

Food Security in South Australia

Community Survey Report

July 2024



Food Security Community Survey

The Community Survey was open for seven weeks from late April to mid-June 2024. The survey was designed to provide an outlet for anyone who wished to share their own or their community's experiences of food insecurity and their ideas for what should be done about it.

The Community Survey data was then combined with the data from the Lived Experience Focused Conversations to support the work of the Food Security Community Panel. (This report focuses on just the survey data.)

The survey asked participants:

- Have you experienced food insecurity?
- Have you seen others in your community experience food insecurity?
- How has this impacted on you or others?
- What should be done about it?

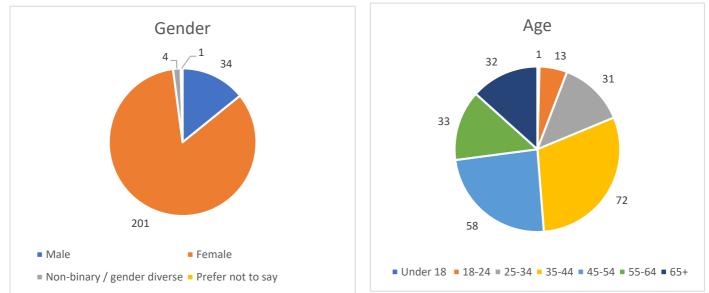
The following report summarises the responses to the survey. The summary is arranged under the six dimensions of food security. After each dimension we have selected stories shared by the participants that illustrate and provide further context for the key themes and ideas. Some of the stories capture more than one issue and these are presented at the end of the report.

Community Survey Demographics

Who participated, at a glance:



Age & Gender:



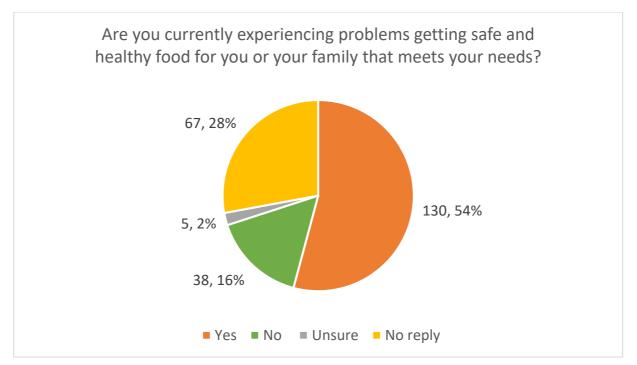
Participant Locations

Responses were received from participants in 160 different suburbs/towns. The highest number of responses were received from:

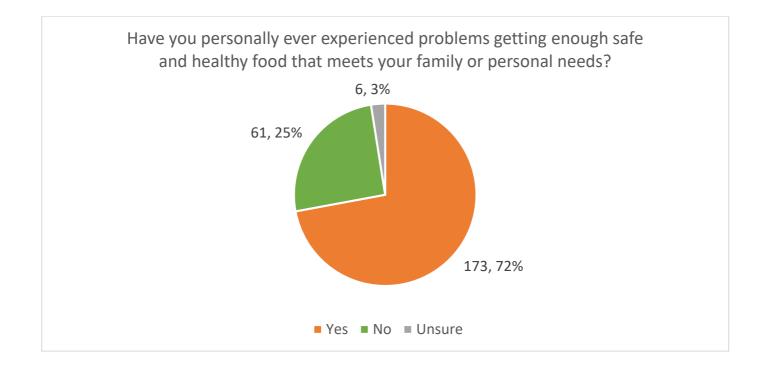
Morphett Vale	7	Salisbury East	4
Adelaide	6	Seaford	4
Flagstaff Hill	4	Aberfoyle Park	3
Goodwood	4	Happy Valley	3
Modbury Heights	4	Magill	3
Mount Barker	4	Paradise	3
Munno Para	4	Prospect	3
Port Lincoln	4	Ridgehaven	3

Experiences of food insecurity:

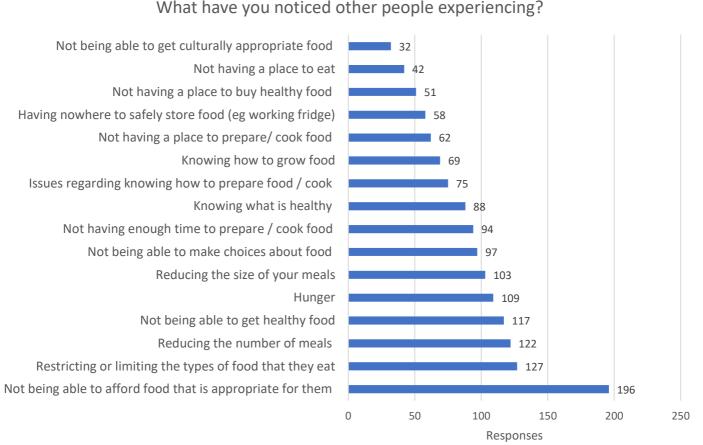
Participants in the survey were asked to share whether they themselves or others they knew were currently or had ever experienced food insecurity. 206 (86%) respondents knew other people who had experienced problems getting healthy food that met their personal needs. 130 respondents were currently experiencing problems themselves (see note re response numbers for this question below) and 173 respondents had experienced problems getting food at some point in their lives.



NOTE: This question received less responses than the question on whether people had ever experienced food insecurity as it was added to the survey after it had been open for a number of days. The "no reply" category mostly represents the number of people who had completed the survey before it was added.



Challenges at a glance:



What have you noticed other people experiencing?

Other issues mentioned included:

- Lack of motivation to cook, •
- General expense of food, •
- Having to choose between medicine, food and bills, .
- Being too unwell to cook, •
- Choosing cheaper, carb heavy options, .
- Not being able to drive to collect food,
- Poor quality of supermarket fruit and vegetables
- Families not knowing how to plan meals for a week •
- Parents going without meals to feed their children
- Reliance on support workers, who may not have cooking skills.
- People using money for drugs and alcohol rather than food.

Key Insights

The below tables bring together the key insights that were heard from the survey, organised using the six dimensions of food security.

Availability People have sufficient quantity and quality of food available, supplied through domestic production or imports.		
Challenges	What is needed?	
 Access to food People are struggling to access the food they need. Fresh food markets are often only open on limited days and not after working hours. 	 Community grown food Locally grown community food – fruit trees and food plants on verges, space and support for community gardens. Support and incentives to grow your own food at home. Provide food growing knowledge and seeds/plants. Facilitate produce swaps or donations for excess home/community grown produce. Remove legal barriers to do this. Schools could grow food and donate or sell off excess produce cheaply. Commercially grown/sold food More support for farmers to provide healthy foods at lower costs. Increase production. Support for more local independent markets and green grocers, open more often. Opportunities to buy direct from farmers to save on costs. Protect productive land (food producing land) from development. Give incentives to sell and buy locally (e.g. tax breaks or other incentives) Access to local food or a food bank in the area Co-locate affordable food shops together so people can just visit one place. 	
 Healthy food for healthy lives Many are skipping meals or not eating enough healthy, nutritious food. Unhealthy eating causes and compounds physical and mental health issues. People with special dietary requirements are finding it especially difficult and 	 Special dietary needs People particularly with particular dietary requirements should have subsidised access to appropriate foods. (e.g. gluten free food) Review gluten free labelling laws and testing requirements. Mandate may contain labelled The government could provide funding to businesses to pay for gluten free testing. 	

expensive to access the foods they Initiate food aid services dedicated to providing food aid for need. medically required diets i.e. allergies, celiac disease, diabetes, low • Weight gain due to unhealthy foods, or fodmap weight loss due to insufficient food. • Children are struggling to concentrate Access to fresh, healthy food and experiencing behaviour issues at • Fresh unprocessed food must be accessible and affordable for all school due to poor diet or insufficient people. food. • Use levies/taxes on unhealthy and processed foods to subsidise • Unhealthy food is often cheaper and on healthy foods. sale more often than healthy food. • Concession discounts on healthy options. Vegetables and meat are very • More fruit, veggies and variety and available all week, not some expensive, especially in rural and remote days. • Put clear health warnings on all junk foods and in fast food outlets. areas. • People are very time poor, working long • make sure food banks are stocked with food that isn't out of date hours leaving little time to prepare • Cheaper options for prepared healthy meals. healthy meals. • People with medical conditions often find it difficult to cook and prepare healthy food. • Fruit and vegetables at supermarkets go off quickly. Waste • Supermarkets should be required or incentivised to donate excess • Supermarkets are more concerned with food rather than throwing it out (see France's food waste laws). the look of fruits and vegetables, rather • Find ways to sell "not quite right" produce at a discounted price. than the costs for families. • Supermarkets offering seconds on vegetables and meats

Community Stories

Difficulty managing my diabetes because I cannot always afford the food that best needs my requirements of very low carb diet.

Having Coeliacs in the household. Emergency food relief does not cater. No free bread. Only fruit and veg can be issued to us. Cost of grocery is so high now and Coeliac safe food is so expensive.

We have to do 2 types of meals to accommodate daily the needs of family who are disabled having the prices go so high means often someone (me) goes hungry

Supermarkets consistently not having multiple vegetables in stock, e.g. tomatoes large and cherry out stock for weeks at a time, no lettuce, no broccolini or similar etc again and again, or others being priced out of budget to feed a family. I have my children week on week off, so I target my budget on healthy meals during their week and eat less than required and poorly when alone to keep costs down, like relying on toast for dinner each night, 2 minute noodles or protein shakes for lunch and relying on any workplace foods to share like bikkies and milo to help curb hunger

Access

People have both physical and economic access to food (personal or household financial means)

Challenges

Cost of living

- Cost of living pressures are no longer just impacting on low-income groups. Even people who are working are struggling with rising grocery, fuel, rent, medication, mortgage, school and utility costs. People living on Centrelink payments or low incomes are struggling to survive.
- Many are having to choose between bills and food, leading to them skipping meals or to reduce meal sizes. Parents are skipping meals to make sure their children are fed.
- Some people are resorting to stealing food or taking food out of bins to get by.
- Some are having to choose between medical expenses and food.
- Families are struggling to put healthy foods into lunch boxes. Some kids are missing out on going to school.
- Homelessness is increasing.
- Families are spending a lot of time shopping around for deals.

What is needed?

Supermarkets

- Regulation of supermarkets including capping prices/profits for staple foods (fruit / vegetables / protein / dairy) and for special diets such as Coeliac.
- Reduce/eliminate supermarket price gouging, ensure suppliers get a fair price for their produce.
- Reducing the duopoly of Coles and Woolworths.

Cost of living relief

- Raise Government payments to at least the poverty line (or create a universal basic income). Consider creating an extra food supplement to income support for disabled/sick people, the elderly, single parents, and the working poor.
- More help with living expenses such as rent, fuel, interest rates, electricity and water.
- Boost incomes or decrease taxes.
- Connecting families to financial counselling

School food

- Implement daily breakfast clubs across the public school system, consider the cost/benefit of providing school lunches to all students as occurs in some other countries. Could charge for this food based on the ability to pay. Or provide more support for parents to provide healthy lunchboxes.
- Breakfast at school should be fruit, eggs, porridge and not just toast and never cereal! We need to get back to basics.

Cheaper healthy food options

- Local councils could work with local producers to offer discounted local produce.
- More low-cost grocery services and pre-made or ingredient pack meal options such as social supermarkets and food co-ops that have no access criteria. Support these services to be better promoted.
- Fund community cooking clubs to cook bulk meals together so individuals can buy heavily discounted meals.

 Food delivery In regional areas not everyone can travel out of town to access cheaper food if it is not locally available. Not everyone is able to leave their home and not everyone has access to a car. It can be difficult to transport food on public transport. 	 Offer more delivery options for cheap healthy fresh and pre-made food. A simple delivery service with some ingredients and recipe ideas to go with it so not only do you get some assistance with food but you also get some ideas of what to do with it. Increase public transportation. Mobile food hubs are effective in distributing food to areas where it is difficult to obtain it normally. It also aids families who are restricted by lack of suitable transport.
 Finding support services It can be hard to know what services are out there and what they offer. 	 Public media in Facebook groups telling people where the support is. Reduce media fear mongering and focus on emergency food relief (it's there, and great) Better awareness of grow free carts in the community. More community education regarding what is available and where.
 Using support services Support services are experiencing high demand for their support. People are resorting to unconventional methods to get food e.g. presenting at hospital as they know they will get fed. People are needing to line up for assistance and support is often "first in best dressed". School food support is often being used by students. It can take a lot of time and effort to get a referral to a Foodbank. Some people are experiencing judgement at support services, meaning they don't return. Support services often do not have foods needed for special diets e.g. gluten free or sensory needs. Support services are often only open at limited times – usually not out of working hours. 	 More foodbanks, open more often, in more areas (especially South of the city and in rural areas) and without requiring referrals. More support for local food services (beyond food banks), such as soup kitchens and feeding programs that serve food to vulnerable people. If the federal government won't increase the income rate, fruit, vegetables and staples should be free for those on low incomes, provided by higher funded community services. More food vouchers (or something like food stamps) that can be redeemed at any supermarket. More equitable distribution of support (rather than first in best dressed). Hubs for people experiencing homelessness including food and facilities for washing. Don't exclude people who are not on concessions and Centrelink payments. Encouraging pay it forward and helping those in need.

Community stories

Living in Community Housing even though our rent is much cheaper than in the Private Sector we have two rent increases a year opposed to only one if renting privately. When the Govt increase the rent subsidy to help offset the cost of living and rent, my Community Housing Provider takes the lot leaving no extra monies in my budget to spend on healthy food. This practice by Community Housing providers needs to be reviewed by Government and altered as a pensioner these increases in Rent Subsidy are of no benefit in helping us to access safe healthy food. Only one small IGA supermarket here. It's expensive and has a small range. I can't afford to eat solely from [my local store]. The quality of fruit and vegetables isn't always good. The store has a \$50 minimum shop to access free delivery. I can't afford too.

Living rurally means fresh food quality is low and prices are high, I often have to travel over half an hour to access a decent supermarket and fruit and veg store. There is also NO EMERGENCY ASSISTANCE available locally and the closest one (again over half an hour drive away) is open one morning a week and the one time have accessed it staff did assist me but were extremely rude telling me I need to get a better job (I am a single parent who works part time during school hours) so I have not returned again

Healthy food like vegetables in Australia is too expensive. Limited access to the local market - too far away or only from Tuesday to Saturday early afternoon; hard to buy something good after working hours.

I live alone in the outback food is so expensive \$15 blueberries and \$10 cabbage unaffordable I had buy \$2 cans of soup to eat

I have been skipping meals which as a diabetic is dangerous, choosing between food and medication, something no one in Australia should ever have to do! Eating crap processed food because it's all I can afford, how is it right I can buy a nasty \$2 [fast food] burger but a healthy salad will cost \$15 or more?

I am constantly stressed about finances and how to feed my family cheaply. It puts so much unnecessary stress on me and it's hard to protect my children from it.

I've had to ask my parents who are both in their 60s if I can borrow money for food. I shouldn't have to do that. I feel like I'm failing at parenting and life.

Often community organisations offer bread and sweet bakery items in abundance and limit fresh fruit and veg, sometimes even the fruit and veg is old bruised or mouldy. Other items such as toilet paper, soaps, tooth brushes, washing up liquid and clothes washing powders/liquids are often unavailable or you have to pay for them. Honestly, I need more than 2 rolls of toilet paper for a family of 4 for 1 week ... and 3 apples doesn't last my 2 children a week either.

I work during the day and can't make it to any of the places that help plus I don't have a license or car to get there anyway.

Utilisation		
People have appropriate food skills, knowledge, and preparation/cooking facilities.		
Challenges	What is needed?	
Cooking facilities	Offer low cost white goods (could provide interest free loans).	
People experiencing homelessness have	• Provide community kitchens for people experiencing homelessness.	
nowhere to store and prepare healthy	Require landlords to provide images of the current state of the	
food. They cannot use most of the food	property they are letting when registering bonds, so the government	
at support services.	can see the state of some kitchens.	
People on low incomes cannot afford	Provide a hot water tap that is easily accessible which would enable	
whitegoods.	homeless people to prepare packet soup, noodles or hot drinks.	
 Inadequate housing and health services 		
result in overcrowding and spreading of		
communicable diseases.		
 Some rental properties are poorly 		
maintained.		

Cooking and nutrition knowledge

- Some people do not have good budgeting skills to feed themselves healthy food economically.
- Some families rely on take away due to not knowing how to cook. This impacts their budget and health.
- Some families / people have unhealthy relationships with food and guilt is common.
- Initiatives for cooking classes, nutrition classes, growing food and education about what to eat and how to make filling, healthy meals on a budget (could be done at libraries, councils or community centres). Positively delivered and addressed with adequate funding.
- Meal ingredients packs and recipe ideas to go with it.
- Education in schools including growing your own food, cooking and nutrition. Sharing food at school to promote a positive relationship with food.
- A booklet of ideas of how to stretch food.
- More health promotion initiatives advertising the benefits of eating healthier foods for wellbeing and reduced cost of medical expenses.
- We used to have OPAL officers at Council Obesity Prevention and lifestyle who would encourage healthy eating, cooking and physical activity. Bring this program back. Local, accessible and affordable resources are needed for our community.
- Access to tasty quick easy recipe ideas.
- More funding for trained nutrition professionals (i.e. Dietitians) who focus on the holistic approach, rather than labelling people as unhealthy or obese without offering people appropriate supports and education within the community. Collaboration between nutritionists and health care providers.
- More education is needed regarding meat alternatives

Community stories

When I was food insecure I was also unemployed. The only rental I could afford didn't have any bench space or cupboards, only a standalone cooker and an old wooden set of drawers instead of cupboards. I couldn't afford a full size refrigerator so I bought a small mini fridge second hand that previously was used in someone's garage for drinks. It didn't have a functional freezer, so I had no way to store frozen veggies or cook in bulk and store frozen meals. There wasn't enough space to have many fresh veggies or raw meat either, and the nearest supermarket was a 25 minute walk away (wasn't driving because I didn't have money for petrol or bus fare). The meat and fresh milk often spoiled quickly because the fridge wasn't always cold enough, so I skipped meat for a while and would get powdered milk or long life milk to try to stop wasting money and getting sick from spoiled meat and milk.

Mental health problems are also a barrier for me. I know what's healthy, know how to cook, but amotivation stops this from happening. I can't find the motivation to plan and shop ahead or cook healthy meals. I end up binge eating cheap junk food (meaning I am constantly gaining weight), or wasting money on takeaway (meaning I don't have money to cover other expenses).

Agency People or groups have the capacity to act independently, to make decisions.		
Food Choice	• Appropriate tags with information about that food: e.g. where it	
• Food choices are restricted when there is not	has been harvested/collected, if has been chemically treated,	
enough money. Many are eating very plain	where packaging took place, nutrition.	
meals, with no variety.	More cheap, healthy food options for shopping.	
• It is hard to make informed choices about	• Food vouchers that can be redeemed at any supermarket.	
food when critical information is not	Similar to food stamps in the USA. That way people can buy	
available.	what they need from a large selection.	
 Support services can have limited options 	• Greater funding to charities so that families have a reliable	
available for food choices, often only tinned	source of healthy food, including fresh fruit, vegetables and	
and dry foods or older fruit and veg.	meat / proteins.	

Community stories

Cost of living is going up and income is staying the same, choosing cuppa soups and toast, homebrand frozen food like pizza or wedges and chips fish fingers or 2 minute noodles pasta and sauce with frozen vegetables. Homebrand cereal. Milk, butter and cheese has all gone up. Do we pay our bills on time or get laundry liquid or pay rent and not get shampoo and other toiletries, or worse not get prescription medication. All decisions I've needed to make.

We can no longer afford to eat red meat and vegies, bread are at ridiculous prices so we go for whatever we can get that's the cheapest.

I don't see my friends and family as much as I don't want them to be uncomfortable and feel obligated to pay for food and drinks. I'm hungry all the time. I am stressed and overly emotional. My periods are more painful and less reliable. I have trouble staying awake. I'm worried about feeding my family and feel like a failure.

It's just a matter of choosing between do I want this, or good food? Other nice things keep getting bumped aside so good food is affordable.

A good diet is the first thing to go when I am unwell, and I have been extremely unwell consistently for years now. This is in stark comparison to the COVID supplement era, where my partner and I were at our healthiest (healthiest during a pandemic, go figure!)

I was well because not only could I afford my rent, expensive medications and other basic healthcare, but also because I had a few niceties I haven't had for some time: a hair cut, a tube of moisturiser and -- so importantly -- the occasional dinner at a local restaurant, and occasional take out. These really helped us eat well consistently, as it took the pressure off of needing to spend time cooking every day. It also got us out the house on occasion. We don't get to go out like that anymore, ever. The extra time not being spent cooking allowed us to focus on more important things, like the full-time uni we now struggle to do even part-time, and the meaningful healthcare-oriented volunteer work we did prior to my developing immune system disease.

Sustainability Food system practices that contribute to long-term regeneration of natural, social and economic systems, ensuring the food needs of the present generations are met without compromising needs of future generations.		
Challenges What is needed?		
 Food support services Services struggle to get enough food to meet demand. 	 Relaxation of food regulations to provide more opportunities for community and businesses to donate food. Councils providing food boxes. More donations to food banks. Locally accessible charities to access foodbanks. Greater funding to charities so they have enough food. Big supermarkets could give local schools or churches more fresh food. 	

Community stories

I used to sometimes shop at a community not for profit for centre, but over the past year have found that their shelves are becoming barer and barer, I guess because donations have dropped/need has gone up.

I worked with refugees and low income young adults for years. Local students often complained about food security. Some from other countries shared recipes for high protein, low cost rating. Lentils, pasta, vegetarian ideas. Tasty, flavoursome options. Growing food is not really an option for modern people. Not only are back yards too small, but water, and care factor make this improbable. Central market stalls sell vegetables cheaply just before closing. But you have to be there at the right time.

Stability			
People are protected from crisis and shocks, which ensures the other dimensions are attainable at all times.			
Challenges	What is needed?		
Complex personal challenges	 More support for people with chronic illnesses. 		
 Long term chronically ill people have higher costs (medical and pharmaceutical) than a regular people. Domestic and family violence can severely impact on family finances and affordability of food. Food insecurity can result in an increase in domestic abuse. 	 More work to prevent family and domestic violence and to support people experiencing it. 		

Community stories

Between all of our illnesses, we struggle with extreme fatigue at the best of times, meaning on top of other symptoms, just cleaning the space to cook is too hard a lot of the time. This is a terrible shame as we are excellent cooks with a lot of knowledge about the healthiest of diets; further, we know and aspire to articulate all of the factors that lead to good health and longevity: meaningful experiences, socialisation, exercise etc. Alas, this combination of severe poverty and both having chronic mental and physical illnesses robs us of these opportunities. Not being able to afford that which keeps our heads above water -- medicine, basic healthcare, simple pleasures -- creates a terrible, compounding feed-back loop that we haven't been able to claw our way out of for almost two years. Instead, we live completely not in accordance with our wishes; we get unhealthier by the day.

Other Issues				
Other key insights which emerged from the survey.				
Challenges	What is needed?			
 Stigma / judgement and mental health People cannot afford to eat out or to feed guests and so are missing out on social interaction and becoming isolated. It is very stressful to be constantly worrying about how to feed your family. Many experience feelings of guilt, shame and embarrassment. This prevents some people from seeking help and impacts on the mental health of others. Anxiety, depression, fear, low self-esteem and other mental health challenges are common. Poor diet impacts on mental health and energy levels. Some feel let down by society and like nobody cares that they are struggling. Food insecurity can lead to an unhealthy relationship with food, including hoarding and eating disorders. Relationships can break down due to food insecurity. 	 Access to fruit, vegetables, healthy options without judgement or criticism ASD friendly options in supermarkets like Drakes Foodland does which is very inclusive, (except not many families are out with their ASD kids at that time of the night so if possiblemore time options) 			

Community stories

When I was on maternity leave and my hubby was working part time we were only just covering our mortgage. We were eating food that we wouldn't usually (I'm gluten intolerant) because it's all we could afford. Lots of cheap, low nutrient foods. Was really depressing, socially isolating and we felt real embarrassment. We are educated people (3 undergrads degrees and a masters between us), yet couldn't afford proper fruit and veg. We couldn't afford to eat out with friends or get takeaway (I understand this is a luxury for many anyway) and was really lonely.

I was homeless as a teenager and relied on the Salvo's 'shop' in the city to get basics. Before water fountains, I was always thirsty and drank from puddles. During periods of unemployment and 'rental crisis' I relied on friends to bring food for my children and I went hungry. I ended up with severe malnutrition, anorexia and organ failure which put me in a coma, hospitalised for 5 months and in a wheelchair for 2 years. I now have osteoporosis and chronic health issues.

I am overweight with multiple chronic health issues to the point of being unable to look after myself at all, ended up bedbound. I have been working on losing weight to get mobile enough to bare basic look after myself which I have successfully done, with lots to go. The inability to afford more than \$50pw for food & house MISC shopping items has left me unable to lose weight & is flaring my other health issues. This has a flow on affect with mental health & hard work wasted. Skipping meals, inability to exercise effectively & often manipulating medication doses to not live completely without as some medications keep me alive. Sitting in silence with no heating or cooling to keep a roof overhead & buy food.

Existing initiatives or actions

Participants in the survey listed the following initiatives or actions that are improving their access to safe, healthy and appropriate food:

Community initiatives

- Co-operatives for fresh fruit and vegetables. Pooling resources with family and friends.
- Sharing cooked meals and excess produce with neighbours
- Growing their own food
- Community gardens
- Swap carts / food carts
- Sourcing produce from local farmers (directly or at markets)
- Personal budgeting
- Buy nothing / pay it forward groups
- Buying specials in bulk (if you have the money)
- Buying imperfect fruit and vegetables
- Making cheap meals with what is available
- Social supermarket
- Shopping around to find specials

Community education, programs and initiatives

- The recent social media campaign with suggestion to swap unhealthy foods with clear images of examples.
- Kickstart for Kids
- Education in schools and ELCs about healthy eating and exercise
- ACCC raising inquest into price gouging
- Community kitchens
- Education on shopping and cooking on a budget, buying seasonally, in bulk and freezing, creating new recipes with leftovers, recipes that use all the parts of food, food safety. Some include free creche. (e.g. Fast & Fresh packs).
- Star ratings on food
- Government program called HIPPY (Home Interaction Program for Parents and Youngsters)
- Tour of central markets with a cooking demo

Business initiatives

- Local store subsidising vegetables and fruit
- Google their cafe had a traffic light system. Green is healthy. Yellow is moderately healthy, but should be eaten in moderation. and red is unhealthy to be eaten rarely.
- Reward dollars at Woolworths
- Free fruit for kids at the supermarket
- Bakeries donating unsold products (e.g. Baker's Delight)
- Workplace breakfast club
- Buy SA
- Food labelled with origin/packaging/distribution info.
- Healthy Choice

Support Services

- Food vouchers from charities
- Free food trucks / kitchens, hampers and charity programs (e.g. Family Wellbeing Centre, Love Out Loud, Salvation Army, Anglicare, Vinnies, AC Care, Fred's Van)
- Churches (e.g. Christian Community Care)
- Food pantries in various locations with meals and dry goods, other staples (Campbelltown Uniting Church, People's Pantry Old Reynella, Woodcroft Library and Community Centre, Hackham Community Centre, Puddle Jumpers, Childcare centres, Baptist Care Food Hub)
- Breakfast/lunch programs in schools
- Some agencies have provided budget cooking classes (e.g. Community Foodies)
- Some agencies that provide healthy, frozen take away meals
- Local community centres
- Cashless debit card
- Preventative health initiatives in the community
- Government subsidies
- Food rescue programs (e.g. Ozhartvest, Foodbanks, local Councils, Second Bite)
- Heart and Soul
- DSP food parcel services
- Meal delivery for elderly people
- Loans without interest for migrants

International Examples

- The government in Italy provides financial subsidies for people diagnosed with medical conditions.
- France's food waste laws require large supermarkets & grocers to allow access to their food waste.
- In NZ there were a few free school breakfasts and free school lunches, so kids aren't hungry when they're trying to learn.

Community Stories

A selection of longer stories shared during the survey from the community.

I've been working on my Masters for two years and my partner [is a gig worker in the food delivery industry]. He has a chronic health condition that doctors have been unable to concretely diagnose, but he is very unwell and no one is helping us no matter how much we keep returning to the doctors. I have my own condition that makes it hard to work while doing a full-time study load. The government gives me ~\$300 per fortnight. It sounds counter-intuitive but it's actually cheaper to buy crappy salty food than buying bulk fresh vegetables and doing cook ups. We avoid meat. We try to go to the farmers market which is a bit cheaper, but there are transport issues sometimes too. It's just exhausting. And everything is so expensive.

I choose to eat healthily and so choose to buy fresh food products to eliminate ingesting too much salt, sugar, additives, preservatives and GMO' foods. This is becoming increasingly cost prohibitive. Whilst there are choices out there to be purchased of organic and clean fresh foods the marked increase in price from the alternative product can be up to 40% more. This results in either having to choose an inferior product or limit spending in other areas to direct more to the household grocery allowance. (Since COVID this has becoming increasingly so). As one example a dozen eggs that are organic and free range can cost anywhere from \$8 to \$12, whereas barnlaid/cage free can be bought for around \$5.

I feel that in choosing to buy, and prepare at home, ingredients that are fresh; free from preservatives and additives etc it is costing me more. And in choosing to eat healthily, along with choosing to be active, my family rarely needs to rely on the health system, yet we are also paying a premium amount for private health insurance. So we lose again. It seems that if you want to eat junk, become obese, suffer from a myriad of health issues as a result of unhealthy life choices and clog up the overburdened heath care system you are rewarded with a variety of concessions. How about putting a tax on junk food stuff and junk outlets; subsidising farmers so that fresh food is more economical; teach kids at school how to cook healthily; have free community based courses to show how to cook healthy meals; put health warnings on all junk substances and in fast food outlets.

Restricted ability to buy healthier food, mainly fresh meat, fresh fruit and fresh vegetables due to cost of living constantly increasing (especially since COVID) and price gouging from supermarkets (further impacting greengrocers and small businesses). A punnet of blueberries is currently \$10.00 at the greengrocer and slightly cheaper at the big supermarkets, 500gm of (3 star) beef mince is close to \$7 for 500gm and chicken breast (normally the cheapest meat protein option) is almost \$10 a kilo, previously \$7 a kilo in 2018. Whilst frozen and tinned fruits/veg are a good substitute and they contain most of the same nutritional content, there is a big difference and this impacts peoples mental health as well (not that they cannot afford the products, but that they cannot eat what they want).

After catching Covid in June 2022 I've been left too unwell to work. I'm surviving on jobseeker (with medical certificate) which is an unliveable income. Living on jobseeker forces you to rely on charity and to go without basics like food and medicine. My jobseeker goes 1st into keeping a roof over my & my sons head. Then utility bills get paid. As I'm trying to recover and be able to return to work someday I have lots of medical and pharmaceutical bills. My medicines cost me \$100 per week out of pocket. There are no PBS alternatives to what I need to take. Whatever money is left over (which is usually very little) is for food. We have cut back, lowered the quality of food we eat (only meat we usually can afford is mince) and buy only what's on special. We shop at a food clearance warehouse for grocery items too. One of my health conditions, Mast Cell Activation Syndrome, requires a special diet to manage it, which makes buying food on a small budget even more difficult. I need to eat gluten & dairy free and low histamine. These are not food readily available

through community food pantries and charity. If I don't stay on this diet I end up in severe pain, vomiting, and with diarrhea. Life is extremely tough & cruel living on Jobseeker.

Numerous occasions, I've been on hold for over 5 hours to try and get an appointment. You need money to access the services either via phone call at 9am which appointments fill up fast and it's only limited where you can go for help if you're [not from a specific multicultural community]. Some of the appointments get taken by [people] that also have the option for other food organisations we cannot access due to not being of [a member of that multicultural community]. Many humans are at breaking point and many times it has been unsafe for my children to be in these places. A virtual access may help in these situations as many cannot access transport or get to the appointment. Once at the appointment you get given bags of cup of noodles multi grain bread, weetbix, random canned good for example beetroot and lentils, pasta, maybe some pasta sauce and vita weet stuff basically things the kids won't eat anyway and aren't going to help with lack of iron, b12 etc. The bags are quite heavy, especially if using public transport with children. Fortunately I drive which does make access a lot easier. I've personally lost 27kgs over the past 2 years and struggle to stay above the 60kg mark for a 5.7foot female. I've lost my appetite due to numerous times of starvation as a homeless youth and now struggle daily with eating issues. The whole system needs a look at the motel accommodation situation is extremely stressful and disheartening. Thank you if any human actually took the time to read this

Then I had a bad back injury and broke my foot in a bad fall, and at the time I was not entitled to government support. I couldn't stand for long in front of the cooker so I ended up buying three pizzas from [a pizza store] on their cheap Tuesdays and eating 1/2 pizza per day for 5-6 days (I think it was \$30 delivered, which worked out to \$5/day). It was one of the only foods I could fit in my tiny fridge. I was so miserable, and I felt so ashamed when I explained to my GP at one point how bad things were for me. I was living on credit cards. I didn't feel like there were any services I could access for help accessing healthy food. I wasn't eligible for refugee assistance and I couldn't drive to the Foodbank. When I finally could start working again I was able to afford a normal sized fridge and that made a big difference, but it was still a terrible kitchen to try to prepare any food in. even though I eventually started working and when recovered from surgeries could stand up and prepare my own foods, I worked two jobs to pay off my credit card debts and then felt so tired I didn't have much energy to make healthy food, but I also think because I skipped breakfast for a long time my metabolism slowed down and when I started eating three meals a day (because I could afford cereal and real milk again) I gained a lot of weight. I am very fortunate to now be mostly recovered and able to work full time and make a reasonable income, and also recently purchased a house with my partner. The rent at my old place has subsequently gone up over \$200/week in only two years. I don't know how single parents on Centrelink can actually afford to house and feed themselves and their kids. It's also not the farmers benefiting from the record profits made by [big supermarkets].

When I was at university as a young person, I couldn't afford to eat much. I would daily go to various friends on a rotation to eat at theirs. Mostly we could only afford two minute noodles, rice, and a fancy dinner was box macaroni and cheese with cheap sausages and a tin of tomatoes. When my husband and I returned to SA in 2008 from overseas neither of us could get a job. We were forced to live with an auntie who was the sole bread winner for a family of 6. We had to make do with the cheapest bbq sausages, boiled pumpkin and frozen peas almost every night for 6 months until we finally got jobs. There was breakfast cereal for lunch. It was a terrible time. Now again, we are struggling, even though we own our own house with an affordable mortgage, I've been chronically ill with long COVID and unable to work. 2022 and 2023 were ok, we were managing carefully on one income (of course no centrelink if you have a partner) by cutting out all nonessential spending- no holidays, no new clothes, only one vehicle, etc. A string of unforeseen financial stresses and the cost of food has meant that we just can't get back on top of our finances. Particularly insurances have gone up so

much and I have so many specialist doctors, prescriptions and even the GP stopped bulk billing. There has only been option to cut- food. At first I just stopped buying so much fresh produce. Then I stopped shopping every week. Now it has been three weeks since I last bought food and I went out and bought only a bag of onions and apples and a dozen eggs. We are now relying on onions as our fresh food. My husband is a white collar worker who has a middle management job as the Asia-Pacific safety advisor to an international company, but his income isn't much over the Centrelink cut off. We don't have any children. I can't imagine how people are managing with their huge mortgages. I'm also very lucky that my husband is a supportive partner. But the fact that I can't have any social, wellbeing or financial support of any kind because I have a partner gives me enormous stress. It's not lost on me that I can never leave him and I have to do whatever I can to keep him happy because if we are struggling this much with his income, how destitute would I be if I tried to leave?

Poverty is a political choice, so our politicians choose hunger -- and the long-term consequences, including the economic (e.g., on health systems), if that is all they want to care about. The cost of doubling welfare payments wouldn't be a huge budget item compared to others in the federal budget. It would be much, much smaller than the huge concessions and hand-outs to corporations and their wealthy, land-hoarding beneficiaries that the budget "has room for"". Fixing support systems of welfare and healthcare gives us a chance to take the first strides to being able to care for ourselves, starting with what we eat. The combined impact of poorly insulated rental properties and an inability to afford heating and cooling/electricity bills just further harms our health directly (e.g., below 18 degrees contributes to cardiovascular disease) and indirectly, because not only is it largely impossible to cook in deadly heat, the freezing cold's seizing impact on my joints similarly makes things hard-to-impossible. So, overhauling the construction and rental/property industries to have better eco standards and further improving our access to renewable energy would play a role in improving diets -- if coupled with higher incomes and lower medical costs, at least. I should note: having to choose between food, heating/cooling and medicine is the definition of destitution. You categorically can't eat well when destitute. The only solid solution is to lift people out of poverty.

I'm reliant on a disability support pension as my main form of income, and have high health expenses related to my disability. Instead of prioritising healthy food, I resort to buying what is cheap and discounted - at my local supermarket that is most often ultra-processed foods or foods close to/past their used by date. I used to sometimes shop at a community not for profit for centre, but over the past year have found that their shelves are becoming barer and barer, I guess because donations have dropped/need has gone up. Mental health problems are also a barrier for me. I know what's healthy, know how to cook, but amotivation stops this from happening. I can't find the motivation to plan and shop ahead or cook healthy meals. I end up binge eating cheap junk food (meaning I am constantly gaining weight), or wasting money on takeaway (meaning I don't have money to cover other expenses). I feel uncomfortable going to a food bank - am I deserving? Other people are doing it tougher than me. I wish Centrelink payments provided sufficient income for us to meet our needs, and that the Medicare system covered the true costs of living with chronic health conditions. In the long run, that would save the government money, because individuals would be in a better position to look after their bodies and their health.

Shortly after I migrated to Australia I became ill. I couldn't work more than a few hours per week, and I also wasn't eligible for an income support payment under special circumstances (I tried). My partner was a student at the time. So, for about three years we lived off of a combination of one income support payment, our self-employment income (running an eBay shop online), and the charity and generosity of others. Not having food that met our needs (e.g. food intolerance and allergies) was a constant issue. After rent was paid, we sometimes only had \$50-70 for food for the week - not an easy feat when one bag of gluten free flour cost about \$8-10. A huge amount of our time had to be sacrificed to just

getting enough food to eat. We visited food pantries, although often we would walk away with nothing but a few pieces of fruit and some potatoes, because there was nothing else there that we could eat. We stopped going because we worked out that it was costing us as much in tram fare as we were getting in food (and the food was old and halfway off by then). After that, we turned to dumpster diving. We got caught and yelled at more than once, but overall this was our most successful means of getting food. We stuck to non-perishable things, and hardy fruit and veg that could be washed and peeled. That was how we supplemented our food budget for a long time. The whole thing was incredibly demoralising. Both of us were trying our best to make better lives for ourselves. By the time this period of our lives ended, my partner had an honours degree and a full ride PhD scholarship. I was working at a small non-profit and doing a master's degree (using student loans from my home country) to increase my employment prospects. It was getting sucked into a black hole; the farther we fell, the harder it was to get out. The fact that we did is half incredible persistence and half pure luck. When I moved here with my partner after graduating uni, I didn't intend to fall ill and be temporarily disabled. My partner didn't intend to become my caretaker and my financial support network. It just happened. If it could happen to us, it could happen to anyone.