Dishing up the facts:

Going without healthy food in Tasmania

Healthy Food Access Tasmania
Acknowledgements

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**Introduction**

If someone is *food insecure* it means they are struggling to put good food on the table. Tasmanians who are food insecure do not have regular and reliable access to enough safe and healthy food to meet their dietary needs and food preferences so they can live an active healthy life.

Despite the fact that in Tasmania we produce enough good food to feed our entire population, many Tasmanians are going without.¹ You may find it surprising that food insecurity occurs in our own state – but it does. In fact up to 50,000 Tasmanians may be struggling to access good food on a daily basis.²³ And what’s more, the reasons are possibly not what you think.

That’s why we’ve written this paper. In *Dishing up the facts*, we bring together important information about food insecurity in Tasmania, challenge some of the commonly held myths about why people are going without food, and summarise key findings of the *Healthy Food Access in Tasmania Project* delivered by the Heart Foundation in Tasmania. Most importantly we present some truths about food insecurity in Tasmania and show why it is neither accurate nor useful to blame anyone living with food insecurity for their situation.

This paper presents research evidence that food insecurity arises from a combination of social and economic factors which are largely beyond the control of individuals - for example, income, which has been described as the single most important modifiable determinant of health.⁴

*Dishing up the facts* is designed to be a ‘go-to’ document to help raise awareness of food insecurity in Tasmania and assist in advocating for the development of ‘healthy public policy,’ so that no Tasmanians have to go without access to healthy food.

“A lack of understanding about disadvantage can contribute to misplaced community concerns. It can also be an impediment to good public policy.”⁵

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**Food Security: A Technical Definition**

The United Nations defines *food security as* A situation that exists when all people, at all times, have physical, social and economic access to sufficient, safe and nutritious food that meets their dietary needs and food preferences for an active and healthy life.

Food security is generally thought to have four themes:

- **Food availability**—sufficient quantities of food are available on a consistent basis.
- **Food access**—sufficient resources are available to obtain appropriate foods for a nutritious diet.
- **Food use**—appropriate use, based on knowledge of basic nutrition and care, as well as adequate water, sanitation and food preparation facilities.
- **Food stability**—stability of availability and access over time.

If one or more of these factors does not exist for a person or household (for example, not knowing when or what your next meal will be), it is termed *food insecurity*.

There are considered to be three levels of food security:

- **Secure**—having continual access to sufficient, safe and nutritious food.
- **Insecure but without hunger**—food is regularly consumed, but there may be intake of food with poorer nutritional quality and occasional meal skipping.
- **Insecure with hunger**—insufficient food to meet nutritional needs or to avoid hunger (Burns C, 2004).

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References:

Having enough good food to eat is a basic human need. In Australia, eating good food means eating a diet as recommended by the Australian Dietary Guidelines. These Guidelines use the best available scientific evidence to provide information on the types and amounts of foods, food groups and dietary patterns to:

- Promote health and wellbeing
- Reduce the risk of diet-related conditions
- Reduce the risk of chronic disease.

Being food secure also means being able to obtain food in a ‘socially acceptable way’. This includes having what you need – money, transport, language skills etc. - to buy good food from a place of your choosing (e.g. shop, farmers market, community coop etc.) and being able to eat the same sorts of food as other people in your community.

7 truths about food insecurity in Tasmania

In Dishing up the facts, we discuss seven commonly held views about food insecurity, and show why these ideas are both inaccurate and unhelpful to the community conversation we need to have. Instead we urge Tasmanians to base their understanding of food insecurity on sound research, where the evidence clearly shows that:

- Up to 50,000 Tasmanians from all walks of life may be going without food and they can’t afford to buy more when they run out.
- A major reason why Tasmanians are going without food is not enough income. Those on low incomes are well aware that they are eating unhealthy food. They just can’t afford to eat better.
- People may be overweight or obese, and yet also be malnourished.
- Affordable healthy food is not readily available to all Tasmanians.
- Parents worry about their children when they are going without and will often go without food themselves so they’re children can have something to eat.
- Emergency food relief providers fill an important function for people in crisis but they are not the answer to food insecurity.
- Governments and the food industry can implement important strategies to help eliminate food insecurity in Tasmania.

Why eliminating food insecurity in Tasmania is important

Making sure all Tasmanians have regular and reliable access to enough safe and healthy food is common sense, and built on basic standards of human decency and the Australian value of ‘a fair go’. It is also important because:

- Food insecurity is harmful to children’s health and wellbeing: Children who don’t have access to enough healthy food - and whose bodies and minds are still growing are more likely to have health problems, cognitive and physical development issues, and difficulties with school. Food insecurity during childhood can have long-term impacts, increasing the
risk of poor mental health and chronic health problems, such as asthma, into later life.\textsuperscript{10,11} A study in 2010 found that children who went hungry at least once in their lives were 2½ times more likely to have poor overall health 10 to 15 years later, compared with those who never had to go without food.\textsuperscript{12}

- **Food insecurity is bad for adult health and wellbeing.** Adults who are food insecure may:
  - Feel generally unwell as their bodies aren’t getting the nutrition they need\textsuperscript{13}
  - Neglect self-care and the management of other health conditions\textsuperscript{14}
  - Feel stressed, anxious and ashamed, and become socially isolated, and develop mental health problems including depression\textsuperscript{15}
  - Experience dental and oral health problems\textsuperscript{16}
  - Go on to develop diet-related diseases such as heart disease\textsuperscript{17}, diabetes\textsuperscript{18}, some cancers\textsuperscript{19}, asthma\textsuperscript{20}, epilepsy\textsuperscript{21} and other health conditions such as overweight and obesity.\textsuperscript{22,23}

- **Food insecurity costs us a lot:** Based on studies conducted elsewhere, the additional cost to the Tasmanian healthcare system resulting from food insecurity has been conservatively estimated at approximately $60 million per year.\textsuperscript{24} For people experiencing marginal food insecurity the cost is $18.6 million per year, and $40.5 million for people experiencing severe food insecurity.\textsuperscript{25} Food insecurity is not something we can afford to do nothing about.
Myth # 1: “No one in Tasmania is going without food.”

**Truth:** Too many Tasmanians are going without food and they can’t afford to buy more when they run out.

Between 30,000 - 50,000 (6-11%) Tasmanians may run out of food and can’t afford to buy more when they run out.\(^{26, 27}\) In 2011-12, more than 12,000 Tasmanians skipped meals when they couldn’t afford to buy more.\(^{28}\)

**Truth:** Food insecurity affects Tasmanians from many different walks of life.

“*The face of hunger is diverse – male, female, both young and old, single and in families, students, employed and unemployed as well as retired people.*”\(^ {29}\)

Tasmanians who may find it particularly hard to access healthy food are:

- **Households with low incomes** including people receiving Centrelink payments (Concession Card Holders and the unemployed).\(^ {30}\) They often have a reduced ability to buy enough healthy food because there are many other living costs such as housing, transport and bills, which drain the household budget
- **Single parents** and their children, particularly if they rely on Centrelink payments\(^ {31}\)
- **Children 0-14** who are living in poverty\(^ {32}\)
- **People with a disability or chronic disease**\(^ {33}\) because they may have difficulty carrying shopping and their medical expenses reduce the household food budget\(^ {34}\)
- **Households without a car**\(^ {35}\)
- **People experiencing housing stress.** These are people living on low incomes and who pay more than 30% of their household income on rent or mortgage repayments\(^ {36}\)

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**People at risk of food insecurity: The Tasmanian story**

- More than one third of the Tasmanian population receive government income support payments
- 17% of Tasmanian families are single parent families
- 16% of Tasmanian children aged under 15 years are living in poverty
- 23% of Tasmanians are living with a disability
- 1 in 10 Tasmanian households do not have a car
- 1 in 4 people on low incomes experience housing stress
- Tasmania as a whole is regarded as a rural state with some areas classified as remote
- 4% of the Tasmanian population identify as Aboriginal. 44% of Aboriginal adults were in the lowest income quintile in Tasmania in 2008
- 16% of people were born outside of Australia. 23% of total migrants to Tasmania are refugees and asylum seekers
- More than one-quarter of Tasmanians reported there was no public transport service available in their area.

References for this section are listed at the end of the document.
• People living in areas which rely on small general stores, or who do not have any shops at all within walking distance\(^{37}\)
• Aboriginal people\(^{38}\)
• Refugees and other migrants for reasons relating to income, visa restrictions, culture and language\(^{39}\)
• People who don’t have access to public transport.\(^{40}\)

“In Tasmania, 27% of children in Launceston do not have access to healthy food”.\(^{41}\)

Having enough good food to eat is a basic human need but it’s not as simple as it sounds.\(^{42}\) Food insecurity is a complex problem, and just because someone is a single parent, or doesn’t have a car, doesn’t necessarily mean they are going without healthy food.\(^{43}\)

Similarly, unemployment is the major contributor to poverty, which in turn puts people at risk of food insecurity. However, it is also possible to have a job and still be living in poverty. In these households a wage may be earned but it may be only 30% above the poverty line. It is estimated that one in five poor Australians are in paid work - this is sometimes called the ‘working poor’\(^{44}\). It has been reported that working poor families are now the largest single group seeking emergency food assistance. Alarmingly, it is said that this group is more in need than unemployed and single parent households.\(^{45}\)

Some things can also ‘protect’ people from food insecurity. For example, having a strong social support network can protect families from going without healthy food.\(^{46}\)

What’s important is that we recognise that people who are food insecure aren’t to blame for their situation and we acknowledge the role of the wide range of economic and social factors that lead to food insecurity. We will refer to many of these factors throughout this paper.
Truth: A major reason people go without food is not enough income.

There are a number of reasons why people can’t access enough healthy food, but not having an adequate income is one of the main reasons. Many people on low incomes are well aware that they are eating unhealthy food. They just can’t afford to eat better.

The picture below shows that Tasmanians with the lowest income are the most likely to be food insecure.

Figure 1: Food insecurity levels (the percentage of people who ran out of food and could not afford to replace food) by household income in Tasmania, persons aged 18 years and over (Tasmanian Population Health Survey 2013)

Some people might find this surprising - for example, a 2010 study that explored what the wider community believes about poverty found that only 17% of people thought families living in poverty were going hungry. Even less - around 10% - identified poor diet and low quality food as an outcome of poverty.

But the truth is people who are unemployed and/or on a very low income are 3 to 12 times more likely than people on higher incomes to run out of food and have no money to buy more. This places many Tasmanians at risk of food insecurity because recent data has shown that:

- More than one-third of the Tasmanian population received government income support payments
- Tasmania had a lower labour force participation rate than the national average and the second highest long-term unemployment rate in Australia in April 2016
- 15% of Tasmanians lived below the poverty line (50% of median household income which equates to a disposable income of less than $400 per week for a single adult).
A report from 2014, identified that Tasmanian households with an annual income below $22,000 didn’t have enough money to purchase basic goods and services, and that this forced families to ration spending on essentials such as electricity, food and health services while becoming increasingly dependent on debt and charity.\textsuperscript{57}

Organisations such as the Tasmanian Council of Social Service (TasCOSS) and Anglicare have long argued that government income support payments such as Newstart and Youth Allowance are inadequate to cover the basics such as food, rent, electricity, clothing, health care, petrol and other transport costs.\textsuperscript{58, 59}

Research has shown that in 2009-10 high income households spent three times the amount on food and beverages than households in the lowest income groups.\textsuperscript{60} A family dependent on government income support payments would need to spend around 44\%\textsuperscript{61} of their household income on food in order to eat a healthy diet (as defined by the Australian Guide to Healthy Eating\textsuperscript{62}) compared to 20\% for the average Australian family.\textsuperscript{63} In reality, an unemployed household can afford to spend on average just 17\% of their income on food.\textsuperscript{64}

**Truth:** When money is tight, food has to move down the priority list.

For people living on low incomes, money available for food is often pushed off the priority list.\textsuperscript{65} That’s because when there’s a limited amount of money to spend on all household expenses, food is often the only ‘flexible’ budget item – whereas many other items such as rent and electricity are fixed. Tasmanian research with people living on low incomes found that 97\% of participants had to prioritise expenditure on housing costs, electricity, and two or more other priorities (including debts and phone costs) ahead of expenditure on food.\textsuperscript{66} When the money is gone, people are often left to go without, ration, substitute poorer quality food or seek assistance from emergency food relief providers.\textsuperscript{67}

It doesn’t take much to push people over the edge. Research has found a strong link between people who are food insecure and an unexpected expense or event and large bills\textsuperscript{68} – this is sometimes referred to as ‘bill shock’. Foodbank Australia noted that “bill shock is highly prevalent in Australia and seems to be increasing.”\textsuperscript{69}

\[ \text{Food will be the last thing. They’ll make sure that everything else is paid and they’ll just make do on next to nothing for groceries or access emergency relief to get them by.} \]

\[ \text{Financial counsellor, Tasmania} \]
Myth #2: “Look at all of the fat people in the community...we don’t have a problem with food insecurity...we have a problem with people eating too much food.”

Truth: You can’t always tell if someone is going without food by the way they look.

For some people when they think about hunger, images of starving children living in Sub-Saharan Africa come to mind. It is true that people living in places where disasters like severe drought or conflict occur, often experience food emergencies that are ‘obvious’ to the outside world.  

However, food insecurity in our own communities does exist as we’ve seen in dispelling Myth 1, and what’s more, it’s often invisible. ‘Hidden hunger’ may not seem as extreme as starvation but it is none-the-less an urgent problem because children and adults aren’t getting the food and nourishment they need to live a healthy, full and productive life. What’s more, food insecurity can also exist even if a person is overweight. So people may be overweight or obese, and yet also malnourished.

“One in three Tasmanian kids are arriving at school without having breakfast - everyday”.

You can’t always tell if someone is going without food just from the way they look on the outside. For example, if children are going without enough healthy food they may have:

- A lot of absences from school due to sickness
- Difficulty learning and low school achievement
- Hyperactive, aggressive, irritable, anxious, withdrawn, distressed or passive/aggressive behaviours
- Difficulty in forming friendships and getting along with others
- Sickness such as sore throat, common cold, stomach ache, ear infection and fatigue
- Difficulty adapting to change and stressful or complex situations
- Short attention span and an inability to concentrate.

These signs may appear even if a child’s body weight may appear normal.

...because when a child does not get enough nutritious food

Hungry children ages 0-3 years cannot learn as much, as fast, or as well because not enough nutritious food “harms their cognitive development during this critical period of rapid brain growth, actually changing the fundamental neurological architecture of the brain and central nervous system”.

Reference: Cook J and Jeng K, 2009, Child Food Insecurity: The Economic Impact on our Nation - A report on research on the impact of food insecurity and hunger on child health, growth and development, commissioned by Feeding America and The ConAgra Foods Foundation.
Tasmanians ought to be very concerned about the high number of children who are experiencing or at risk of food insecurity. Research alerts us to important risk factors for childhood food insecurity that require urgent attention. For example:

- In 2011-12, Tasmania had the highest child poverty rates in the country – 16% of children aged under 15 years compared to a National average of 12%. The child poverty rate in Tasmania was highest in the Central Highlands council area and lowest in Hobart. 76
- Tasmania and the Northern Territory had the highest proportions of children at risk of social exclusion. Almost half of children in Tasmania were at the highest risk of social exclusion. 77
- In 2009, Aboriginal children were twice as likely to be developmentally vulnerable on one or more of the domains of the Australian Early Development index (47% compared to 22% for non-Aboriginal children). They were twice as likely to be developmentally vulnerable in relation to physical health and wellbeing compared to non-Aboriginal children. 78

**Truth: People who are food insecure are more likely to be overweight or obese.**

It may seem like a contradiction, but it’s true: being overweight and obese is more common among people who are at high risk of food insecurity. The risk of obesity is 20 to 40% higher in individuals who are food insecure. 79

Similarly to what was described in Myth #1, where the lower your income the more likely you are to be food insecure, when it comes to being overweight or obese the same holds true: the lower your income, the more likely you are to be overweight or obese.

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1 Social exclusion or risk of social exclusion occurs when individuals or groups face a number of problems such as joblessness, low income, low educational outcomes, lack of access to services and social groups, and poor physical and mental health.
The following picture shows that in Tasmania in 2009, twice as many adults who were obese lived in areas of greatest disadvantage than in areas of least disadvantage.80

Figure 2: Body Mass Index by socio-economic disadvantage (Socio Economic Indexes For Areas – SEIFA), population 18 years and over, Tasmania 2009 (Tasmanian Population Health Survey 2009).81

In 2013, obesity rates in Tasmania were highest among people who couldn’t find or were unable to work, those with primary school level education and Aboriginal people. Figure 3 shows the different rates for these groups of people compared to Tasmania as a whole.

Figure 3: Obese Body Mass Index (BMI) by selected population groups, Tasmania 2013, (Tasmanian Population Health Survey 2013)82

Why are Tasmanians who are food insecure also more likely to be overweight or obese?

An Australian study in 2013 found that people (who had gone without food in the previous 12 months) made food choices based on (1) satiety (‘basic’ foods valued for ‘filling up’), (2) having desired foods (‘treats’), (3) having sufficient food when money runs out (‘emergency supplies’) and
compensating for the social and psychological effects of disadvantage (‘comfort foods’). Other studies have also shown that people on low incomes tend to buy and eat more high-fat foods because they are cheaper and more ‘energy dense’ (these foods provide more energy per gram of weight than lower-fat foods). So in terms of immediate ‘value for money’ they may be thought of as being a better deal. The problem is, this type of diet is known to be directly linked with health problems.

“Low income earners manage their food income efficiently – yet in so doing, they greatly increase their risks of dietary-related diseases such as heart disease and some cancers.” However they don’t have a lot of choice.

While food insecurity and obesity often co-exist, one does not necessarily cause the other. Obesity among food insecure people occurs partly because they arise from the same social and economic issues, for example:

- Not enough income, limited resources such as poor housing and lack of transport – all of these things can make people more susceptible to obesity as well as food insecurity
- Easy access to high fat and high sugar foods – such foods are often cheaper and healthy food is more expensive and not always available to everyone
- Cycles of food deprivation and overeating – particularly for people who rely on income support and on emergency relief
- Social norms, role models and peers – foods eaten by families, in schools and workplaces can promote unhealthy behaviours as being acceptable
- Lower levels of education
- Exposure to marketing of unhealthy foods
- Reduced access to health care.

Truth: Diet-related health problems are a community-wide problem.

Although there are definitely certain ‘groups’ of people that are more at risk of diet-related health problems, on-the-whole, the Tasmania we live in places all of us at greater risk of such health problems. Being overweight or obese are risk factors for many chronic health conditions such as heart disease and some cancers. In 2011-12, more than 3 in 5 Australian adults (63%) were overweight or obese (70% of men and 56% of women). This includes 59% of people living on the highest incomes.

Fruit and vegetables are an important source of nutrition and dietary fibre, and not eating enough is a risk factor for stomach cancer, colorectal cancer and cardiovascular disease. In 2011–12, almost all Australian adults (92%) did not eat 5 serves of vegetables, and 52% did not eat 2 serves of fruit.
Myth 3: “It’s not the government or food industry’s job to influence what people put in their mouths.”

**Truth:** Food insecurity is not simply a lifestyle choice.

If you don’t have enough money or aren’t able to get to a shop to buy healthy food, no matter what drives your choices about food and healthy eating, it’s going to be difficult to feed the family a nutritious diet. In such situations people can lose the opportunity to make decisions that are good for health. It’s no longer entirely up to them – their situation is influenced by other factors. For example:

- How much income they receive from their employer or government support payments
- Whether the food supply system provides the town or neighbourhood in which they live with good quality food on a regular basis
- Whether transport is available to enable them to get to the shops when needed.

All of these examples impact on a person’s ability to buy good food. This is often referred to as the ‘food environment’. These days the food environment is sometimes described as being ‘toxic’, because even though the food itself is usually safe to consume, the world in which most consumers live makes choosing healthy food hard and choosing unhealthy food very easy. And that’s where governments and the food industry can help – they can improve the food environment to make healthy choices easy choices.

“None of these upstream causal factors are in the control of the child. Therefore, childhood obesity should not be seen as a result of voluntary lifestyle choices, particularly by the younger child. Given that childhood obesity is influenced by biological and contextual factors, governments must address these issues by providing public health guidance, education and establishing regulatory frameworks to address developmental and environmental risks, in order to support families’ efforts to change behaviours. Parents, families, caregivers and educators also play a critical role in encouraging healthy behaviours.”


What can governments do? Well for starters, they can:

- Increase income support payments for those in need
- Improve public transport
- Support families particularly during the first 1001 critical days of a child’s life
- Implement policies that limit the number of junk food outlets in a given area
- Encourage the production of local food for local communities
- Tax unhealthy foods
- Give takeaway restaurants incentives to offer healthier items.
And the food industry can:

- Modify food products to reduce added sugar and saturated fat content\textsuperscript{100}
- Support nutrition promotion programs in local schools and communities\textsuperscript{101}
- Accept a sugar tax on unhealthy high sugar foods\textsuperscript{102}
- Support businesses that provide affordable healthy food in local communities\textsuperscript{103}
- Limit junk food advertising and marketing to children.\textsuperscript{104}

“A 20% tax on sugary drinks in Australia could save more than 1,600 lives and raise $400 million per year for much-needed obesity prevention initiatives and reduce our healthcare costs by as much as $480 million over 25 years. A tax on sugary drinks should be a key element in a national strategy to combat poor diets, obesity and resulting chronic disease.”\textsuperscript{105}

The “nanny state” argument – that it’s not the government’s role to interfere - just doesn’t hold up. Just as they have done with hundreds of other issues – from safety standards for shower screen glass to compulsory wearing of seat belts – government laws and policies have an important role to play in protecting the public health of Tasmanians. Food security should be no exception.\textsuperscript{106}

Contrary to what you may have heard, Australians do support public health laws and policies such as taxing sugary drinks and a gradual ban on junk food advertising aimed at children and teenagers.\textsuperscript{107, 108} People are concerned that the food industry seems to have more say than the Government over the regulation of food.\textsuperscript{109}
Myth 4: “Everyone in Tasmania can get their hands on healthy food that doesn't cost too much.”

**Truth:** Healthy food is not readily available to all Tasmanians.

Tasmania has a reputation for producing high quality food and a wide variety of produce. Despite this there are many Tasmanians who do not have ready access to healthy food in their communities.

Research undertaken by the University of Tasmania in 2014\textsuperscript{110} found:

- **Access to the shops can be hard** – Of the 353 shops that sold healthy food across Tasmania (this includes supermarkets, general stores and fruit and vegetables shops) only 19 were located in the areas that Tasmanians with the lowest household income (lowest 1/3) live. So 5% of shops are located where 30% of Tasmanians live.

- **The type of shop in a community makes a big difference to the variety and affordability of healthy food.** The most affordable are the larger supermarkets and the least are small general stores. Travelling to a major supermarket is not possible for many Tasmanians. There are, for example, nine local government areas that do not have a large supermarket.

The table below shows that a family made up of 2 parents and 2 children might need to spend up to 41% of their income to purchase a basket of 44 pre-determined food items if they could only access general or convenience stores. However if they were able to get to a major supermarket they might only have to spend 23% of their income on buying the basket of food.

<table>
<thead>
<tr>
<th>STORE TYPE</th>
<th>2 parents (female and male age 44) &amp; 2 children (ages 18 &amp; 8)</th>
<th>Cost Range</th>
<th>% Income</th>
</tr>
</thead>
<tbody>
<tr>
<td>Major Supermarket (e.g. Coles, Woolworths, &amp; Supa IGA)</td>
<td></td>
<td>$311 - $413</td>
<td>23-31%</td>
</tr>
<tr>
<td>Minor Supermarkets (e.g. IGA Everyday, local supermarket)</td>
<td></td>
<td>$378 - $550</td>
<td>28-41%</td>
</tr>
<tr>
<td>General &amp; Convenience Stores (e.g. general, convenience and corner shop)</td>
<td></td>
<td>$404 - $560</td>
<td>30-41%</td>
</tr>
</tbody>
</table>

Please refer to the Appendix at the end of this paper for more information about the findings of this detailed study.

Not all general and convenience stores stocked the 44 food items. Only 35% of these stores stocked 80% or more of the basket items, so availability of healthy food is reduced.
Truth: People on low incomes have to pay more for food.

Tasmanian researchers have found that people who live in poverty pay more for their food than people with a greater level of disposable income – something they called the ‘poverty penalty’:

- People living on low incomes are paying more of their disposable income for a nutritious food basket
- They may pay more because of poor food outlet availability, meaning they have to shop at small local food outlets which have higher priced food
- They face higher costs because of the need to shop frequently and in small quantities
- They are unable to take advantage of quantity discounts
- They pay more because of the effect of poor access to transport
- They are unable to conduct thorough price searching due to restraints on time, income and transport
- They need to go into credit arrears to free up money to purchase food, resulting in a debt/pay day lender credit cycle
- They consume a less nutritious diet and so are exposed to a greater risk of chronic health problems.\(^\text{111}\)

Truth: Junk food is very easy to obtain.

Fast-food stores are now more accessible than ever, and the combination of more access and busier lifestyles has likely contributed to the increasing consumption of these foods. An Australian study found that households that are on low incomes may live in regions where fast food outlets are 2.5 times more accessible when compared with affluent regions.\(^\text{112, 113}\)

Fast food takeaways are more accessible than supermarkets and green grocers in Tasmania. Research conducted in the Hobart and Glenorchy local government areas in 2015 found:

- 54% of people in Glenorchy and 59% of people in Hobart live 800 meters away from a fast food takeaway, but
- only 26% of people in Glenorchy and 44% of people in Hobart live 800 meters from a supermarket or green grocer.\(^\text{114}\)

The maps on the next page illustrate the concentration of fast food outlets and supermarkets/green grocers in the Glenorchy and Hobart local government areas.
Figure 4: Map of Takeaways in Glenorchy and Hobart Local Government Areas (LGAs)

Figure 5: Map of Supermarkets & Green Grocers in Glenorchy and Hobart Local Government Areas (LGAs)
Truth: Healthy food is expensive in many places and for many households in Tasmania.

Numerous studies have found that healthy food is more expensive than unhealthy food - a diet high in fruit and vegetables costs more. An Australian study from 2014 found that a typical basket of healthy food cost people from the most disadvantaged neighbourhoods 30% more than those living in the highest income areas. Low income households would have to spend up to 48% of their weekly income to buy the basket of food, while households with high income would have to spend significantly less of their weekly income (9%).

On page 16, we outlined that the type of shop in a community makes a big difference to both the variety and affordability of healthy food in Tasmania. The Tasmanian Population Health Survey (April 2014) found that the main reason people don’t have the quality and variety of food they wanted was because it was too expensive (29%).

In a changing world where we face numerous challenges including climate change, population increases, diminishing oil supplies, resource scarcity and loss of land, it is not possible to make food available to all by keeping prices down. Rather food affordability needs to be changed by focusing on boosting incomes.

 Truth: There’s more to the story than meets the eye.

Expensive food and inadequate income together are a recipe for disaster when it comes to food security.

To enable someone to acquire healthy food, they need:

- An adequate income and food offered at a price that people can afford
- Having physical access to the food (i.e. having a means of transport and having a food outlet within a manageable distance)
- The shop or food outlet having a variety of healthy food available to choose from
- Access to good quality food
- Life skills - knowledge and skills on how to choose, store and prepare food
- Preparation and cooking facilities
- Access to culturally appropriate food
- Time
- ‘Self-efficacy’
- Social support and inclusion.

“Food insecurity results from a complex interplay of personal resources and the broader social and economic context, rather than from household resource constraints alone.”

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*Self-efficacy is the extent or strength of one’s belief in one’s own ability to complete tasks and reach goals.*
Myth 5: “They don’t care - they bring it upon themselves...these people are lazy and waste money on things like junk food, and cigarettes and alcohol instead of looking after their kids properly.”

Truth: Parents worry about their children when they are going without.

The suggestion that parents don’t care about their children is simply unfounded. Studies have examined how parents on low incomes manage food costs, and found that they were anxious, needed to use emergency food relief services and were very concerned about their children’s welfare.123

“Parents are trying to work out how to support their own families, you have got the bills coming through like Hydro, with the winter in Tasmania it’s taking more resources away from the family and people are struggling.”124

In 2013, an Australian study of 3,000 people accessing emergency relief and community support services found that more than half had gone without meals, and that often parents go without meals in favour of their children.125 A New Zealand study found that almost all parents from low income groups mentioned that their primary motivation (when prioritising their spending) was to do the best for their children.126

A two-week, snap-shot survey of over 400 clients of emergency relief and financial counselling services from around Tasmania in 2009 found that half of participants said that they always worried about whether they could afford to buy enough food for their family, and that the presence of children in the household was an important driver of concern about the cost of food and anxiety about food costs. Some study participants were also particularly stressed about special dietary requirements for children due to poor health, allergies or disability, as the foods they needed were more expensive.127

Truth: People on low income can be very effective at managing what they have.

Our judgements about people living on low incomes are often based on misinformed stereotypes portrayed in the media. But the truth is, many people living in poverty do have capacity for initiative and effort, they aren’t powerless and shouldn’t be excluded.128, 129 Several studies have highlighted the thrift, skills and nutrition-conscious behaviours displayed in households that are disadvantaged, and the ability of people to use creative coping mechanisms.130 A local study in 2009 found that many low income Tasmanians are very effective at managing what they have but it is simply not enough to cover the cost of essentials.131

“Efficient budgeting does not solve the problem of not having enough money to buy food....no matter how well they budget, the money won’t stretch to cover all their essential needs.”132
Studies have also found that not all people on low incomes eat poorly - some people appear ‘resilient’ (being able to cope) to poor dietary behaviours. These resilient people reported having higher confidence and ‘self-efficacy’ (belief in your own abilities) for eating a healthy diet and avoiding fast food.\textsuperscript{133, 134}

\textbf{Truth:} There isn’t sufficient evidence to support the idea that people who are food insecure waste money on cigarettes and alcohol.

An Australian study in 2012 found only a weak connection between food insecurity and the amount of money people spent on cigarettes and no correlation at all between food insecurity and spending on alcohol or gambling.\textsuperscript{135} In fact, studies have found that:

- Tasmanians spent smaller proportions of income on alcohol compared to other states and territories
- Households from the lowest income groups spent less on tobacco and alcohol than any other expenses (including housing costs, transport, health, clothing, personal care, education, recreation etc). In contrast, households from the higher income groups spent more on alcohol than on tobacco, personal care and education
- As a percentage of their total income, middle income groups spent more on alcohol and tobacco than those on the lowest incomes
- People on the highest incomes spent more on alcohol than people on the lowest incomes ($55.00/week compared to $10.00/week). Those in the lowest income bracket spent more on food than those in the highest bracket (17% compared to 9%)\textsuperscript{136}
- Unfortunately, harm from alcohol consumption is an issue of concern across all income groups in Tasmania.\textsuperscript{137}

Despite this, smoking in particular remains a significant issue for people living on low incomes. While households with lower than average income tend to spend about the same amounts on tobacco products as higher income households, average spending on tobacco products as a percentage of total weekly expenditure is higher among low income households.\textsuperscript{138} However, similarly to food security, whether or not someone smokes is influenced by a range of interwoven factors (including employment, mental health, education etc).\textsuperscript{139} Rather than scrutinising people about their expenditure because they’re on a low income and ‘should know better’, it is far more useful to develop a deeper understanding of the underlying factors that drive decision making and take action to address ‘the causes of the causes’.\textsuperscript{iii}

\textbf{Truth:} Tasmanians eat out less than Australians.

Research conducted in 2014 found that Tasmanians visited fast food restaurants less than any other state or territory in Australia. Tasmanians also ate in Quick Service Restaurants the least in Australia.

\textsuperscript{iii} ‘The causes of the causes’ are the ‘social determinants of health’. These are the conditions in which people are born, grow, live, work and age. These circumstances are shaped by the distribution of money, power and resources at global, national and local levels. For more information: http://www.euro.who.int/__data/assets/pdf_file/0005/98438/e81384.pdf.
and, together with South Australia, they ate the least take away food. However people on low incomes are less likely to purchase healthy takeaway foods mainly because of the cost associated with buying them. So it’s not simply a matter of suggesting that people are wasting money on junk food – the truth is, they can’t afford to buy healthy takeaway food. In fact, the amount of money spent on takeaways and eating out has been shown to increase as household incomes increases. It is also harder to come by healthy takeaways. Studies have shown that unhealthy food outlets are more concentrated in low-income neighbourhoods. Suggesting that people should just stay home and cook something instead is just unfair – everyone needs a break sometimes and they should be able to access healthy affordable food at such times.
Myth 6: “They could learn to cook and grow their own vegetables”

**Truth:** Knowing about healthy eating doesn’t necessarily lead to eating a healthy diet.

Knowing is not the same as doing. This saying is relevant for many things in life including the choices we make that will affect our health. In order to be able to make choices for good health, we need a whole lot more than just knowledge and skills.

A 2013 study in the United Kingdom involving parents of preschool children living in low income neighbourhoods found that parents often spoke about differences between how they would like to feed their children and the reality of what they were able to do in their circumstances. Often the practicalities of modern life got in the way. Time pressures and managing conflict over food choices between family members were common problems. The researchers concluded that the poor eating habits of many pre-school children may be less a case of ‘parental ignorance’, but rather the product of a range of coping strategies. Many parents can no doubt relate to this finding.

Similarly when it comes to gardening, a 2011 Tasmanian study found that lack of confidence in skill and ability wasn’t the problem – it was lack of access to land and a lack of long-term housing. Some people indicated that they did not have a vegetable garden because they did not have land to cultivate or they live in private rental properties with no, or a shared, gardens. Others were moving between properties and had lost gardens they had established when they moved; and others lived in situations where they feared a garden would be vandalised. Effort to promote affordable housing is an important strategy for improving food security.

Instead of just urging people to eat better food, there needs to be a better understanding of the environment in which these choices are made and action to change that environment - i.e. doing things that can make healthy choices easy choices like providing healthy food in school canteens, increasing income support payments for those in need, establishing farmers markets in local communities, addressing housing affordability problems and taxing unhealthy foods. ‘Interventions’ that focus simply on changing behaviours do not have the power to change any of the driving forces of food insecurity (such as inadequate income, poor housing, lack of transport, high food prices, lack of food availability, being of Aboriginal decent or a refugee). This requires political, industry and community working together.
“By itself, lack of knowledge of behaviour which improves or threatens health has a relatively small effect. The major effects are directly a result of the social and economic conditions. This means the educational efforts on the part of well-intentioned experts are unlikely to make much impact if a wide range of socio-economic factors remain unchanged. The socio-economic environment has a greater influence on the health status of the individual.”

Truth: Many Tasmanians love to cook and grow their own food.

Despite growth in the hospitality industry, home-cooked meals are still very popular in Australia. In 2009, Australians reported eating a home-cooked meal almost 4 out of 5 evenings (79%).

It is true that people aren’t cooking food at home as much as they used to – but that’s across the community and not just people living on low incomes. In fact, one study found that full-time working women on low incomes spent more time preparing meals than women who worked full-time and who were on higher incomes.

While research on home cooking skills in Tasmania – indeed in Australia - is limited, there are many media reports about Tasmanians’ ‘love affair’ with our locally grown produce.

In addition, a study of nearly 1,400 households across Australia found that one in two Australian households reported growing food including fruit, vegetables, herbs, nuts or eggs – either at home or via a community garden. Tasmanians (along with South Australians and Victorians) were the most likely to be growing some of their own food (59%). The two most common reasons to grow food reported by study participants included: to produce healthier food (71%) and to save money (62%).
Myth # 7: “They could always go to a food bank.”

Rather than challenging the social and environmental conditions that allowed food insecurity to take root in this wealthy nation, it would appear that Australia has responded in a manner that relies on benevolence and charity instead of rights and justice.161

Truth: Emergency food relief is not the answer to food insecurity – it’s a short-term solution.

Emergency food relief provides exactly what the terms suggest – food when people hit crisis point. Accessing emergency food relief is a last resort for people.162 What emergency food relief doesn’t provide is ongoing access to food for a healthy nutritious diet.

Many people may not know that emergency food relief providers exist163 but there are many in Tasmania and they provide an important service for people in need. A paper outlining a study of emergency food users in Victoria in 2016 found that charities help people survive and some users may, indeed, be unable to eat sufficiently without charity services. One participant in the study described it as, “… four bags of shopping that’s life or death to some people.”164

Accessing emergency food relief however isn’t a ‘normal’ way for people to obtain food – after all most people go shopping and prefer to choose their own food. This method of obtaining food can therefore make people feel ashamed and judged.165 What’s more, emergency food relief cannot make up for inadequate income – which is one of the most important reasons why people don’t have enough good food in the first place.

“A study of emergency food provision in Tasmania found a number of other factors to add to the argument that emergency food relief is not the answer to food security:

- There is limited funding for emergency food relief and demand exceeds supply

“Emergency food relief services were not established to ensure food security for individuals and families and such services cannot guarantee a sufficient, reliable, nutritious, safe, acceptable and sustainable food intake. Emergency food relief providers are limited in their ability to control the availability, quality and variety of the food they provide to their clients and many are limited in their capacity to enhance their client’s capability to acquire and use food (e.g. to address transport needs, enhance knowledge and skills, provide storage, preparation and cooking facilities, provide social support programs and operate 24 hour services).”166
• The food that is available varies greatly as does the quality
• Food may be unhealthy and some hold the view that ‘any food will do’
• Providers have difficulty assessing needs and sometimes judge people. Who can get emergency food relief and the assessment process to obtain food varies between services. There is no consistent approach to providing emergency food relief – some organisations give food or vouchers, some enforce limits around the amount of food and often how frequently it can be obtained, and others require recipients to participate in additional programs such as financial counselling
• Lack of transport and limited opening hours can prevent people from accessing emergency food relief when they need it.167

“We’ve stopped giving people advice because we recognise that the people we feed are the experts at coping with the incredibly limited resources they have. We feel advice giving is disempowering and condescending, and that really people should be admired for being good copers.”168

Truth: Emergency relief providers are under increasing pressure.

A review of Emergency Food Relief in Tasmania found that demand from community organisations for food products has increased over the past five years and that services are struggling to meet demand.171

“The likelihood of being granted effective emergency help was questioned, with some describing it as “… a lucky dip.” Qualifying for a food voucher, parcel, or meal may be totally at the discretion of the staff and volunteers at different services.”170

Foodbank’s Hunger Report (2016) highlighted that:

• Food insecurity in Australia is hitting crisis point
• Charities cannot cope and are turning people away empty handed
• It’s not who you think e.g. generation Y is almost twice as likely to experience food insecurity than the average
• It’s not taking much to tip some people into food insecurity
• Food relief provides immediate benefits for people in need.\textsuperscript{173}

“\textit{We’ve seen a huge jump in the number of people coming through...we have so many people and not enough food. There’s a whole raft of reasons (why people come to see us). We’ve had some ex-employees of Caterpillar come through who obviously haven’t found new work yet...Anyone who’s living on a pension is living below the poverty line and with winter coming up people have got heating bills to pay. We’ve seen the odd farmer coming through....someone came through and they said 'I have enough money to pay my medication or get food so I came here to get food so I can actually afford to pay for my medication.'}”\textsuperscript{174}
Concluding Remarks

Opening up the conversation about ‘hidden hunger’, as we’ve done in this paper, is important because it allows us to stop and consider what the research is actually telling us – instead of our opinions being informed by less rigorous sources of information. It helps us to recognise that food insecurity is a big problem in our state and there is no one stereotype that can portray the faces of Tasmanians going without healthy food. Increasingly – it’s not just those who receive income support payments from the government who are at risk of running out of food – it’s also working people who are struggling with the rising cost of living. Many Tasmanians are doing it tough.

Of particular concern is the high proportion of children in Tasmania living in poverty, who are at risk of or experiencing food insecurity. Without greater effort to address this issue, many of Tasmania’s children are being set up for a life of poorer health, wellbeing and developmental outcomes.

The fact that so many Tasmanians are struggling to put good food on the table is not acceptable. While the causes of food insecurity may be complex and contextual there is enough evidence to pave the way for action. Tasmania has made some important progress in understanding the area of food insecurity in recent years – as well as related areas such as social inclusion, the social determinants of health and the cost of living. The time is right to bring together stakeholders from across governments, the food industry, social service and health sectors, and the community to apply this knowledge and work towards eliminating food security in this state.
### Appendix

**Healthy Food Access Basket Survey - Food basket cost as a percentage of Centrelink income by households types**

<table>
<thead>
<tr>
<th>FAMILY TYPE</th>
<th>STORE TYPE</th>
<th>2 parents (female and male age 44) &amp; 2 children (ages 18 &amp; 8)</th>
<th>Single parent (female age 44) and 2 children (ages 18 &amp; 8)</th>
<th>Single Male (&gt;31 years)</th>
<th>Age Pensioner (age 70)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Range</td>
<td>% Income</td>
<td>Range</td>
<td>% Income</td>
</tr>
<tr>
<td>Major Supermarket (For example Coles, Woolworths, &amp; Supa IGA)</td>
<td>$311-$413.38</td>
<td>23-31%</td>
<td>$211.50-$284.33</td>
<td>20-27%</td>
<td>$98.67-$129.43</td>
</tr>
<tr>
<td>Minor Supermarkets (For example IGA Everyday, local supermarket)</td>
<td>$378.16 – $550.76</td>
<td>28-41%</td>
<td>$258.48-$377.89</td>
<td>25-36%</td>
<td>$119-$173.24</td>
</tr>
<tr>
<td>General &amp; Convenience Stores (For example local, general, convenience and corner shop)</td>
<td>$404.48-$560.67</td>
<td>30-41%</td>
<td>$280.30-$391.50</td>
<td>27-37%</td>
<td>$125.93-$173.52</td>
</tr>
</tbody>
</table>

Source: Costing data was derived from Murray S et al., (2014), Availability, Cost and Affordability of a Basket of Healthy Food in Tasmania, School of Health Sciences, University of Tasmania
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2 Australian Bureau of Statistics (ABS), 2015, 4364.0.55.009 - *Australian Health Survey: Nutrition - State and Territory results*, 2011-12, http://www.abs.gov.au/ausstats/abs@.nsf/Lookup/by%20Subject/4364.0.55.009~2011-12~Main%20Features~Tasmania~8: Around 5.8% of people were living in a household in Tasmania that, in the previous 12 months, had run out of food and had not been able to afford to buy more and 2.4% went without food when they couldn’t afford to buy any more.


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