

# The Legislative Council Legal and Social Issues Committee Inquiry into food security in Victoria submission from Greater Dandenong City Council

## About Greater Dandenong

Greater Dandenong is a culturally diverse community in Melbourne's southeast suburbs with over 150 nationalities calling Greater Dandenong home, making us one of the most diverse municipalities in Victoria. Home to one of the largest populations of refugees and people seeking asylum in Victoria Greater Dandenong is the number one municipality on the SEIFA scale for disadvantage.

Community based organisations are seeing increasing numbers of people requiring food relief due to the cost of living and affordable housing crisis. It is acknowledged that food relief is often the entry for people seeking assistance and has in the past been an emergency response to a person's situation. This is no longer the case data collection conducted by Council showed 67% of food relief recipients within the municipality were receiving food relief for more than one year. Food relief is not a solution to food security, innovative solutions are required to create food security for the most disadvantaged across Victoria.

## Recommendations

The Greater Dandenong City Council welcomes the opportunity to provide this submission to the Legislative Council Legal and Social Issues Committee Inquiry into food security in Victoria. Council recommends the Victorian Government:

- Commit to an inclusive food security strategy, use frameworks that promote diversity, equity and inclusion and recognise the right to healthy food regardless of the ability to pay.
- Take a regional approach to food relief linking place based organisations to excess food supply from manufacturers and farms within their areas decreasing transportation costs and food mileage.
- Protect agricultural land in Victoria to maintain sustainable local food supply, healthy communities, and safeguards against future shocks, biodiversity decline and climate change.
- Develop culturally appropriate healthy eating education material via a co-design process with bicultural workers and community.
- Develop culturally appropriate education material to assist community to understand what food security means.
- Empower local government to lead participatory development of community food systems via provision of funding and supporting resources.
- Support First Nations communities with policy and resources to advance their goal for food sovereignty.
- Make food more affordable by allowing the Essential Services Commission (ESC) to regulate supermarkets. The ESC could set maximum profit margins on essential grocery items.
- Continue to resource school breakfast clubs with criteria for provision of healthy and culturally appropriate food. Link these programs to culturally appropriate education for parents experiencing disadvantage breaking the cycle of dependence on food relief.
- Advocate to Federal government for an income first approach to food security by increasing income supports to above the poverty line.

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- Advocate for improved food labelling enabling community to understand and make healthier food choices
- Add additional taxes to foods that have proven to contribute poorer health outcome.

### Rationale

#### *Food Insecurity and the Promotion of Affordable, Healthy Food*

The 2020 Population Health Survey found that 13% of residents of Greater Dandenong had run out of money to buy food at some time during the previous 12 months, the highest level in Victoria and more than twice the state-wide figure of 6%. The 2023 VCOSS poverty maps show the Victorian poverty rate stands at 13.3% with greater Dandenong sitting at 18.34% with 33% of children in Dandenong North living below the poverty line.

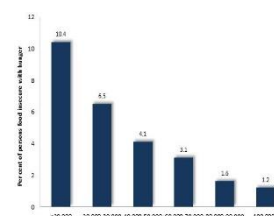
Further reports document a high prevalence of food insecurity and dietary insufficiency among refugees and asylum-seekers; sole-parent families; younger and older people; occupants of rental households; young mothers; homeless people; those with alcohol or other drug problems; people with HIV or other chronic conditions; and students (Australian Institute of Family Studies, 2018; Department of Health and Human Services, 2017; Daucher et al, 2002; Anema et al, 2011; Micevsky et al, 2014).

Such conditions are reflected in the practical experience of the distribution of food and other material assistance by the Greater Dandenong Council and community agencies within the municipality, which show that people who are unemployed or in low-paying employment, including many recent settlers and asylum-seekers, are among the most vulnerable to food insecurity.

When we look back to ten years ago, we see not much has changed. Surveys of food insecurity in Australian indicate that approximately one in 20 Australians runs out of food due to financial constraints, in any 12-month period.<sup>1</sup>

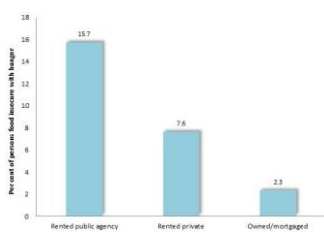
Such conditions are most prevalent among people living in conditions of socioeconomic disadvantage, the 2014 Victorian Population Health Survey recording that such food insecurity was recorded among 11.9% of unemployed people, compared with 2.5% of those in paid employment; 15.7% of people residing in government-owned accommodation, compared with 2.5% of those who owned or were purchasing their accommodation; and 10.4% of persons in households on annual incomes below \$20,000, in contrast to 1.2% of those in households with incomes exceeding \$100,000 (accompanying diagrams).

Prevalence of Food Insecurity by Annual Household Income: Victoria, 2014 (Victorian Population Health Survey)



<sup>1</sup> The findings of population surveys featuring this inquiry include 5.2% in 1995 (Australian Institute of Family Studies, 2018), 6.1% in the 2001 Child Health Survey, 5.2% in the Victorian VicLanes survey (Burns, 2009), and 4% in the 2011/12 National Health Survey.

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Prevalence of Food Insecurity by Housing Tenure Type: Victoria, 2014 (Victorian Population Health Survey)

### *Impact on Children*

Research indicates that children are affected by food insecurity in their households, to varying degrees. McCrindle Consulting, (2018B) cites the findings of the 2018 survey of Australian parents in food insecure households, which determined that 9% of their children passed a day each week without eating any food. Winicki and Jemeson on the other hand, maintain that children experience adverse impacts “...even at the most marginal level of household food deprivation.” (2018: 1).

Documented impacts of malnourishment upon children include birth defects, iron-deficiency anaemia, asthma, malnutrition, increased rates of hospitalisation (Linberge et al, 2015); impaired development and behavioural problems such as aggression, anxiety, depression and suicidal behaviours (McKay et al, 2019); learning difficulties (Winicki and Jemeson, 2018; Rosier et al, 2011B); and unfavourable social and health outcomes (McKechnie et al, 2018).

An Australian survey, for example, determined that children in food insecure households had trouble concentrating at school and completing homework; absence from, and behavioural problems at, school; sleeping disturbances; as well as lethargy, agitation, weight loss, nausea and general ill-health (McCrindle Consulting, 2018B).

### *Impact on Adults, including Obesity*

Among the wider population, food insecurity is associated with adverse physical and mental health consequences (Linberge et al, 2015) with one investigation concluding that 48% of food insecure individuals experienced poor physical health, compared with 19% of others (Victorian Dept. Health and Human Services, 2014A).

Health detriments reportedly associated with food insecurity include higher rates of mortality, cardiovascular disease, depression, disturbances of sleep and mental health, as well as elevated blood lipid content, (Rosier et al, 2011B; Knowles, 2016). Among older people, malnutrition may detract from immune responses, muscle strength, wound healing and respiratory function, and is linked to an increased duration of hospitalisation and a rise in mortality (Milne et al, 2009).

Obesity is a further common consequence of food insecurity, for it is reported that many people experiencing such conditions consume high levels of relatively inexpensive, unhealthy food, high in fats and carbohydrates (McKay et al, 2019). A survey of 402 people in NSW for example, found that many parents of food insecure families served increased amounts of carbohydrates to their families to save money (NSW Council of Social Service, 2018).

Food insecurity is also associated with psychological effects among adults, such as depression and anxiety (Linberge et al, 2015; Ramsey et al, 2012; McKay et al, 2019). One investigation determined that over half of adults experiencing food insecurity felt depressed (53%) or stressed (52%) when unable to

afford food (McCrindle Consulting, 2017). Consistent results emerged from a 2018 survey of Australian parents in food insecure households, which disclosed that such conditions contributed to household stress in 48% of respondents, while 74% felt ashamed that they had to struggle to adequately feed their children (McCrindle Consulting, 2018B).

### *Causes of Food Insecurity*

Conditions which cause or aggravate food insecurity include limited incomes, rising household costs and financial crises; physical or transport limitations; and lack of confidence, skill, motivation or other means to prepare and consume a healthy diet.

#### *Financial hardship*

Financial hardship is a primary cause of food insecurity (Montague, 2008; Kleve et al, 2018C), with low incomes, welfare dependency and lack of paid employment among its predisposing conditions (Northeast Health Wangaratta, 2014; Harper et al, 2008, Lawlis et al, 2018A; Ostr, undated; VicHealth, undated I). McCrindle Consulting (2017) for instance, observed that 81% of Food Bank clients were in receipt of low incomes, and an examination of findings of successive Victorian Population Health Surveys by Davidson et al (2016) confirmed that food insecurity was largely caused by financial limitations.

#### *Deterioration in household financial circumstances*

An abrupt decline in financial fortune may aggravate food insecurity for lower-income households and precipitate such conditions for some higher-income households. Indeed, researchers hold that, while surveys show that the prevalence of food insecurity is higher among people on lower incomes, many moderate or middle-income households may also experience such problems, often arising from abrupt and unforeseen changes in personal, health, financial or family conditions (Kleve et al, 2018B, 2018C; Davidson et al, 2016).

Examples of such financial setbacks include ill-health, injury, disability, job loss, bills, or changes in income or household composition, housing rental or mortgage payments, or housing tenure (Kleve et al, 2018C; Burns, 2004).

#### *Cost of healthy food*

The cost of healthy food is highlighted by some as a barrier to access to nutritious food, particularly for lower-income households (NSW Council of Social Service, 2018; Lawrence et al, 2015; Montague, 2008; Landrigan and Pollard, 2013; Cardinia Shire 2019).

In addition, some writers report that a significant proportion of people experiencing food insecurity perceive the cost of healthy food, relative to take away or other discretionary food, as an obstacle to their access to nutritious food (Lawrence et al, 2015; Dept. Health and Human Services., 2017; Northeast Health Wangaratta, 2014). The Ispos survey (2016) found that "...the typical, everyday shopper is still struggling to balance healthiness against...their budget" - an observation which holds the implication that healthy selection of food would entail a higher cost than otherwise. Smith et al (2017) note that the high cost of healthy food makes less nutritious food seem more affordable for many households, with an NSW study finding that 78% of respondents stated they would eat more healthy food if it were cheaper.

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The Foodbank hunger report 2022 states “food insecurity is impacting a diverse range of households. However, some are more susceptible to experiencing food insecurity than others, such as households with dependent children (52%), those with young adults 18-24 years old (60%), those unemployed/looking for work (52%) or households currently renting (45%). More than half of food insecure households (54%) had someone in paid work and nearly a third of households with mortgages (30%) have experienced food insecurity in the past year.”

United Nations report on the ‘State of Food Security and Nutrition in the World’, estimated that around 11 per cent of Australians were either severely or moderately food insecure between 2020 and 2022.

Such impacts have been aggravated by recent conditions of high inflation, which for instance, saw dairy and related products rise by 14.9%, and cereal and bread products rise 11.8%, in the year to March 2023.

### *Steps to Promote the Consumption of Healthy Food and Relieve Food Insecurity*

Efforts to alleviate food insecurity, and to improve the quality of food consumed by the public, have included the distribution of free or low cost food, programs to support the provision of low cost meals at local cafes to eligible persons, food vans or other measures to transport healthy food to accessible locations, community gardens, alternative food outlets, promoting lower cost, healthy food, and education of school pupils and the general public about healthy food options.

Despite the proliferation of such programs in recent decades, the prevalence of food insecurity shows no sign of decline, and the prevalence of obesity, reflect upon the poor quality of many diets, continues to rise in Australia and across the world.

An alternative approach, adopted in many countries, is the imposition of a tax on certain unhealthy foods. The dual purpose is to deter shoppers from selecting such foods in the first place, while inducing food manufacturers to reformulate their food to produce healthier products, thereby eluding the tax, and reducing public exposure to the health hazards of such beverages.

Among a range of possible measures of this kind, an appealing option is the introduction of a tax on sugar-sweetened drinks, since these are a major source of sugar in the diet, with a typical can of sugary drink containing the equivalent of ten teaspoons of sucrose as free sugars, and as the consumption of excess sugar – particularly among children and adolescents - is an increasing contributor to obesity, dental cares, diabetes 2, and cardiovascular disease.

Such initiatives have proven successful in many countries, especially when coupled with a clear publicity campaign to explain their purpose and perspective benefit, and where the funds raised through the tax are used to support health initiatives or to subsidize alternative, healthier options.

Furthermore, recent studies have shown greater exposure to ultra processed food was associated with a higher risk of adverse health outcomes often cheaper to produce and more appealing to the disadvantaged due to price. Often having difficult to understand or misleading labelling it is important that the food labelling system is clear and easy to understand for all Victorians.

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