurity in Fife.

3.9 The three datasets highlighted above use different measures and apply to different age ranges and are not therefore directly comparable. Nonetheless they should provide policy makers in Fife with an indication of the prevalence of household food insecurity. To recap the figures are:

- An estimated 24,300 adults aged 16 and over in Fife could live in low or very low food secure households.
- An estimated 31,100 adults aged 15 and over in Fife could be moderately food insecure and 13,800 could experience a severe level of food insecurity.
- Approximately 45,400 people (adults and children) in Fife are income deprived.

3.10 Of the three figures, the first is the most robust given the greater sample size of the survey (compared to the second figure) and its direct focus on household food insecurity (compared to the third figure). We therefore recommend that the first figure is used as an indicator of the extent of household food insecurity in Fife.

Where do those people most affected by household food insecurity live within Fife?

3.11 Neither of the UK surveys highlighted above could be mapped at a local level with any degree of certainty. On the other hand, the SIMD income data is available at the local level (data zone)\textsuperscript{13} which we have used to provide an indication of the distribution of household food insecurity across Fife.

3.12 Figure 3 shows the relative level of income deprivation in Fife – the shading shows whether the proportion of income deprived people in each area (data zone) is in the worst 20% of areas in Scotland, or subsequent quintiles 20-40%, 40-60%, 60-80%, or 80-100% (the least income deprived areas in Scotland). The map shows that Fife has a relatively normal distribution of income deprivation with broadly equal numbers of data zones in each quintile. Approximately a fifth of Fife’s data zones are ranked in the worst 20% of areas in Scotland.

\textsuperscript{12} Income deprivation includes: Income Support and Income-based Employment Support Allowance claimants (16-59), Job Seekers Allowance and Guaranteed Pension Credit Claimants (All ages), Universal Credit claimants with no employment marker, Number of children in JSA, IS or ESA households, Number of Adults and children dependent on adults in receipt of tax credits. For further details see: SIMD 2016 Technical Notes.

\textsuperscript{13} SIMD is available at the data zone level of which there are 6,976 in Scotland and 494 in Fife.
3.13 The Fife areas shown in the following table are among the most income deprived areas in the whole of Scotland i.e. in the worst 5% of areas. In these areas, at least a third of the total population are income deprived rising to 45% in Buckhaven.

Table 1 – Fife areas ranked among the most income deprived data zones in Scotland

<table>
<thead>
<tr>
<th>Local area</th>
<th>Rank in Scotland (out of 6,976)</th>
<th>Percentage of the population who are income deprived</th>
</tr>
</thead>
<tbody>
<tr>
<td>Buckhaven South</td>
<td>22</td>
<td>45%</td>
</tr>
<tr>
<td>Gallatown West</td>
<td>48</td>
<td>43%</td>
</tr>
<tr>
<td>Sinclair town Central</td>
<td>60</td>
<td>42%</td>
</tr>
<tr>
<td>Methil Kirkland</td>
<td>97</td>
<td>40%</td>
</tr>
<tr>
<td>Methil Memorial Park</td>
<td>143</td>
<td>37%</td>
</tr>
<tr>
<td>Methil Trees East</td>
<td>166</td>
<td>37%</td>
</tr>
<tr>
<td>Methil Savoy</td>
<td>184</td>
<td>36%</td>
</tr>
<tr>
<td>Ballingry West</td>
<td>234</td>
<td>34%</td>
</tr>
<tr>
<td>Linktown East</td>
<td>238</td>
<td>34%</td>
</tr>
<tr>
<td>Aberhill</td>
<td>267</td>
<td>33%</td>
</tr>
<tr>
<td>Burntisland West</td>
<td>309</td>
<td>33%</td>
</tr>
<tr>
<td>Dunfermline Headwell</td>
<td>313</td>
<td>33%</td>
</tr>
<tr>
<td>Kirkcaldy Hayfield and Smeaton</td>
<td>335</td>
<td>32%</td>
</tr>
<tr>
<td>Glenrothes Auchmuty</td>
<td>337</td>
<td>32%</td>
</tr>
</tbody>
</table>

3.14 SIMD data, even when presented at the data zone level, masks income deprivation in areas where there are relatively few income deprived individuals. It is therefore important to note that people with low incomes do not all live in the most income deprived areas of Fife. Equally, not everyone living in the areas noted above will be income deprived.

3.15 Access to low cost affordable food was identified in Section 2 as another potential factor in household food insecurity. SIMD includes an access domain which seeks to measure the local
population’s access to a number of key services/facilities including a retail centre (as well as a petrol station, GP surgery, post office, primary school, and secondary school).

3.16 Figure 4 shows that parts of Fife suffer from relatively poor access to services including a retail centre. The distribution is markedly different to the income deprivation data and this is a useful reminder that those experiencing food insecurity in Fife will not all reside in the most income deprived areas. Income deprived people living in areas with poor access will face a compound risk of food insecurity.

**Figure 4 – Access to Services Deprivation in Fife**

3.17 The following areas of Fife are ranked in the worst 5% of data zones in Scotland in terms of access to services.

<table>
<thead>
<tr>
<th>Local area</th>
<th>Rank in Scotland (out of 6,976)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Balmullo and Gauldry</td>
<td>133</td>
</tr>
<tr>
<td>Newburgh</td>
<td>160</td>
</tr>
<tr>
<td>Crail and Boarhills</td>
<td>186</td>
</tr>
<tr>
<td>Elie Colinsburgh and Largoward</td>
<td>240</td>
</tr>
<tr>
<td>Dairsie Ceres and Dunino</td>
<td>244</td>
</tr>
<tr>
<td>Largo</td>
<td>269</td>
</tr>
<tr>
<td>Saline and Gowkhall</td>
<td>299</td>
</tr>
</tbody>
</table>

3.18 Examining the SIMD access data further identifies that residents of the following Fife areas have an estimated public transport travel time of 30 to 45 minutes to access a retail centre. Some residents of these areas could potentially experience access-related food insecurity:

- Newburgh
- Valleyfield
- Culross
- Torryburn
Which groups of people in Fife could be affected by household food insecurity?

3.19 Relevant literature identifies a wide range of groups of people who experience, or are at greatest risk of, household food insecurity. The following list draws in particular on three studies: the Food and You Survey, Nature and Extent of Food Poverty in Scotland and Understanding Food in the Context of Poverty, Economic Insecurity and Social Exclusion:

- Women and mothers
- Families with young children
- Lone parents
- Young people
- Young carers
- Benefit claimants
- Low income
- Unemployed
- Homeless
- Single people
- Older people
- People with mental health issues
- Long term sick and disabled
- People with underlying medical conditions that result in special dietary requirements
- Refugees and asylum seekers
- Travellers and Gypsies.

3.20 The above could generally be regarded as vulnerable or disadvantaged groups who experience, or are at greatest risk of, poverty and/or health inequalities (see for example Fairer Health for Fife). The identification of such a wide range of people who could be affected by household food insecurity is useful in two ways. Firstly, for organisations working specifically with any of the above groups it shows that household food insecurity is an issue that could affect their service users and appropriate advice and support should be considered. Secondly, for services seeking to address household food insecurity it shows that need is widespread and service users could be experiencing a range of circumstances or issues – this could be particularly useful in terms of appropriate training for staff/volunteers and for promoting the service to potential users.

3.21 Much of the literature on who is affected by household food insecurity in the UK is qualitative and reflects views about those most at risk. The limited existence of quantitative evidence was highlighted in the Nature and Extent study and this is reflected in the authors' recommendations to improve data collection in Scotland (covering food quality, quantity, supply, meal frequency, safety and social acceptability) including for those considered at risk and disadvantaged. The recent Food and You Survey did provide some useful quantitative evidence which is summarised below:
- Women were more likely to live in food insecure households than men (10% compared with 6%).
- 16% of those aged 16 to 24, and 11% of those aged 25 to 34 lived in food insecure households compared with 1 to 2% of those aged 65 and over.
- A quarter (23%) of those in the lowest income quartile lived in food insecure households compared with 3% in the highest quartile.
- 35% of respondents who were unemployed and 18% with an ‘other’ working status lived in food insecure households compared with 7% of those in work and 2% of those who had retired.

3.22 Existing evidence is also limited on the frequency or intensity of household food insecurity experienced by people in general or the specific groups identified above. As we noted in Section 2, experience of household food insecurity can be variable in the sense that it can be dynamic, can exist in mild, moderate or severe forms, and can be a chronic and/or acute experience. The Nature and Extent study did report that ‘groups known to be affected by household food insecurity in the years prior to the recession (i.e. destitute, homeless, people with mental health problems) were reportedly increasing in number, seeking help more frequently, and for longer periods of time compared to the past’.

3.23 This research has not considered child food insecurity in detail and there is a need to do so in Fife. The most recent UNICEF Global Report Card 14 estimates that 20% of children are food insecure in the UK - 10% of those are living in households affected by severe food insecurity. Food insecurity in childhood has been linked to poor educational and developmental outcomes, increased incidence of mental health conditions in adolescence and early adulthood, and to obesity. Holiday hunger initiatives may well play a limited role in addressing this issue, but monitoring of any such initiatives is required to determine their effectiveness. Evidence from Canada suggests that poverty alleviation measures have the greatest impact on household food insecurity prevalence.
4 Mapping existing service provision in Fife

4.1 This section maps existing services in Fife that seek to address household food insecurity. It focuses on services with a specific remit of addressing the issue and therefore excludes broader anti-poverty services in Fife, of which there are many. The mapping draws on information supplied by services, stakeholders and online research. The views of local people with direct experience of household food insecurity regarding existing services is also presented.

Overview

4.2 A wide range of services seek to address household food insecurity, from those that provide immediate support to people suffering from a shortage of food, to services that aim to tackle the underlying causes. Our mapping of these services in Fife focused on the following:
- Provision of food parcels including foodbanks.
- Provision of cooked/prepared food including community cafés.
- Community growing projects.
- Advice on food issues.
- Practical cooking classes
- Low cost food.

Provision of food parcels including foodbanks

4.3 This category covers services where the main assistance is the provision of food supplies to eat or cook at home for those experiencing household food insecurity. It includes foodbanks and other organisations that provide emergency food parcels.

4.4 Foodbanks are the main service providers in this category and, as illustrated in Section 2, their use in Scotland has increased significantly in recent years. Downing and Kennedy, 2014 define foodbanks as services that ‘provide food aid to people in acute need, often following referral and the provision of a voucher by a health or social care professional, or other agency’. In addition to foodbanks, some organisations provide food parcels as part of their broader operations. This tends to occur in emergency situations or the provision of food parcels to those in need at Christmas.

Foodbank provision

4.5 There are eight foodbanks in Fife operating in 14 settlements. The services are spread across Fife serving the three main towns of Dunfermline, Kirkcaldy, and Glenrothes, smaller settlements such as Levenmouth, Rosyth and Cupar, and the more rural areas in the south west, north and East Neuk of Fife.

4.6 Four of the services in Dunfermline, Cupar, Glenrothes and Levenmouth are affiliated to the Trussell Trust, a national third sector organisation that operates over 420 foodbanks across the UK. The Dunfermline Foodbank operates four satellite foodbanks in Benarty, Rosyth, Cowdenbeath and Inverkeithing to serve the surrounding population. Of the other four foodbanks, Kirkcaldy is an independent registered charity while the St. Andrews, Taybridgehead, and East Neuk services are provided by local churches.

4.7 As illustrated in the table below, opening days and times vary considerably from Kirkcaldy Foodbank which has two outlets open Monday to Friday for at least six hours a day, to Levenmouth and St. Andrews Foodbanks which are open on two days per week for two
hours at a time. Kirkcaldy Foodbank has the greatest number of distribution points with six separate outlets in the town included some co-located within partner organisations such as Link Living and St Bryce Kirk. Collectively the six Kirkcaldy outlets are open for a total of 89.5 hours per week; in part this reflects the presence of some of the outlets within other organisations, and their opening hours.

<table>
<thead>
<tr>
<th>Table 3 – Providers and opening times of foodbanks in Fife</th>
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<tr>
<td><strong>Foodbank</strong></td>
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<td>Kirkcaldy Foodbank</td>
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<td>Glenrothes Foodbank</td>
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<td>Levenmouth Foodbank</td>
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<tr>
<td>Cuper Foodbank</td>
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<td>East Neuk Foodbank</td>
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<td>Taybridgehead Foodbank</td>
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<tr>
<td>St. Andrews Foodbank (The Storehouse)</td>
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4.8 The foodbanks tend to operate using a referral process although some flexibility is shown for those in need. Users of the Trussell Trust foodbanks must have a voucher issued by one of the designated partner agencies such as Citizens Advice and Rights Fife (CARF), Fife Council (Scottish Welfare Fund, and Social Work), NHS Fife (Health Visitors and District Nurses) and Jobcentre Plus. Individuals are limited to three vouchers every six months unless there are exceptional circumstances. Kirkcaldy, Taybridgehead, St. Andrews and East Neuk Foodbanks also operate referral systems although they appear to be applied flexibly and self-referrals are also possible. Taybridgehead Foodbank initially provide parcels to people.
in need on a monthly basis, this is reviewed with the person to reflect their ongoing need and the frequency of food parcels can be reduced or ended when circumstances improve.

4.9 The foodbanks generally source food supplies from local collection points such as shops, supermarkets, schools, churches, community centres and cafés. Dunfermline Foodbank has a separate building to store its food supplies from where food is distributed to the satellite foodbanks in the surrounding towns. In Kirkcaldy, food parcels are delivered to the distribution points in the town by the Community Payback team. Food supplies are intended to cover emergency situations with supplies to last a minimum of three days. The parcels consist of non-perishable items as foodbanks tend not to have refrigerated storage facilities. A typical food parcel contains UHT milk, pasta or rice, canned meat, canned soup, canned vegetables, canned fruit, biscuits, cereal and tea bags/coffee. The Trussell Trust has a prescribed list of food items which was developed with a nutritionist and is reviewed annually, and Kirkcaldy Foodbank received nutritional advice from Fife Community Food Project (although as noted earlier the content of any foodbank’s emergency parcels are dictated by the quality of the food that is donated). In Glenrothes Foodbank, service users are taken around the main storage facility and have some choice in the content of their food parcel. The other foodbanks usually distribute pre-packed parcels however staff/volunteers tend to go through the contents with the person who can say if there is something inappropriate or unsuitable due to dietary requirements, medical or other reasons. Most foodbanks also take cash donations which can help be used to purchase additional food supplies and most such as the Trussell Trust services and Taybridgehead provide other necessities such as toiletries, household items and baby essentials if required. Wormit Parish Church buy fresh bread and milk every week to supplement the parcels at Taybridgehead Foodbank. Three of the foodbanks – Glenrothes, Levenmouth and Taybridgehead - are supplied by FareShare which is a national third sector organisation that supplies food otherwise destined for waste to organisations supporting people in need; for example, Taybridgehead Foodbank receives 10 boxes of food per week from FareShare.

Additional foodbank services

4.10 Foodbanks vary in terms of the additional services provided alongside emergency food parcels. As an organisation the Trussell Trust describe their approach as “More Than Food” and their foodbanks aim to provide advice and support to those in need.

4.11 Glenrothes Foodbank is based in a large multi-purpose building (Caledonia House) from where a range of additional services are provided: a community café serving free healthy food, access to free fruit and vegetables, a clothing and shoe bank, a room with children’s toys, a play area, small meeting rooms for individuals and families wanting to speak to a worker in private, signposting to a variety of other agencies and services including CARF and Scottish Welfare Fund, and help with grant applications. Fife Council’s Scottish Welfare Fund Team previously attended the foodbank once a week to deliver outreach support and the Trussell Trust reported this led to a significant decrease in the use of the foodbank in subsequent months as people were accessing support from the Fund rather than emergency food aid. Cosy Kingdom - a partnership between Greener Kirkcaldy, St Andrews Environmental Network and CARF - has also attended in the past to support people

14 Community Payback Orders are a sentence passed on offenders to undertake between 40 and 300 hours of unpaid work in the community.
experiencing fuel poverty as well as household food insecurity.

4.12 Levenmouth Foodbank is working in partnership with other organisations to provide additional services from its base at Methil Evangelical Church. These include a partnership with Fife Gingerbread and Homestart to provide meals for families of school children one day a week during school holidays, a community café (Café Connect) providing hot and cold food on Tuesdays between 10 and 12, and work with local schools on budgeting and citizenship. Service users have access to Wi-Fi connected laptops and volunteers signpost users to other providers where possible. In addition, Levenmouth Foodbank is progressing plans to work with Community Money Advice Scotland to provide a debt advice service and examining cooking classes for service users. Fife Council’s Scottish Welfare Fund Team previously attended the foodbank once a week to deliver outreach support.

4.13 East Neuk Foodbank provides service users with access to Wi-Fi connected laptops from its base in Anstruther Church and signpost users to other agencies. The foodbank also hold occasional Cooking on a Budget classes and recently started up a community café (Open to All). The café primarily aims to combat social isolation however it also aims to counter the stigma associated with accessing the foodbank. ENeRG previously provided benefit advice clinics.

4.14 Dunfermline Foodbank has plans to deliver a three-month pilot project in 2017 in partnership with the Scottish Welfare Fund and Christians Against Poverty. Welfare and advice workers will attend the foodbank every Wednesday for two hours allowing people experiencing household food insecurity to access advice and support for other issues i.e. the underlying causes of their situation. Dunfermline Foodbank is also in discussions with Fife Community Food Project regarding use of a kitchen space.

4.15 Cupar Foodbank work in partnership with Caring for Cupar to signpost service users in need of clothing. Taybridgehead Foodbank signposts service users in need of financial advice and is located in Wormit Church which also operates a community café.

Service users

4.16 All of Fife’s foodbanks record service user information although the actual details and processes vary considerably. The Trussell Trust foodbanks utilise the organisation’s existing monitoring systems. Client cards gather each service user’s name, age, address, presenting issue and number of visits, and information is regularly updated onto a database. The other foodbanks have different processes although they tend to gather similar information on service users including name, contact details, age, and number of visits. Some services such as East Neuk Foodbank also gather information on employment/benefit status, and number and age of children living in the household. Despite these processes being in place, in practice three of the eight foodbanks were unable to provide any breakdown of their service users as part of this mapping exercise and the depth of the data varied for those that did supply information.

4.17 Service use data has been gathered for Fife’s foodbanks from various sources and is shown below. The gaps in the table demonstrate the different ways that information is gathered and presented by foodbanks.

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15 Five foodbanks either completed the pro-forma or forwarded relevant documents. Information for the other three foodbanks was sourced online.
Table 4 – Service use data reported by foodbanks in Fife

<table>
<thead>
<tr>
<th>Foodbank</th>
<th>Food parcels supplied¹</th>
<th>Individuals²</th>
<th>Adults and children in the household benefitting from each parcel³</th>
<th>Year</th>
</tr>
</thead>
<tbody>
<tr>
<td>Kirkcaldy</td>
<td>4,801</td>
<td>8,696</td>
<td></td>
<td>2016</td>
</tr>
<tr>
<td>Glenrothes</td>
<td>1,433</td>
<td>2,777</td>
<td></td>
<td>2016/17</td>
</tr>
<tr>
<td>Levenmouth</td>
<td>1,436</td>
<td>2,437</td>
<td></td>
<td>2016</td>
</tr>
<tr>
<td>Dunfermline</td>
<td>1,952</td>
<td></td>
<td></td>
<td>2015/16</td>
</tr>
<tr>
<td>Cupar</td>
<td>715</td>
<td>1,446</td>
<td></td>
<td>2015/16</td>
</tr>
<tr>
<td>East Neuk</td>
<td>913</td>
<td>259</td>
<td></td>
<td>2016</td>
</tr>
<tr>
<td>Taybridgehead</td>
<td>742</td>
<td></td>
<td></td>
<td>Jan-Jun 16</td>
</tr>
<tr>
<td>St. Andrews</td>
<td>56</td>
<td></td>
<td></td>
<td>2016</td>
</tr>
</tbody>
</table>

¹ ‘Food parcels supplied’ is the number of times the foodbank handed out parcels of food. If a person uses the foodbank more than once, each visit would be recorded separately. A parcel may contain one or more bags of food.

² ‘Individuals’ is the number of people, or unique users, accessing the service.

³ ‘Adults and children in the household benefitting from each parcel’ is the number of people in the household who may consume the contents of the food parcel. For example, if a person receives a parcel and their household consists of two adults and three children, this would be recorded as 5 people benefitting. If a person uses the foodbank more than once, the number of people in the household would be recorded each time.

4.18 The above illustrates that service user information produced by foodbanks is not comparable without further analysis. Using the ratio of the total number of food parcels supplied to the total number of adults and children in the households benefitting from each parcel, where both figures were provided, we estimated the missing data where only one of the figures was provided. Using these simple ratios, we estimate that Fife’s eight foodbanks provided approximately 12,100 food parcels with 22,300 adults and children benefitting from these parcels in 2016. A breakdown of the estimates per foodbank is shown in Table 5 below. The estimates should be treated with caution because the methods used are relatively simple and the records for all of Fife’s foodbanks involve some double counting as repeat users are counted each time they receive a food parcel.

Table 5 – Estimated number of food parcels and beneficiaries of foodbanks in Fife

<table>
<thead>
<tr>
<th>Foodbank</th>
<th>Food parcels</th>
<th>Adults and children in the household benefitting from each parcel</th>
</tr>
</thead>
<tbody>
<tr>
<td>Kirkcaldy</td>
<td>4,801</td>
<td>8,696</td>
</tr>
<tr>
<td>Glenrothes</td>
<td>1,433</td>
<td>2,777</td>
</tr>
<tr>
<td>Levenmouth</td>
<td>1,436</td>
<td>2,437</td>
</tr>
<tr>
<td>Dunfermline</td>
<td>1,952</td>
<td>3,598*</td>
</tr>
<tr>
<td>Cupar</td>
<td>715</td>
<td>1,446</td>
</tr>
<tr>
<td>East Neuk</td>
<td>913</td>
<td>1,683*</td>
</tr>
<tr>
<td>Taybridgehead</td>
<td>805*</td>
<td>1,484*</td>
</tr>
<tr>
<td>St. Andrews</td>
<td>56</td>
<td>103*</td>
</tr>
<tr>
<td>TOTAL</td>
<td>12,111*</td>
<td>22,324*</td>
</tr>
</tbody>
</table>

* Denotes estimated figure

4.19 The reported number of adults and children benefitting from the parcels at Kirkcaldy Foodbank is significantly higher than the other foodbanks. The population of Kirkcaldy is similar to that of Dunfermline – where the number of adults and children benefitting from
the parcels was significantly lower - although income deprivation was shown in Section 3 to be a greater issue in Kirkcaldy than Dunfermline and demand for emergency food aid is therefore likely to be higher. While need is undoubtedly a factor, we suggest there may be two other relevant issues. Firstly, Kirkcaldy Foodbank has six outlets in the town, extended opening times and applies its eligibility criteria flexibly and it is possible that this accessible approach is reflected in the number of beneficiaries. Secondly, double counting is likely to be higher for Kirkcaldy Foodbank because their accessible approach leads to a greater number of repeat service users compared to other foodbanks that tend to limit the number of times per year an individual can receive emergency food aid. As a result, the number of unique individuals benefitting from Kirkcaldy Foodbank is likely to be lower than the overall figure shown above. While this is true also of the other foodbanks, the disparity between the figures is likely to be greater in Kirkcaldy because of the greater number of repeat users.

4.20 Demand for emergency food supplies fluctuates throughout the year. One consultee stated that demand at Dunfermline Foodbank increases during school holidays. Kirkcaldy Foodbank was the only provider to supply monthly figures which showed the number of food parcels supplied per month during 2016 varied from 263 in January to 555 in August. However, Kirkcaldy Foodbank’s monthly figures for 2015 show a different pattern with a low of 163 in May to a high of 318 in October. All months with the exception of January showed a significant increase in 2016 compared to 2015.

4.21 When asked for their views on future demand, all the foodbanks that responded expect demand to increase. The introduction of Universal Credit and other welfare changes were identified as potential drivers of this increasing demand.

“Although our demand has dropped the last two years we expect it to pick up again with the introduction of Universal Credit”.

“Need is getting higher and situations more complex. We are passing many people to Citizens Advice”.

“25% more (food parcels supplied) since last year, and year by year it is increasing. The situation around people’s lives haven’t changed much”.

4.22 Service user experiences of foodbanks were varied, reflecting the diversity of organisations that deliver food parcels. Overall people reported how they used the services out of necessity. Several spoke about how the process was embarrassing referring in particular to foodbanks with a formal referral system in place as it involves two steps, one, to get the voucher, and two, to get the emergency food supplies. The variety and choice of food within the parcels was considered satisfactory and “good enough to help” although there were several comments that the content was not what they would otherwise buy or eat. Most people felt they could have some input into the content of their parcel and were able to express preferences, to a degree, in terms of what they chose not to or could not eat. However, some people who had received food parcels from some foodbanks felt that there was limited variety and that they did not have the opportunity to discuss the content of their parcel; as a result, they had left some of the contents outside the pick-up point. Generally, service users reported how they struggled to make meals of the contents which were mostly tinned non-perishable food items. Some people felt that staff at some foodbanks had limited empathy with their situation and needs.

“If you don’t like something then you can’t swap”.
“Variety is good here...can exchange if you don’t like something”.
“A bag is supposed to last 3-4 days. Sometimes it does and sometimes it doesn’t. You’ve got to make it work”.

Service user involvement

4.23 The majority of foodbanks across Scotland rely heavily on volunteers to deliver their services with tasks ranging from collecting food donations to making up and handing out food parcels. Four foodbanks in Fife provided information on service user involvement and three confirmed that service users or former service users were involved in delivering services as volunteers (Glenrothes, Levenmouth and East Neuk).

4.24 Only one of the foodbanks (Levenmouth) reported that their service users, or former service users, are involved in decisions about how the organisation works for example as members of the board, steering groups, or working groups. In Levenmouth two service users are members of the Working Group Committee.

Staff and volunteers

4.25 Fife’s foodbanks reported a reliance on volunteers to deliver their services. Although the information provided was incomplete it is known that over 450 volunteers are involved in service delivery with only one full-time member of staff (at Dunfermline Foodbank) and seven part-time workers. The Kirkcaldy and Taybridgehead services have no employees and are entirely reliant on volunteers (although food parcels are distributed by Kirkcaldy Foodbank’s partner agencies at four of the six outlets). The scale of voluntary input is also evident, for example, Glenrothes Foodbank has approximately 10 to 12 volunteers at the centre per day providing around 100 hours of help and support weekly. Collectively, Fife’s foodbanks provide a range of training for volunteers either in-house in the case of the Trussell Trust or by accessing training providers such as Fife Voluntary Action (FVA).

<table>
<thead>
<tr>
<th>Foodbank</th>
<th>Staff</th>
<th>Volunteer numbers (approx.)</th>
<th>Volunteer information</th>
</tr>
</thead>
<tbody>
<tr>
<td>Kirkcaldy</td>
<td>0</td>
<td>75</td>
<td>A pool of volunteers support the foodbank with the aggregation of food donations from all local food collection points, the sorting and categorizing of the food items, and the re-distribution of the parcels to the St Bryce and Linton Lane outlets.</td>
</tr>
<tr>
<td>Glenrothes</td>
<td>1 part-time</td>
<td>60</td>
<td>There are approximately 10-12 volunteers at the centre a day providing around 100 hours of help and support weekly. Volunteers have access to FVA and NHS courses and Trussell Trust training. Glenrothes foodbank has plans hope to become an accredited Scottish Qualifications Authority centre this year to offer vocational qualification opportunities for its younger volunteers.</td>
</tr>
<tr>
<td>Levenmouth</td>
<td>2 part-time</td>
<td>40</td>
<td>The volunteers collectively provide 130 hours per week. Volunteers receive food hygiene training, basic first aid, Trussell Trust Foodbank related training, agency awareness courses and some training on fuel poverty issues.</td>
</tr>
</tbody>
</table>
### Dunfermline inc. satellites

- **1 full-time**
- **Over 200**
- Volunteers receive Trussell Trust induction training which includes an introduction to paperwork, vouchers, safeguarding, health and hygiene.

### Cupar

- **1 part-time**
- **40**
- Each volunteer tends to do one shift per week which lasts 2 hours. Volunteers receive Trussell Trust induction training.

### East Neuk

- **1 part-time**
- **10**
- The volunteers collectively provide around 35 hours per week. Staff and volunteers have access to occasional training, staff briefings and updates to develop their skills and knowledge.

### Taybridgehead

- **1 part-time**
- **2 managers plus unknown others**
- Volunteers receive training on confidentiality and data protection as well as induction training on the foodbank’s procedures.

### St. Andrews

- **1 part-time**
- **20**
- Volunteers receive induction training and collectively provide 16 hours of support a week.

## Funding and sustainability

### 4.26 Funding information on the foodbanks was limited. It was evident however that foodbanks did not have significant budgets or receive significant amounts of external funding – this largely reflects the way foodbanks have evolved with a significant reliance on volunteers to deliver services. Where external funding was secured it tended to be relatively small amounts from charitable trusts and Fife Council rather than significant grants which can be evident in third sector organisations operating in other spheres. Cash donations were also an important source of income which foodbanks used to supplement their supplies. For example, Levenmouth Foodbank had a budget of £20,000 for 2016/17 which was met by grants from Fife Council, donations and charitable trusts.

### 4.27 Since 2013, the principles followed by Fife Council’s Local Area Committees have been that any funding given to foodbanks should be non-recurring and not for food, for example, for volunteer expenses or start-up costs. For example, Levenmouth Area Committee over recent years has given sums of between £3,000 and £8,000 towards administrative / start-up costs and the costs of a distribution van. The Council’s approach reflects the policy view that, while an important short-term response, foodbanks should not become a permanent or formal part of the welfare system.

### 4.28 As a consequence of the volunteer-led delivery model and the limited reliance on external funding, some foodbanks were quite confident about the financial sustainability of the organisations. However, others expressed concern about their sustainability citing challenges maintaining volunteer numbers, fund raising, and increasing demand as key factors.

## Other food parcel providers

### 4.29 In addition to the foodbanks discussed above, the mapping exercise identified seven other providers of food parcels that complements their other services. The parcels are handed out in emergency situations or at Christmas to those in need. These services are shown below although this is unlikely to be a comprehensive list of non-foodbanks that provide emergency food parcels in Fife:

- Barnardo’s Child and Family Support Services, Kirkcaldy.
- Destiny Church, Dunfermline.
- Cottage Family Centre, Kirkcaldy.
- ENeRGI, St Monans.
- Frontline Fife through its Home4Good centres in Fife, Dunfermline, Cupar, Leven and Kirkcaldy.
- Salvation Army in Cowdenbeath, Dunfermline and Glenrothes.
- Bethany Christian Trust in Dunfermline and Levenmouth.
- Levenmouth Rotary Club.

4.30 These services do generally maintain records of the number of food parcels supplied. The majority state that they supply food parcels occasionally. We are aware however that Cottage Family Centre in Kirkcaldy provided over 360 parcels during Christmas 2016. Beneficiaries tend to be those most in need, particularly the homeless. As such eligibility is more flexible than most foodbanks with most other food parcel providers accepting self-referrals or those signposted by other services.

“We don’t have hard and fast rules on eligibility but try and give out in severe cases of hardship”.

**Provision of cooked/prepared food including community cafés**

**Community cafés**

4.31 Community cafés were defined in *Making the connections: A study of emergency food aid in Scotland* as ‘services providing free or low-cost food in a community setting, often focused on healthy eating – clients may or may not be experiencing food poverty’. This is a particularly useful definition for this Fife study because it highlights that although food is free or low-cost (and therefore excludes purely commercial cafés) not all community café users may be experiencing household food insecurity with social interaction the primary purpose of some cafés.

4.32 The mapping exercise sought to identify community cafés in Fife where alleviating household food insecurity was a significant part of the cafés’ purpose although this was not a straightforward task. In total 22 community cafés were identified in Fife operated by 18 organisations however the actual number may be greater. The 22 community cafés summarised below provide hot and cold meals where customers may not have to pay at all, may be asked to pay what they can afford, or may be charged a relatively small amount such as £2.50 for a three-course meal at Bite ‘n’ Blether café in Kirkcaldy. Eleven of the community cafés in Fife are provided by local churches, six are operated by third sector organisations (Salvation Army, Bethany Christian Trust, and YMCA), and two are run by community groups. While some of the food is purchased, the community cafés also take food donations and some such as Cupar Lighthouse and YMCA Kirkcaldy are supplied by FareShare. Generally, community cafés seek to signpost customers to other services such as advice providers and foodbanks and four of the cafés are co-located with foodbanks in Glenrothes, Methil, Anstruther and Wormit.

4.33 As shown in the table below, the community cafés are concentrated in the towns of Glenrothes, Kirkcaldy, Dunfermline, Levenmouth, Cupar and Cowdenbeath. Although there

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16 Frontline Fife is a registered charity providing housing advice and support to people to help them to sustain their home and prevent homelessness. In partnership with Fife Council, they manage the four Home4Good centres which act as hubs for people who need help or advice with their housing and related issues. People visiting the centres are able to access other services provided by Frontline Fife.
are community cafés in Oakley, Kenneway, Anstruther, Methil and Wormit they are exceptions in terms of smaller settlements in Fife. Opening days and times vary considerably from Cupar Lighthouse which is open 9 to 5 six days a week to others which only serve customers for two hours a week. One community café – the Grapevine Café at St Columba’s Parish Church in Glenrothes - reported that it also provided a free meal on Christmas Day which attracted 28 people through awareness raising at the town’s YMCA and foodbank.

<table>
<thead>
<tr>
<th>Table 7 – Providers and opening times of community cafés in Fife</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Organisation</strong></td>
</tr>
<tr>
<td>------------------</td>
</tr>
<tr>
<td>St Columba’s Parish Church</td>
</tr>
<tr>
<td>Glenrothes Foodbank</td>
</tr>
<tr>
<td>St Ninian’s Parish Church</td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td>Salvation Army</td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td>Bethany Christian Trust</td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td>Whyte’s Causeway Baptist Church</td>
</tr>
<tr>
<td>Bennochy Parish Church</td>
</tr>
<tr>
<td>Kirkcaldy Free Church</td>
</tr>
<tr>
<td>Linktown Church</td>
</tr>
<tr>
<td>YMCA Kirkcaldy</td>
</tr>
<tr>
<td>Old Parish Church</td>
</tr>
<tr>
<td>Cumbernauld Community Centre</td>
</tr>
<tr>
<td>Oakley Community Centre</td>
</tr>
<tr>
<td>St Kenneth’s Parish Church</td>
</tr>
<tr>
<td>Wormit Parish Church</td>
</tr>
<tr>
<td>Methil Evangelical Church</td>
</tr>
<tr>
<td>Anstruther Church</td>
</tr>
</tbody>
</table>

Information on the number of service users was very limited with only a handful of responses. Where information was forthcoming, the number of café users was relatively small, however taking into consideration the limited opening hours helps to demonstrate the value of the cafés. For example, Oakley community café attracts 15 to 20 regular customers every week in the one and a half hours it is open, and Whyte’s Causeway Baptist Church in Kirkcaldy reported that their CAP café attracts approximately 50 people per week (including about 20 homeless people and three families that attend weekly) during the two and half hours it is open. Of the five community cafés that responded to this question,

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17 Christians Against Poverty.
three felt that demand for their services is likely to increase in the future and two felt that it would stay the same.

“Increased pressure on people’s budgets through job insecurity, introduction of Universal Credit (already meaning people have no money for six weeks and therefore causing extreme poverty and major issues), general social policy thrust of punishing the poor”.

“Not seeing a reduction and government policy isn’t clear if it is doing anything or not”.

4.35 From the limited information provided by community cafés, it is apparent they rely heavily on volunteers to provide their services. Five community cafés provided information: 38 volunteers were involved in operating these cafés in addition to two full-time and five part-time members of staff. Information on training was also limited, where it was reported it mainly involved Fife Community Food Project’s Food Champion training / REHIS food hygiene training. Oakley and Kirkcaldy YMCA reported that service users or former service users were involved in delivering the service and in Kirkcaldy YMCA’s case they were also involved in the committee. Some of the people who had attended the community café we visited also volunteered there and they had previously undertaken Food Champion Training or other training delivered by Fife Community Food Project. They reported that the training was enjoyable and had updated their knowledge, including providing advice on food issues to other members of their communities, improved their cooking skills which they applied at the café and at home, and had a social element to it which got them out of their houses.

4.36 Based on the limited information provided by four community cafés, it is apparent that they are financially dependent on local donations particularly from church congregations. Oakley community café reported that they had received start-up and food costs from Fife Council and in-kind support from Oakley Community Centre which does not charge rent and they noted that this had helped sustain the café which had struggled to cover its costs at its previous premises.

4.37 The majority of service users in the community café we visited heard about the service through word of mouth. Overall, experiences were very positive with people citing supportive staff, good quality food at affordable prices and a friendly atmosphere. The Dignity report and other literature on the subject highlights that food is a social activity as well as a basic human right and it was therefore revealing that several community café users had started attending in order to socialise and in the hope of meeting new people. Some reported that food was a secondary or supplementary aspect to their use (although this may have been due to a reluctance to identify food poverty and food insecurity as the primary reason). Other reasons for using the café included individuals not knowing or lacking awareness around cooking and buying food, and not having the financial and non-financial means (such as a fridge or microwave) to cook meals at home.

“Café food better than at home. There’s more choice here and it’s different”.

“Money fluctuates so good to know somewhere to come when short”.

4.38 Comments from some of those we spoke with in Dunfermline suggest that there may be limited awareness of local community cafés as they reported a lack of cafés and places...
providing hot meals in their area. Limited awareness is unlikely to be confined to Dunfermline, or indeed to community cafés, in our opinion.

Other providers of cooked/prepared food

4.39 Other providers of cooked/prepared food exist in Fife in addition to community cafés. The two most significant services are the provision of Meals on Wheels and school meals, particularly free school meals to those who meet the eligibility criteria. Meals on Wheels is available to older people and adults with a disability, chronic illness, mental health issue or dementia – as such they are not restricted to those experiencing household food insecurity however service users will include an unknown number of people who are in such circumstances including those where transport or cooking skills/knowledge are contributing factors. Meals on Wheels cost £3.75 for a two-course lunch, meals are described as nutritious and dietary needs can be accommodated. Eligibility for free school meals is based on receipt of specified benefits, as well as universal eligibility for all P1-P3 pupils.

4.40 Breakfast Clubs were also identified by stakeholders as another relevant service. Primary schools where more than 40% of pupils are entitled to free school meals have operated free breakfast clubs for a number of years. In 2017, provision expanded to a further 16 schools where 30% of pupils are entitled to free school meals. Food at the clubs is supplied by FareShare and donations from local businesses. Some local businesses have also provided funding.

4.41 Several stakeholders noted the danger of food insecurity for children during the school holidays. The mapping exercise identified some services that aim to address this such as Fife Council’s Free Range Project, the F3 project delivered by Gillespie Memorial Church in Dunfermline and Dalgety Parish Church, and St Ninian’s Parish Church in Glenrothes. The Free Range Project is a nature-based activity programme that operates five days a week throughout the summer on the Falkland estate. Organised by Fife Council’s Early Years team, the project is aimed at 4 to 9 year olds with referrals accepted from Social Work, Health Visitors, Family and Community Support Teams, Education and the third sector. Meals are provided daily to all participants. F3 provides fresh food for families in need, predominantly from the Dunfermline area, five days per week throughout the summer months. The project has an open-door policy with no referrals and it works closely with Dunfermline Advice Hub. The Dignity report recommended ‘The Scottish Government and local authorities should prioritise investment in healthy meals at school, and further explore the potential for providing healthy meals as part of school holiday programmes’.

Community growing projects

4.42 Community growing projects provide opportunities for individuals and groups to grow their own fruit, vegetables and herbs either for participants to eat themselves or for sale at affordable prices. They tend to include a plot of land such as community gardens, allotments, and community orchards where the growing takes place as well as encouraging participants to grow their produce in their own garden, pots or window boxes. While community growing projects have a role in the alleviation of household food insecurity it is important to note that some projects - including many allotments – do not specifically aim to tackle the issue.

4.43 The mapping exercise sought to identify community growing projects in Fife where this was part of their purpose although this was not a straightforward task. In total 14 community growing projects were identified including two services that are delivered at numerous sites
across Fife - Edible and Tasty Spaces (EATS) and Fife Council’s allotments. The total includes eight community gardens/orchards in Kirkcaldy (three), Buckhaven, Tayport, Newburgh, Rosyth, and Methilhill.

4.44 Given the nature of community growing projects they tend to be accessible throughout the week to allow participants to cultivate their produce. Several of the projects have open access including the EATS sites which use public spaces to grow fruit and vegetables. This accessible format means the projects tend not to record detailed information on the number or characteristics of participants.

### Table 8 – Community growing projects in Fife

<table>
<thead>
<tr>
<th>Community growing project</th>
<th>Location</th>
<th>Weekly openings</th>
<th>Details</th>
</tr>
</thead>
</table>
| Edible and Tasty Spaces (EATS) | Dunfermline, Kirkcaldy, Levenmouth, St Andrews, Rosyth, Burntisland, Markinch, & Glenrothes | Open access | EATS are unfenced public spaces which are planted with fruit, vegetable and flowers. Local people can help themselves to ripe produce which is also harvested and distributed to community groups by the Fife Community Food project. There are 16 locations in Fife, largely funded, planted and maintained by local groups such as Growing Kirkcaldy, Dunfermline Eco Group, Floral Action Burntisland, and Invertiel Tenants and Residents Association:  
- Forth House EATS, Dunfermline  
- Peebles St EATS, Kirkcaldy  
- College St EATS, Levenmouth  
- Town House EATS, Kirkcaldy  
- St Andrews - edible campus  
- Floral Action Burntisland  
- Library EATS 1, Rosyth  
- Library brick planters 2, Rosyth  
- Parkgate herbs, Rosyth  
- Queensferry Rd planter EATS, Rosyth  
- Anchor bed, Rosyth  
- Community food growing, Rosyth  
- Orchard EATS, Rosyth  
- Markinch station - herb planters  
- Bennochy Road EATS, Glenrothes  
- Abbeyview EATS, Dunfermline |
| Fife Council allotments | Fife wide | Open access | Fife Council manages 28 allotments in Glenrothes, Markinch, Dysart, Lochgelly, Buckhaven, Dunfermline, Kirkcaldy, Kelty, East Wemyss, Burntisland, Cowdenbeath, Anstruther, Aberdour, Rosyth, Newburgh, Cupar, Kirkcaldy, Inverkeithing & Crossford. Groups have been formed to oversee some of the sites such as Balbinnie Allotment Group in Markinch. |
| CLEAR 19 Buckhaven | Buckhaven | 4 days / 24 hours | Includes a nursery, orchard, allotments, school and community plots, and a central growing area. Production of fruit and vegetables for consumption and sale, as well as regular workshops including cooking sessions. Also |

19 Community Led Environmental Action for Regeneration.
<table>
<thead>
<tr>
<th>Garden Name</th>
<th>Location</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Methilhill Community Learning Garden</td>
<td>Methilhill</td>
<td>Established a Men’s Shed group. Estimate of 50 participants per week.</td>
</tr>
<tr>
<td>Tayport Community Garden</td>
<td>Tayport</td>
<td>Charlie’s plot is a planting and growing project for young people. Run by the young people, the project has a growing space within the Garden to investigate climate change and the impact of growing your own produce.</td>
</tr>
<tr>
<td>Newburgh Orchard Group</td>
<td>Newburgh</td>
<td>Encourages the small orchard-keepers of Newburgh to prune, pick, sell and utilise their fruit. Organises annual fruit markets and runs a community orchard project with local primary school.</td>
</tr>
<tr>
<td>Anstruther and District Allotment Association</td>
<td>Anstruther</td>
<td>Allotment Site at Dreelside in Anstruther with 18 plots available for lease to local people.</td>
</tr>
<tr>
<td>Kaleyard Community Garden</td>
<td>Kirkcaldy</td>
<td>Community garden run by a group of about six regular gardeners. Produce is shared among gardeners. Support regular visits from the local primary school, playgroup and scouts. Formerly operated a children’s gardening club.</td>
</tr>
<tr>
<td>Hayfield Community Garden</td>
<td>Kirkcaldy</td>
<td>Supporting people to grow their own food at home and in the garden at the community centre. Also raise awareness of food waste and how to reduce it. Estimated that approximately 40 people used the garden during 2016.</td>
</tr>
<tr>
<td>Greener Kirkcaldy Community Garden</td>
<td>Kirkcaldy</td>
<td>Greener Kirkcaldy has developed a community garden and orchard at Ravenscraig Walled Garden which produces a range of fruit, vegetables and herbs.</td>
</tr>
<tr>
<td>Invertiel Tenants and Residents Association</td>
<td>Kirkcaldy</td>
<td>Formed in 2010 by local residents to tackle a variety of issues including food poverty which is addressed by growing edible plants, vegetables, fruits, &amp; herbs at Peebles Street EATS and encouraging residents to grow and share produce.</td>
</tr>
<tr>
<td>SAMH Evergreen Project</td>
<td>Kirkcaldy</td>
<td>Horticultural therapy and gardening for people with mental health issues. Produces a range of fruit and vegetables throughout the year that participants can access and are actively encouraged to use. SAMH volunteers are involved in maintaining some of the EATS sites. Usually ten participants at any one time.</td>
</tr>
<tr>
<td>Markinch Environmental Action Group (MEAG)</td>
<td>Markinch</td>
<td>MEAG’s Incredible Edible Markinch project aims to encourage local growing. The group helped establish Balbirnie allotments and the planting of an orchard at the site, Markinch Station EATS, planters at the Memorial Hall and is involved in Markinch Hill improvements.</td>
</tr>
<tr>
<td>Rosyth Community Garden and Orchard</td>
<td>Rosyth</td>
<td>Distribute surplus food grown at the community garden and encourage local residents to grow at home by offering workshops and resident visits. Share food from EATS areas and community garden. Approximately 250 people used this service in 2016.</td>
</tr>
</tbody>
</table>
With the exception of the allotment sites, community growing projects tend to provide additional support to participants where possible and this mainly consists of advice on food issues, practical cooking courses, and signposting to other support services. For example, CLEAR Buckhaven sell some produce at low cost, distribute boxes of produce to schools and surgeries for people to help themselves. They also provide hot meals to volunteers (using food supplied by FareShare), occasionally deliver practical cooking demonstrations, and provide advice and training on cooking and growing to disadvantaged young people. Rosyth Community Council has free recipe cards and cooking demonstrations to help participants to cook the produce. Rosyth EATS reported locals were visiting their hub for free bread, vegetables (from their own produce and FareShare) and food advice, and a monthly community meal was attracting up to 60 people.

From the limited information available on staff and volunteers, it appears that community growing projects rely heavily on volunteers. Staff are employed at Rosyth EATS (one full-time employee), CLEAR Buckhaven (three part-time employees), Hayfield Community Centre (two part-time employees) and Methilhill Community Children’s Initiative (sessional staff). At the same time, approximately 65 volunteers were involved in operating these services. Information on training was also limited, where it was reported it consisted of induction training and food hygiene training, support and training from Fife Community Food Project.

Funding information was very limited. The main sources of external funding were Scottish Government (Climate Challenge Fund, People and Communities Fund), Fife Council, Big Lottery Fund and charitable trusts such as The Robertson Trust and the Health Lottery. Amounts - where disclosed - tended to be relatively small, with the most significant grant being £100,000 from the Climate Challenge Fund to Rosyth EATS. Community growing projects reported that they receive donations and some generate a small amount of income from the sale of their produce. Of the handful of services that responded, they were not generally confident about sustaining funds. For example, Hayfield Community Centre Funding reported that a recent funding application to cover additional staff costs had not been successful which would lead to the food growing and cookery demonstration ending or being reduced, and the growing at home support would no longer be supported by an outreach worker.

“Not especially confident. It is hard for small charities”.

“Centre is run by volunteers but staff are needed to take forward the food growing & food education so without funding the volunteers cannot keep these activities going. Only certain grants cover this type of activity and allow for the grant to pay a person to deliver the service”.

Four of the five services that responded, felt that demand for services will increase with one suggesting it will stay the same.

“Hard to explain but can see rising unemployment. Education is now an issue as third generation might not know how to cope with welfare changes”.

“Welfare reform changes may have an impact in the local area”.

People had most often been signposted to the community growing project we visited (CLEAR Buckhaven) by friends, family or a support agency and most were initially reluctant to attend. Over time the participants reported that they had begun to enjoy the outdoors, learnt new skills, and benefitted from the social and health aspects of the project. They
welcomed being able to take away or pay a small amount of money for grown produce. In addition, participants were provided with free meals in return for their time supporting the project which they also welcomed and considered “wholesome”, “fresh” and “healthy”. This was particularly important for some of the participants who reported they may otherwise struggle to buy or cook food.

Advice on food issues and practical cooking sessions

4.50 This final category of the mapping exercise focuses on projects providing advice on a range of food issues and practical cooking sessions in order to tackle household food insecurity. The advice covers healthy eating, cooking, buying, budgeting and signposting to other services such as foodbanks, community cafés and benefits. As described previously a number of organisations involved in the provision of food parcels, cooked/prepared meals and community growing projects also provide advice on food issues and/or practical cooking sessions. This section therefore focuses on services not previously discussed and this tends to be advice on food issues and practical cooking sessions delivered alongside advice and support on a very wide range of issues including employability, housing/homelessness, family and relationships, money/debt, benefits, mental and physical health issues, legal advice, and substance misuse.

4.51 The mapping exercise identified numerous relevant providers across Fife. The following are examples and not a comprehensive list of all providers of food advice and practical cooking sessions. However, the list does include some of the most prominent providers many of which employ staff who have participated in Food Champion training delivered by Fife Community Food Project. Staff from public and third sector organisations undertake the three-day Food Champions training course and approximately 150 people have taken part in the training since 2010. Relevant providers include staff from NHS Fife, Jobcentre Plus/DWP and Fife Council including Community Learning and Development, Housing, Social Work, and Education (nurseries, Family Nurture Centres, primary and secondary school staff). Fife Community Food Project regularly delivers practical cooking courses and food hygiene training to a very wide range of organisations. The project previously used a community kitchen in Leven however following its closure they have delivered training from several different locations. Relevant third sector providers include:

- CARF
- ENeRGI
- Fife Young Carers
- Clued Up
- Greener Kirkcaldy
- Frontline Fife
- Fife Gingerbread
- Barnardo’s
- Richmond Fellowship
- Falkland Centre for Stewardship
- Registered Social Landlords including Fife Housing Group, Kingdom Housing Association, Barony Housing, and Ore Valley Housing Association.

4.52 As the provision of advice on food issues and practical cooking sessions are elements of the broader range of advice and support these organisations provide, it has not been possible to disentangle relevant information on staff, volunteers, and funding.
4.53 Some consultees stated that generally services found it challenging to engage people in food-related advice and practical cooking sessions. They highlighted that engagement tended to be most successful when working with existing groups who knew each other and met at a regular time. Consultees reported positive feedback on the delivery of sessions with existing groups. Only a handful of service users we spoke with had received advice on cooking, buying or budgeting. Generally, this was a one-off occurrence which they did not wish to pursue further citing a lack of time, motivation and interest.

4.54 Greener Kirkcaldy has a strong focus on tackling food poverty and food insecurity and has benefitted from significant support from Fife Community Food Project, FHWA funding for Living Well on a Budget, and Scottish Government’s People and Communities Fund support for Living Well on a Budget and Food Works! Living Well on a Budget was delivered in partnership with CARF and consisted of a six-week food and cooking skills programme including household budgeting advice, energy saving advice, and if required a home energy visit and a benefits check. Food Works! utilised volunteers to provide accredited training and practical experience to unemployed people looking to improve their horticulture and food skills. Greener Kirkcaldy has a community garden (Ravenscraig Walled Garden) and allotment where volunteers can grow their own produce; the garden has also been used to deliver outdoor cooking sessions. Greener Kirkcaldy delivered an eight-week pilot programme with Kirkcaldy Foodbank where foodbank users received a bag of fruit and vegetables with their food parcel. Other services include delivering Grow Your own courses, distributing soup packs, and providing community meals with other local groups. With the aid of financial support from the Scottish Land Fund, Greener Kirkcaldy has purchased a building in the town centre where they plan to develop a Community Food Hub. The hub is described as:

‘A place for people to come together to grow, cook, eat and learn, and will centre on a fully equipped training kitchen with eight workstations, and a kitchen garden growing fresh ingredients. The Food Hub will offer a range of volunteering, work experience, training and learning opportunities around food production and preparation, including courses to help people on low incomes eat well and make the most of their food budgets. It will also host a wide range of events, courses and workshops on all aspects of food and drink – plans include beginners bread-making, Indian vegetarian cooking and even gin-tasting evenings! A food co-op promoting local and seasonal produce is also planned’. 
5  Assessing existing service provision in Fife

5.1 In this section we assess the extent to which the services outlined previously to tackle household food insecurity are effective, sustainable, address the underpinning principles set out in the Dignity report, and contribute to reducing health inequalities in Fife.

Effectiveness

5.2 Assessing the effectiveness of the services to tackle household food insecurity in Fife is not straightforward and we draw a distinction between their effectiveness in tackling the underlying causes on the one hand and their effectiveness in mitigating its effects on the other.

5.3 Evidence highlighted in Section 2 demonstrates that several income-related issues are the main cause of household food insecurity. The majority of services covered in this study seek to support those experiencing these issues, to ameliorate the effects, rather than address the underlying causes. This is certainly the case with the two main service types: the provision of food parcels including foodbanks, and the provision of cooked/prepared food including community cafés. Other services - community growing projects, advice on food issues, and practical cooking courses - to an extent, address limited skills and knowledge, and access to affordable food which were identified as underlying causes (albeit subsidiary ones to income). However, these services engage limited numbers of local people experiencing household food insecurity and our overall impression therefore is that the services covered by this review are not particularly effective at addressing the causes of household food insecurity in Fife.

5.4 Other services not directly covered by this review such as money and welfare advice services, the Scottish Welfare Fund, and employability services are likely to be more effective in addressing the underlying income-related causes of household food insecurity. It is worth noting that this would, in all likelihood, also be the case in other areas in Scotland and the Dignity report stated: ‘The Scottish Welfare Fund has provided an additional safety net for tens of thousands of households in the last two years, and we recommend this as the first point of call for people with an income crisis which leaves them unable to afford food’. The Dignity report also recommends local authorities work with partners to develop Community Food Plans and Fife Council and partners should consider how to increase use of services such as community growing projects, advice on food issues, and practical cooking courses – alongside continued support for money and welfare advice and employability services – to tackle the underlying causes of household food insecurity. Should Fife be chosen as one of the three Menu for Change areas, there should be opportunities to do so.

5.5 In terms of mitigating the effects of household food insecurity, the mapping exercise demonstrated that numerous organisations provide a wide range of support that engages a significant number of local people across Fife. However, gaps exist both geographically and in terms of engagement which need to be acknowledged in any assessment of their effectiveness. Service users and previous research has identified that some people are reluctant to use foodbanks because of the perceived stigma which, it was reported, can be exacerbated by the need to first source a voucher before visiting a foodbank. In Fife, Kirkcaldy Foodbank has a broader range of referral agencies, accepts self-referrals and has worked with local partners to establish more distribution points that are open for longer
compared to the other foodbanks. It also reported the greatest number of food parcel supplies (although caveats around their figures were noted in Section 4). The inference we draw is that Kirkcaldy Foodbank’s more accessible approach appears to be an effective model in supporting people experiencing household food insecurity. In addition, the mapping exercise found that foodbanks in Fife do not tend to deliver food parcels to those in need and this contrasts with findings from Making the connections: A study of emergency food aid in Scotland which reported that 80% of emergency food aid providers in remote or accessible rural areas provide food parcel delivery (compared with 12% in large urban areas). Other providers, FHWA and partners are encouraged to review the learning from the different approaches adopted by foodbanks in Fife and elsewhere.

5.6 Some stakeholders highlighted an alternative approach to tackling household food insecurity that could address some of the barriers to accessing foodbanks. They discussed the idea of community shops where customers would be able to choose from a range of very low cost food (collected from similar sources to foodbanks plus fresh produce). Partners in Fife are encouraged to consider the learning from such approaches in other areas of Scotland.

5.7 Aside from foodbanks, other services to tackle household food insecurity in Fife such as community cafés and community growing projects are relatively low key engaging small numbers of local people. While they provide very valuable support to beneficiaries, many of whom are in acute need, it would be incorrect to suggest they had a significant impact on mitigating the effects of household food insecurity in Fife. This is due, in part to their reliance on volunteers although this can be seen as a positive in sustainability terms as discussed below. Greater links between the wide range of community food initiatives in Fife would potentially enhance opportunities to tackle the underlying causes of household food insecurity.

5.8 Services tackling household food insecurity in Fife have connections with each other as well as with other relevant services tackling poverty, and in many cases these connections are strong. The most prominent example is the connection between foodbanks and the partner agencies that refer those in need and the reciprocal relationship where foodbanks signpost service users to advice providers. These connections were particularly strong when advice providers delivered outreach services from the foodbanks in the past and it is encouraging that there is a willingness on both sides to do so again in the future if funding can be secured. This would help to address the underlying causes of poverty which is a national and local priority. Locally, Fairness Matters recommends that ‘Fife Partnership should design advice and support services for those living on low incomes for maximum usage by being based in places and services that people already use’. Nationally, the Dignity report recommends ‘The Scottish Government and local authorities should prioritise investment in benefits advice and information services in order to maximise people’s incomes and should carry out a review to enhance the quality of the service provided’.

5.9 In the majority of cases, our impression is that connections tend to involve only two service types and rarely covered several elements. There were some notable exceptions however such as CLEAR Buckhaven, and Greener Kirkcaldy’s plans to develop a hub-type service which was highlighted in Section 4. Community food hubs have been progressed in other areas of Scotland such as Glasgow, Lanarkshire, and Stirling. The hubs seek to link up various aspects of tackling food poverty particularly community growing, practical cooking sessions, access
to low cost/free produce, and emergency food parcels. FWHA and services in Fife may wish to consider the development of community food hubs in other parts of Fife, particularly in light of the Dignity report recommendation ‘The social enterprise and community sector should continue the development of community food hubs across Scotland, supported by the recently expanded Fair Food Fund’.

5.10 In many cases, stakeholders and service providers had limited awareness of the range of services available to tackle household food insecurity in Fife. Some stakeholders, particularly advice providers, would welcome a directory, preferably online so it could be regularly updated. Fife Community Food Project could potentially fulfil this awareness raising role as well as facilitating greater linkage and joined-up working to address household food insecurity in Fife.

**Sustainability**

5.11 Although limited financial information was available for this mapping exercise, it was nonetheless very apparent how reliant services of all types were on volunteers and donations of food and money. Compared to other policy areas, services tackling household food insecurity in Fife do not generate significant income from external funders such as Fife Council, Scottish Government, Big Lottery Fund and charitable trusts. On the one hand this volunteer-led approach could be regarded as a sustainable model which is less dependent on external funding to pay for services and staff. For example, services that shared £42,000 awarded by Fife Food and Health Strategy Group in 2014 (to progress food related projects that helped contribute to reducing health inequalities across Fife) have proven difficult to sustain. On the other hand, the continued existence of many services in Fife is very much dependent on the continuing time and goodwill of the volunteers, and continuing food donations from the public and food retailers.

5.12 As highlighted in Section 2 the sustainability of the foodbank model as a means of tackling the root causes of household food insecurity has been questioned in academic papers. The mapping exercise demonstrated that foodbanks are the most significant service in Fife compared to community cafés and community growing projects given the numbers engaged. A more sustainable approach was advocated in the Dignity report which recommended focusing ‘on reducing and removing the need for foodbanks in the lifetime…. and of transitioning to other models involving increasing income and developing community food initiatives’. Fife Community Food Project could potentially provide the expertise and knowledge to support the transitioning to broader models of community food initiatives in Fife.

5.13 Several stakeholders reported that the size and dispersed population of Fife added to the difficulty in sustaining services. In smaller settlements, the number of people experiencing household food insecurity can be relatively small and demand can be unpredictable given the intermittent nature of food insecurity. This creates challenges for services based in these communities as well as for services based elsewhere considering outreach.

5.14 The Food Champions training is a commendable approach that aims to build capacity and sustainability within organisations. As stated in Section 4, approximately 150 people from public and third sector organisations in Fife have taken part in the training since 2010. It has not been possible within the scope of this research to quantify the proportion of the 150 Food Champions who have applied their knowledge after the training. However, several of those consulted during this study who had completed Food Champion training provided
accounts of how they had delivered in-house information, advice and cooking sessions to colleagues and service users, and developed new initiatives to address household food insecurity. Their accounts suggest that the Food Champion approach is building capacity and we would encourage an expansion of the training, and enhancement to post-training support, to ensure Food Champions can apply the knowledge and skills gained.

**Dignified**

5.15 FWHA’s brief requested an assessment of the extent to which existing services meet the underpinning principles of the Dignity report. As noted in Section 2 these principles are: involving people with direct experience in decision making, recognising the social value of food, providing opportunities to contribute, and leaving people with the power to choose.

5.16 The Dignity report calls for people with direct experience to be seated at the decision making table in order to reduce and eradicate food insecurity effectively. The mapping exercise showed that, in general, people with direct experience of household food insecurity have limited involvement in decision making in Fife. This applies at both the Fife-wide level and the service-level such as members of boards or steering groups although there were some examples of this highlighted in Section 4 e.g. Levenmouth Foodbank. It should be noted however that limited involvement in decision making processes is not unique to this policy sphere as similar situations exist in other policy areas. It is also not unique to Fife. FWHA and service providers in Fife may wish to consider this issue and seek to encourage the meaningful engagement of people with direct experience of household food insecurity in relevant decision making process in Fife.

5.17 Based on the mapping and consultation, there was a sense that services in Fife do, where relevant, recognise the social value of food. This was most evident with the community cafés, which generally seek to counter social isolation as well as food poverty. Stakeholders with experience of the practical cooking sessions suggested they have been most effective where they are delivered to existing groups that people feel relaxed in each other’s company. The community growing projects generally seek to encourage social interaction through communal activities including CLEAR Buckhaven where volunteers are provided with a free meal. Advice services and the provision of food parcels to be consumed at home do not lend themselves as readily to the integration of the social value of food, however the existence of cafés at four of the foodbanks does provide opportunities for social interaction. It was noteworthy how many of the stakeholders in Fife highlighted the importance of the social value of food.

5.18 The majority of services in Fife, especially foodbanks, community cafés and community growing projects, are heavily dependent on volunteers and operate either without any employees or with limited staff numbers. There are therefore many opportunities for service users to contribute as volunteers. In practice, it appears that a limited number of service users choose to volunteer although there were some examples, particularly at the community cafés and community growing projects. However, this is an issue experienced by third sector organisations in many fields across Scotland. Services in Fife may wish to consider how they can encourage service users to contribute in greater numbers to delivery.

5.19 The principle of providing people with the power to choose can be applied in various settings. In terms of foodbanks, Fife’s foodbanks do provide people with a degree of choice over the food they receive although this must be viewed within the constraints of the foodbank system. While choice is limited, this reflects the reality that foodbanks tend not to
be able to store perishable goods and can only offer food supplies they receive or purchase in the first place, and it is not a reflection of Fife’s foodbanks not allowing service users the power to choose. More fundamentally research and some service users reported they had no choice but to turn to foodbanks for food given their circumstances. The other services highlighted in this report including community cafés, community growing projects and advice services do, in theory, provide people experiencing household food insecurity with alternatives to foodbanks in the long term – and therefore some choice - although use of these services was shown to be limited. Stakeholders and policy promote a continued widening of choice for those experiencing household food insecurity with an emphasis on addressing the underlying causes.

Addressing health inequalities

5.20 FHWA produced its Health Inequalities Checklist to assist partnerships, organisations and services in Fife to work in ways that will help to reduce health inequalities across the three themes: 1) changing the way organisations work, 2) creating healthier places and communities, and 3) supporting healthier lives for individuals and families. Each theme has a series of bullet points that provide further detail on how partnerships, organisations and services could reduce health inequalities. Given the breadth of community food initiatives in Fife and the number of bullet points, it is only possible to review food initiatives’ contribution to reducing health inequalities in the broadest sense in this report.

5.21 Based on the evidence presented in Section 4, we conclude that Fife’s community food initiatives do contribute to reducing health inequalities. There are numerous examples of activity in Fife that contributes to specific bullet points across all three themes, including:

- **Changing the way organisations work** - Fife Community Food Project and the Food Champions training contribute to the ‘developing staff skills and knowledge around issues that affect health and wellbeing’ bullet point. Fife’s foodbanks contribute to the ‘working in partnership across sectors, services and organisations’ bullet point through their work with advice providers and the Scottish Welfare Fund. Collectively community food initiatives in Fife are ‘sensitive, flexible and responsive in meeting the diverse needs of individuals, groups and communities’.

- **Creating healthier places and communities** - the community growing projects contribute to the ‘enhancing the social and physical environments where children and adults live, work and play’ bullet point. Fife’s community cafés contribute to ‘supporting people to build connections and supportive social networks’.

- **Supporting healthier lives for individuals and families** – the foodbanks in Fife contribute to the ‘ensuring people at most risk have access to preventative health interventions and other appropriate support’ bullet point. Collectively the community food initiatives are ‘aware of the range of social, economic and environmental factors impacting on the health of individuals and families’.

5.22 Although there is evidence that community food initiatives are reducing health inequalities in Fife, the initiatives do not contribute equally to all bullet points. For example, limited contribution was evident to ‘collaborating with communities in planning and delivering services’ (Changing the way organisations work) and ‘engaging people in decision about what happens locally’ (Creating healthier places and communities). FWHA may find it useful to undertake a more detailed internal exercise, using the findings of this research, to cross-check community food initiatives against the three themes and 21 bullet points contained
in the Health Inequalities Checklist.

5.23 Generally, it was our sense that services primarily see their support as alleviating hunger rather than addressing health inequalities per se. However, in their efforts to alleviate hunger they do generally seek to provide healthy food, for example in the form of nutritionally balanced food parcels (within the constraints of the food donated), relatively healthy food at community cafés, growing fruit and vegetables, and providing advice and practical sessions on healthy eating. It is our sense that this is based on a broad understanding among service providers that people should consume healthy food rather than a deep understanding of the health problems associated with household food insecurity or a poor diet which were summarised in Section 2. Several stakeholders also highlighted the importance of the social value of food, in particular how eating with others was important to mental health and wellbeing. This was seen as especially important as people experiencing household food insecurity would be living in a stressful situation.

5.24 Some stakeholders reported limited awareness among the public of what constitutes healthy food including how to use and cook fruit and vegetables and that this was more pronounced among those experiencing food insecurity. Although providers of healthy eating advice and practical cooking course do address these issues these services are not widespread.

5.25 Finally, it was beyond the scope of this research to explore the impact of food insecurity on the ability of people living with chronic conditions to manage their condition. In the US and Canada, where food insecurity is routinely monitored, there is robust evidence to indicate that, as the experience of food insecurity increases, health care use also increases. Both quantitative and qualitative evidence indicates that people living with chronic conditions find it more difficult to manage their chronic condition(s) and have poorer health outcomes if they are experiencing food insecurity. Given that there is emerging evidence that people living in poverty with ill health are regular users of foodbanks in the UK, this is another facet of food insecurity and health that FHWA may wish to consider in more detail in the future.
6 Conclusions

6.1 Fife Health and Wellbeing Alliance (FHWA) commissioned this study to build a better understanding of food poverty and food insecurity across Fife. A comprehensive mixed methods approach addressed FHWA’s requirements and has provided detailed findings which should assist the Alliance, and service providers, as they seek to address the policy goals of sustainable and dignified initiatives that tackle the underlying causes of household food insecurity.

6.2 Clarity has been provided with a proposal to adopt the term ‘household food insecurity’ in Fife. This would avoid the confusion caused by the current interchangeable and sometimes incorrect use of the terms food poverty and food insecurity. Based on the widely used Dowler definition, household food insecurity is the inability of one or more members of a household to consume an adequate quality or sufficient quantity of food that is useful for health in socially acceptable ways, or the uncertainty that they will be able to do so.

6.3 The study’s review of national and local evidence validates FHWA’s current approach and provides a sound theoretical basis for future approaches to tackle the underlying causes of household food insecurity. The evidence clearly demonstrates that a series of income-related issues - including changes to the welfare system, rising living costs, increasing food and energy costs, low wages, and job insecurity - are the main cause of household food insecurity. Initiatives that seek to address these income-related issues, such as the proposed Menu for Change programme, should continue to be the main focus of the Alliance’s approach to combat household food insecurity. Wherever possible, such approaches should also seek to address the other factors identified during the study that contribute to household food insecurity i.e. limited availability of and access to retailers selling affordable, nutritious food; access to transport; access to cooking, storage and preparation facilities; and appropriate skills and knowledge relating to nutrition and the preparation of meals.

6.4 Evidence that household food insecurity can be dynamic, experienced in mild, moderate or severe forms, and be a chronic and/or acute experience is also significant. Initiatives that are flexible and capable of responding to such flux will be important considerations for FHWA and service providers.

6.5 Evidence that the community food initiatives are contributing to reducing health inequalities will be reassuring to FHWA while the study findings should assist the Alliance in their efforts to further strengthen the focus on reducing health inequalities in the future. The perception among some service providers and stakeholders that the health risks of household food insecurity are subordinate to combating hunger or alleviating poverty will be of interest to FHWA in their attempts to reduce health inequalities. Not only will this be useful in informing the content of future initiatives, it may also be useful in terms of funding if a more explicit focus on early intervention and reducing health inequalities was adopted. FHWA may also wish to consider the impact of food insecurity on the ability of people living with chronic conditions to manage their condition.

6.6 The study’s estimate that 24,300 adults aged 16 and over in Fife could live in low or very low food secure households provides FHWA with an indication, for the first time, of the extent of household food insecurity in Fife. Further evidence on the distribution of these households across Fife (using SIMD income deprivation and access to services data), and the
groups at greatest risk provide FHWA with evidence of the nature of household food insecurity in Fife. The information should enable FHWA to better target initiatives in the future. Future evidence from the Scottish Health Survey will provide robust data on household food insecurity in Fife and across the whole of Scotland which will be very useful for FHWA and service providers. As noted in Section 2, FWHA may wish to consider with others how to routinely gather local information on the nature and extent of household food insecurity within Fife. Such evidence would put Fife at the forefront of evidence gathering in Scotland and could help inform future policy and practice.

6.7 The mapping exercise provides FHWA with extensive information on the diverse range of services that exist in Fife at present. While people experiencing household food insecurity have access to emergency food aid via foodbanks and meals via community cafés, the review showed that the accessibility of these services varied in terms of their location, referral routes (for foodbanks), and opening times. FHWA may wish to consider how to address these inconsistencies and gaps in the short-term. Longer-term, FHWA may wish to consider how to increase the number and scale of initiatives that address the underlying causes of household food insecurity such as community growing projects, food-related advice projects and practical cooking courses. The development of a community food hub in Kirkcaldy may provide a model that could be rolled out to other parts of Fife and such an approach would align with national policy and the recommendations of the Dignity report. Ensuring access to residents of rural Fife will be an important consideration in both the short and long-term.

6.8 The unique role of Fife Community Food Project was evident throughout the study. As partners aim to strengthen the focus on tackling the underlying causes of household food insecurity, the Project could potentially have a key part to play with a central co-ordinating role, and provider of specialist advice and assistance.

6.9 In summary, the study has addressed the previous lack of robust evidence around household food insecurity in Fife. It is hoped that the contents enable FHWA to develop a coherent approach to tackle the underlying causes of household food insecurity in Fife.