



## **Improving individual and household food security outcomes in South Australia**

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## Organisational Background

AnglicareSA has been working for the community of South Australia for over 156 years. Our 1,800 staff and 700 volunteers support approximately 58,000 people each year across disability, foster care, aged care, youth, parenting, financial literacy, new-arrivals, Aboriginal, emergency assistance, homelessness and mental health services.

We are here for every South Australian in need, and our work is guided by the five values of Integrity, Compassion, Stewardship, Equity and Servant Leadership. Providing approximately 100 Community Services, AnglicareSA has a deep insight into the depth and breadth of need facing individuals and communities, and the emerging trends across the Government and not-for-profit sectors.

### Organisational Experience – Food Security

AnglicareSA has provided Emergency Relief services in South Australia for more than 20 years. In 2016-17, we distributed approximately 200,000kg of food to 8,100 South Australian households – approximately 31% of these were 'new' to AnglicareSA. The sheer demand means we are often 'turning away' up to 40% of people in any week.

AnglicareSA's Food Barn in the Elizabeth Mission provides approximately 24,000 free warm meals annually. Also at this site, AnglicareSA runs the Northern Community Food Hub in partnership with FoodbankSA to ensure the local Playford community has access to affordable, quality groceries. AnglicareSA also has relationships with BidVest, Oz Harvest, Second Bite, Coles, Woolworths, Bakers Delight, churches and individuals who regularly donate food items to our Emergency Relief services.

AnglicareSA's Emergency Relief services are reinforced through co-location and delivery with AnglicareSA's suite of financial services<sup>1</sup>, which strengthen the financial capability and resilience of approximately 3,000 families annually.

#### 1.1. What would a successful collaborative and integrated charitable food system look like in SA?

AnglicareSA believes that systemic challenges like poverty, food insecurity and chronic homelessness can only be addressed through integrated support models. This enables individuals and families to access a broad range of supports to address the often multi-dimensional nature of the issues experienced (including the 'root causes' as referenced in the Discussion Paper). This does not discount the merit of specialist food security services like Foodbank SA, Second Bite and OzHarvest, but validates their importance within a broader system of services needed by individuals and families experiencing food insecurity.

The merit of an integrated approach is demonstrated by the following case study, from AnglicareSA's northern community hub (Elizabeth Mission), which provides emergency and food relief alongside specialist homelessness, mental health and financial counselling services, which are well placed to link with additional services as required.

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<sup>1</sup> including Commonwealth Financial Counselling and Financial Capability, Financial Counselling for Problem Gambling, Financial Counselling Capability and Resilience Hubs, State funded Financial Counselling, No Interest Loans Scheme, Money Minded, Money Business and Saver Plus.

### **Case Study: Better Outcomes through Integrated Service Provision**

*John, an Aboriginal man in his late 50's arrived at Elizabeth Mission seeking help with clothing, as his only set of clothing had been damaged in an assault on him the previous night. AnglicareSA's emergency assistance volunteer assisted John with clothing and food, and invited him to have a warm meal at the FoodBarn. The volunteer recognised that John had a range of other needs, including housing, health and finance. John was introduced to a financial capability worker and to the client engagement worker from the homelessness team who worked together to address his various needs. As a result, John has been housed in housing he can afford and which is suited to his health needs. John also received an Aged Care Assessment Team (ACAT) assessment and is eligible for a home care support package which AnglicareSA's Aged Care services are providing*

*By volunteers and staff working together, drawing on all of our expertise, John's life has been turned around from being homeless, with no medical or care supports in place and ongoing financial stress. John's health needs will now be met, as through the medical and ACAT assessment process his Motor Neurone Disease has been recognised and appropriate supports are in place to reduce the number of falls he has been having, the lack of nutrition in his diet, appropriate medications and ongoing care support.*

#### **2.1. What role might food relief programs play in supporting clients to move beyond a reliance on food relief?**

AnglicareSA believes that food relief programs should be linked with community development and/or service programs to provide more intensive support as needed. Light touch services are renowned for their challenge in engaging people, thereby, reinforcing the benefit of co-located and integrated service provision.

*AnglicareSA employed a financial capability worker in the Elizabeth Mission's Food Barn to provide case management support to those using the service. 12 months on, the worker has built excellent relationships with the people who come to the Food Barn, and is achieving significant success in connecting them into more services and supports.*

To maximize food relief efforts, people on low incomes and in poverty need ongoing access to subsidized, nutritious food. The Food Centre concept in Gepps Cross and Davoren Park provide a much needed and valued service to the community, and could be considered as an ongoing investment/expansion option by the Government.

There is also scope to innovate the food offerings available, such as developing meal packs with individualized ingredients and simple instructions, and connecting users to community initiatives and programs such as free local cooking groups.

Currently, AnglicareSA's Northern Community Food Hub is only accessible through an assessment process which conducts a financial health check to identify issues that may be affecting an individual's ability to be financially independent. Whilst AnglicareSA believes it would be beneficial to explore more flexible gateway options, supply issues would need to be addressed. Currently, up to 40% of people presenting to AnglicareSA's emergency relief services are 'turned away'; a more coordinated approach to service delivery could help address this bottle neck.

## **2.2. What additional services or supports do clients need to become independent of charitable food relief? If these supports already exist, how can we improve access for clients?**

This is an ongoing challenge which requires both systemic reform and more effective service delivery and policy.

AnglicareSA believes there is a clear gap in current service delivery for a Case Coordinator position, to support improved upfront screening, assessment, client:staff/volunteer matching and linking with other services. This could support more sustained client engagement and service outcomes. Achieving more integrated and effective service delivery within light touch intervention services such as food relief, particularly with no paid staff positions or a professional workforce is not viable. Furthermore, in view of escalating behaviours presenting at sites, it is too high risk to rely on volunteers (without the necessary training and supervision) to provide case work to clients.

To achieve better integration, we need to build the capability of services to better assess and connect clients to the right supports when they need it. Due to the high level of barriers clients experience, referrals alone are often ineffective – by investing the time to build rapport and trust we can support better customer engagement and advocacy in line with their needs.

Examples of the relationships underpinning AnglicareSA’s Emergency Assistance and Financial Wellbeing services include:

**Outreach** (weekly or fortnightly) to over 21 schools, community groups and centres, including:

- Adelaide Magistrates Court,
- Elizabeth Rise Community Centre,
- Eyre Regional areas, every two-three months
- Centrelink (4x week)
- NACYS
- Junction Community Centre
- Parks Community Centre
- Womens and Childrens hospital
- Hutt St Library
- Holden Hill –AnglicareSA
- Eastwood Community Centre, TBA
- Hutt St Centre
- Louise Place
- Gawler
- Aboriginal Transitional Housing and Support Service (ATHOS) Adelaide
- North East community centre
- Lake Windemere
- Picket Fence
- Stables Christian Centre
- Aldinga Children Centre

**In-reach services:**

- Welfare Rights Clinic (supporting community housing, legal aid etc)
- Financial practitioners, supporting clients with tax returns, superannuation consolidation etc.

**Preferred priority access relationships:**

- Domestic and family Violence Outreach  
Catherine House

**Co-location:**

- Financial Counselling, Microfinance programs, Homelessness, mental health, community development/connection services, counselling, family support, youth services, clean needle program.

### **3.1. how can we support better health and nutrition outcomes for people in receipt of charitable food relief?**

By working closely with soft entry point organisations, natural networks and early connection/identifier organisations such as schools, early childhood services, community centres etc, it is possible to start affecting a cultural shift. Integration with community development services is also key, as they are well placed to connect people, deliver place-based services designed and driven by community, and drive key topics on behalf of the local community by working across community, local government and stakeholder agendas.

### **3.2. Is there capacity to improve the nutritional quality of food donated to charitable food relief services? What are the barriers, and what support would be required to overcome them?**

From AnglicareSA's experience, everyday donors are receptive to and welcome guidance on how they can offer 'goods and services' which are both valued and needed by service recipients and clients. Organisations like AnglicareSA facilitate this on a small scale, however, the South Australian Government may be well placed to coordinate a campaign or drive promoting these key messages.

Organisations like FoodBankSA are also well placed to coordinate large scale procurement of staple food items like milk, bread etc, and achieve greater value for money and strategic distribution.

Infrastructure limitations for appropriate food storage often also limits the range of food products front line services are able to supply to the community. Most food relief is provided through centre based sites. Often these sites are limited in the range of food they can store by space, number of and quality of cold storage units and ability to safely handle fresh produce, dairy and meats. Equipping these sites appropriately would improve the nutritional offer available.

Alongside of this issue is the need for consideration for mobile food relief services with a similar range of product as available at sites (fresh fruit and vegetable, chilled dairy, frozen meats, pantry stock). AnglicareSA as a large emergency relief provider is not able to resource mobile emergency relief services – which is a gap in the service delivery, as fringe rural communities, people experiencing social phobias, disability and chronic health conditions are not able to access the site based service models easily.

### **4.1. what do you see as the major issue/s faced by the charitable food sector?**

Demand exceeds supply: AnglicareSA's Emergency Relief services distribute approximately 200,000kg of food annually. Capacity is limited, with the service regularly needing to turn people away. This is a fundamental issue, particularly as Emergency Relief services are largely funded by charitable organisations, which is becoming increasingly unsustainable, as demonstrated in Case Study 2.

**Case study 2: AnglicareSA's Inner city Emergency Relief Service**

*AnglicareSA's inner city ER service contributes approximately \$3.20 (\$528,400 annually) for every \$1 spent by DSS annually (\$164,000), representing a 222% return on investment for every \$1 invested by DSS. This excludes the enormous financial value of volunteer labour, as illustrated in Table A.*

*AnglicareSA fundraises to employ 2.5 FTE, pay for office space and infrastructure and contribute \$164,000 towards food/materials etc (\$ for \$ matching with DSS). We also coordinate the recruitment, police checking, training and management of 143 volunteers who provide essential service delivery support. Approximately 450 households access ER through this site every month.*

It is time that the ER model should be recognized as an important professional service and tendered accordingly. The current expectation by Government for providers to deficit fund programs, could potentially put key ER contracts at-risk going forward.

<b>Table A. Emergency Relief Magdalene Centre</b>		
<b>Service component</b>	<b>DSS \$</b>	<b>AnglicareSA \$</b>
Foods, groceries, goods.	\$164,000	\$164,000
Staffing		\$200,000 to employ 2.5 FTE
Volunteers		\$114,400 for training, police checks and recruitment for 143 volunteers(baseline training includes Manual Handling, Child Safe Environments, Emergency Relief Training, Concessions training)
Site infrastructure (rent, access, operational need etc)		\$50,000 per year
<b>Sub-total</b>	<b>\$164,000</b>	<b>\$528,400**</b>
<b>ROI</b>	<b>222%</b>	

*\*\* excludes the value (financial savings) from volunteer labour*

#### **4.2. What is Government's role in developing and maintaining SA's charitable food system? How and by what basis should Government make funding decisions in this system?**

Government's role should be to facilitate solutions in the communities most in need, by investing in innovation, collaboration and areas of acute unmet need. Examples could include trialling a case management service within Emergency Relief services and/or a 'Food Centre' ( Gepps Cross model) in the Playford region, in partnership with a specialist food procurement organization such as FoodbankSA and a community services and development organization such as AnglicareSA to provide the professional support and service linking.

#### **4.3. Is there a role for the sector in advocating for the right to food security and building awareness around the determinants of food security? If so, what is it?**

Most definitely. Food security is inherently linked to systemic issues such as poverty, intergenerational disadvantage, cultural and racial discrimination etc. SACOSS could be engaged to work with the sector to collate research and grass-roots experience to inform policy development and advocacy. The sector is also well placed to develop a pilot focused on the social determinants of health, by working in partnership with local and state government and academic institutions.

#### **4.4. What might appropriate activity and/or outcome measures look like for:**

##### **4.4.1. Building skills and capacity to facilitate independence?**

- Linking food relief/security services with professional services, such as AnglicareSA's model of Financial Capability workers supporting Emergency Assistance and the Food Barn.
- Integrating food relief services into community hubs/centres to connect people to broader services.
- Increasing the volume of accessible and nutritious for more food recipients.

##### **4.4.2. Improving health and nutrition outcomes?**

- Working earlier and more actively with schools, early learning centres, community groups,

hospitals, maternal health wards, as well as acute services (e.g. homelessness services)>

- Continuing to expand on specialist procurement initiatives such as FoodbankSA's staple procurement program and it's co-location with Adelaide Produce Markets.

**4.5. Is there anything else you would like to comment on ?**

AnglicareSA welcomes the opportunity to participate in further discussions with the State Government and sector to continue to explore options to improve food security in South Australia.