

## Food aid supply chains rely on a surplus—here's what happens during a shortage

March 21 2023, by Carol Wagstaff



Credit: AI-generated image (disclaimer)

Many households in Britain have felt the impact of recent food shortages or, at the very least, noticed sparse shelves in the fresh produce aisle of their local shop. For people whose next meal may come from food aid, not a supermarket delivery, the impact is even harsher.



Prices of food and non-alcoholic beverages have risen nearly 17% in the last year. One in seven people are regularly skipping meals or going without food. Between April and September 2022, the Trussell Trust noted a 40% increase from the previous year in people seeking help from its food banks.

Food aid is more than just food banks. Community kitchens, social supermarkets and community larders are a lifeline for many people, providing food to those in need on a regular basis, rather than just emergency food aid. Crucially, they help people avoid the shame and stigma associated with using food banks that prevents some from seeking help.

These services are all part of the food aid supply chain, which relies on there being more than enough food. While conventional food supply chains move food from farms to grocery stores or restaurants, the food aid supply chain redistributes <u>surplus food</u> when it is no longer needed by those outlets.

The irony in the current situation is that the food aid supply chain relies on inaccuracies in the conventional supply chain when it comes to predicting demand. Farmers and retailers have to estimate what demand is likely to be at the point crops are sown. But if, for example, poor summer weather means fewer people are eating salad, there will be a surplus. Without food surplus there is no food aid.

Some retailers have arrangements to deliver their surplus to local food aid distributors, either direct to the outlets or via a centralized warehouse. Some food aid charities run a collection system with local stores who notify them when they have surplus, but this means someone with both time and a vehicle has to go and collect the goods. Food banks typically use the warehouse system so they can pack food parcels with the variety of food that they think is most needed, but other food aid



outlets tend to accept whatever they are offered and give users the choice of what they take.

Shortages of supplies from Spain and North Africa have resulted in UK charities who rely on food surplus having no vegetables to offer. This isn't a reliable system—it is unpredictable and insecure, and means poor people are often consigned to eating food that is approaching the end of its usable life, which is often nutritionally poor—assuming there is any food at all. Food aid users are driven towards a diet that is <u>calorie-rich</u>, <u>rather than nutrient-rich</u>. This adds to the burden of <u>diet-related health</u> <u>challenges</u> such as type II diabetes and cardiovascular disease.

Our current food system is showing its vulnerability to all of us, but it is actively failing the poorest in our society.

## **Choice and empowerment**

Most of us take choice for granted—how often is the question "what shall we have for dinner tonight" asked in your house? Even people relying on food aid for part or all of their diet want choice and yet often lack this basic empowerment.





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Our research in the Food Systems Equality (FoodSEqual) project has shown that most people who access food aid aspire to eat more healthily, but they can't afford the right ingredients, or they don't have access to them where they get their food. When asked "what do you eat" by our community researchers, the response was often: "Whatever I can get."

Sometimes choice is born out of necessity. The "free-from" aisle is essential for those with food allergies and intolerances. Yet these products are more expensive than standard versions. In interviews, people with dairy intolerances told us they would buy skimmed milk, knowing it would make them unwell, as the least worst option that is affordable compared to dairy-free alternatives.

Shortages of standard foods, such as vegetables, are forcing grocers and



corner shops to increase prices of these items. For people on a limited budget who have intolerances and allergies, even less money is available for buying these more specialized "free-from" items.

## **Food inequity**

People living in poverty face injustice at every turn. They are far more likely to suffer from poor physical and mental health, disability, food allergies and have a shorter life expectancy.

Households in <u>poor areas</u> spend 50% <u>more of their income</u> on food compared to the highest socioeconomic groups. Average households spend 14% of their income on food in 2021 (up from 11% in 2020), but the lowest socioeconomic class is spending upwards of 18% on food.

About 8% of deprived areas in the UK are considered to be <u>food deserts</u>, meaning that 1.2 million people in low income areas are estimated to be living without easy access to affordable and healthy food. And <u>a healthy</u> <u>diet is an expensive diet</u>.

Over the past year, FoodSEqual researchers have recorded an increase in the number of working people experiencing poverty, and those who were "just about managing" no longer able to manage without food aid.

People living in poverty are constantly having to make difficult choices: whether they can afford to put the heating on, how they can get to work cheaply and how they are supposed to get to a healthcare appointment during working hours.

There are some, including <u>elected politicians</u>, who insist that if people living in poverty would only learn to grow their own food and cook from scratch they would be able to live both cheaply and healthily. Attitudes like this ignore the reality of the food aid supply chain, and show



precisely why transforming our food system has to be done with the input and experiences of the people who live in it.

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