Food and beyond: exploring the foodbank experience

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Executive summary

Background, aim and methods

Foodbank usage has been growing in Scotland since 2012. The most recent figures from the Trussell Trust report that they provided over 1.1 million food parcels in 2016-17 across the UK. Of those, 145,865 were in Scotland – up 9% on the previous year.

The aim of this research was to investigate pathways towards and following the use of foodbanks, as well as the experience and consequence(s) of that use. The setting for the study was deprived communities in Glasgow, using data from the GoWell study as the sampling frame.

The study used qualitative research comprising in-depth interviews with 23 participants who had used a foodbank on at least one occasion in the past five years. The key method was a semi-structured interview exploring their experiences of using a foodbank and their circumstances before and after foodbank use; participants were interviewed in their homes at a time and date convenient to them.

The sample was evenly divided between adult-only households and families with children or young people in the household. The vast majority of the sample were White Scottish by origin, with a small number of Black, Asian and minority ethnic (BAME) households. Nearly all participants had state benefits as their income source, although two participants were in part-time employment.

Findings

Prior circumstances

Reasons for foodbank use
Most participants were facing an acute financial crisis or had a reduction in their income leaving them with little or no money to buy food and other essential items. For most, the immediate income crisis was linked to the operation of the benefits system including waiting for benefit payments, sanctioning, benefit mistakes and delays. Other participants were simply finding it difficult to manage on a low income, whether they were living on a wage, benefits, home office allowance (if asylum seekers) or a state pension. Few participants had other means of coping or acquiring money from other sources.

Wider circumstances
Many foodbank users faced chronic and often multiple health problems, both themselves and within their immediate household. Mental health problems were also very common and both physical and mental health problems were sometimes linked to addiction issues (alcohol and drugs), although mental health problems were also sometimes linked to concerns about employment and incomes. A number of foodbank users had experienced
and were still coping with bereavements within the family, which often exacerbated their mental health issues. The combination of having mental health problems, and experiencing unpleasant events in the neighbourhood (not necessarily linked to their mental health issues) had led several people to become socially withdrawn.

**Other means of support and coping**

Many participants lacked family or social networks that could provide financial or food support for them and hence they often considered pay-day loans as a main alternative to foodbanks in times of crisis. Some had made use of the Scottish Welfare Fund and its predecessor for emergency payments, while others had been unsuccessful in this regard. Housing organisations and welfare advice agencies were important sources of assistance for several people, and those people with complex health and dependency needs were in receipt of often multiple forms of support from health services and charitable organisations. Involvement in community activities was not common and there was a widespread desire for more social opportunities and for greater knowledge of how to participate in those community projects that did exist.

**Attitudes to using a foodbank**

A lot of participants were surprised, embarrassed and ashamed at having to resort to charitable sources for a basic need like food. They particularly felt guilty and a failure if they had others depending on them for sustenance. People considered having to use a foodbank as stigmatising as it signalled their failure to others. Some, despite being users themselves, subscribed to the view that there were others who ‘gamed’ the system to get free food and they were anxious about being considered part of that group. These feelings were heightened where the foodbank they used was readily identifiable as such; people preferred to be anonymous in using a foodbank.

**The experience of foodbank use**

**Accessing foodbanks**

Knowledge of foodbanks has spread widely in the professional world, with participants being referred to foodbanks from a variety of other organisations, particularly in the welfare advice, health and housing sectors. It is notable that these sources of referral to foodbanks include several public sector agencies. This suggests foodbanks can be considered as becoming part of the welfare landscape.

The referral system that applied to most foodbanks was seen as a source of difficulty at the start of the process, i.e. obtaining a referral was for some an obstacle to be overcome, but thereafter the use of the referral system was reported as mainly efficient in dealing with users at the foodbanks themselves.

Accessing foodbanks presents something of a conundrum for users. On the one hand, participants prefer foodbanks to be anonymous and for others not to know they are going there, with some people opting to use a foodbank further away. On the other hand, participants reported not being aware of the local presence of a foodbank that they could
approach for help, and several complained of the distance they had to travel to a foodbank, or rather the distance they might have to walk home with bags of food. For some people, there is a self-defeating element to having to pay for buses or taxis to travel home, while using a foodbank because they have no money.

Foodbank provision
The main consistent feature was that people got a lot of tinned and dried goods such as pasta, rice, tinned soup, breakfast cereal, long-life milk, tea and coffee meaning that people had basic rations and would not need to go hungry. Foodbanks varied in the extent to which they offered fresh food to users, which depended mostly on their relations with local supermarkets. Small, sweet treats beyond the basics were, however, much appreciated by users.

Many foodbanks offered a degree of choice to users and tried to also cater for particular diets and allergies, although it was harder for them to meet the needs of those with specific health or cultural requirements. The healthiness of the food offered was questioned by some users, while others pointed out that some users would need advice on how to produce healthy meals from what was provided. Several participants reported storing a lot of the basic items they got from foodbanks, either because they lacked cooking skills or didn’t know how to use them, or because the quantity received was too much for them, especially if they went to the foodbank regularly and received the same provisions each time.

Therefore, there are some questions that could be asked about the effectiveness and efficiency of foodbank provision, although foodbanks are nonetheless meeting people’s basic needs. Beyond the food, users particularly appreciated the provision of toiletries and pet food by foodbanks. The provision of assistance with fuel payments was less widespread and less well known.

Support from foodbank volunteers
The almost unanimously positive comments from foodbank users about the way they were treated was striking. For many it was a surprise that someone actually cared about their situation and was not judging them for it. For some participants, this surprise, and the impact the foodbank environment had on them, appeared to stem from their negative experiences in dealing with public sector agencies about benefits and employment issues, where they felt they were being negatively judged, not empathised with or understood, and not supported.

Foodbanks were said to offer support via signposting users to other agencies to help with their circumstances. More commonly, however, foodbanks can be seen to offer emotional support to users by making it easy for users to open up about their stresses, worries and concerns. This can clearly help some people cope with periods of loneliness, anxiety and depression. It appeared as if people got something of their humanity back through the treatment they received at foodbanks, almost when they were least expecting it as they were in a vulnerable position in asking for charitable aid.
Subsequent developments

Reflections on foodbanks
Using a foodbank got easier psychologically for people over time. Some participants, who had to come to terms with the fact that it was the most sensible course of action for them in the circumstances, admitted that they could or would do the same again if needs be. Nevertheless, for other participants, using a foodbank was still a stigmatising experience particularly if friends, neighbours or acquaintances could see or tell that they had used a foodbank, either by virtue of observing them go into the foodbank or by the food they had in their cupboards. Foodbank use also made some people feel guilty, because they were aware of more needy cases than themselves.

Participants reported developing empathy and understanding of other people’s needs and of the unpredictable nature of poverty which could affect people unexpectedly. Nevertheless, some were angry that a lack of other support meant that foodbanks needed to exist.

Later outcomes
Foodbanks played a role for many participants in getting through a difficult time, and it was often the case that the emotional support was as valuable as the practical help. In this regard, some people drew comfort from incorporating foodbank use into their routines. Wider improvements in people’s lives occurred for some participants, but foodbanks were not pivotal to these other changes. These participants appeared to have the resources and motivation to get on better due to personal changes, getting a job, voluntary work or the prospect of education. They also seemed, mainly, to be getting an appropriate level of support. There were instances where people had either experienced volunteering around food, or been directed towards volunteering opportunities via a foodbank, and the volunteering experience had given them a way forward in their lives.

For the majority of participants, the household’s financial situation improved because their acute financial crisis had been resolved (e.g. benefits were back in place). Many, however, still reported struggling on a low income. For those whose financial situation had not improved, this tended to be because they had difficulty managing their money, were in arrears or were still paying off debts.

For the majority of participants, their wider circumstances, apart from finances, did not alter greatly. This was often to do with difficult and intractable problems particularly concerned with poor physical and mental health, drug and alcohol addictions, homelessness and poor quality of life. A lot of vulnerable people suffered ongoing stress related to low incomes, uncertainties about benefits, and employment pressures – either wanting to find work, or feeling under pressure to get work when they considered themselves unfit to do so. Although many were in receipt of support, some lacked the right type or frequency of support, particularly in dealing with issues associated with loneliness, anxiety, and other mental health issues. The foodbank provided compassion, kindness and often a listening ear, but more regular and ongoing support than a foodbank provides is probably required for many such people.
Conclusion

Use of foodbanks

Participants used foodbanks at times of acute financial crisis, usually amounting to two or three times, although there were instances where people became regular users over a longer time period. Prior awareness of foodbanks was low, with participants usually referred to a foodbank by housing officers, health professionals and financial advisors. The anonymity of most foodbanks suited users, who were embarrassed and ashamed at having to use them.

Foodbank provision

Participants appreciated the basic foodstuffs they received from foodbanks, although within this a degree of choice was offered to meet users’ dietary requirements and preferences. Regular users could end up with wasted or excess food. Some participants did not know how to make a healthy meal with what they received from the foodbank, and there might be scope for wider provision of meal ingredients with instructions.

The foodbank experience

Participants were pleasantly surprised by their treatment at foodbanks. They particularly liked the caring and understanding attitude of volunteers, and the opportunity to have a cup of tea and talk to someone. However, even after repeated use, people still found the reliance on foodbanks stigmatising within their communities.

Outcomes from using foodbanks

Foodbanks helped improve people’s lives but they did not transform them. Many participants continued to have chronic physical and mental health issues and ongoing stress and anxiety surrounding benefits and employment. There were cases where foodbanks helped direct people to volunteering opportunities which boosted their social contacts and personal motivation and direction, but many other users could benefit from more regular social contact.

The value of foodbanks

Foodbanks were first and foremost of value to users as a source of emergency or basic foodstuffs and as a low-income supplement through the provision of other groceries. Foodbanks also had a significant social value to many users, providing both social contact and social and emotional support. Beyond this, foodbanks helped restore some aspects of participants’ dignity and humanity, with great value being placed on the respectful
treatment received from volunteers. The question of whether foodbanks can be extended or transformed into a means of food aid that is more open, inclusive and socially focused seems worthy of further consideration.
Introduction

Addressing food insecurity in Scotland

Food poverty is one specific dimension of poverty, and defining food poverty and its related issues presents numerous challenges. The term ‘food insecurity’ is now commonly adopted and is defined as “the inability to acquire or consume an adequate quality or sufficient quantity of food in socially acceptable ways, or the uncertainty that one will be able to do so”\(^1\). This definition goes beyond a traditional definition of food poverty and refers to a state in which people are unable to access affordable, nutritious, safe and culturally acceptable food and possibly face periods of hunger.

Conversely ‘food security’ can be defined as a situation where “all people, at all times, have physical, economic and social access to sufficient, safe and nutritious food to meet their dietary needs and food preferences for an active and healthy life”\(^2\). In the UK context this means that people have enough money to purchase the foods they prefer to eat, that meet social as well as health and nutritional norms; and that their money is not absorbed in other essential expenditure (such as rent, fuel, debt repayment, etc) to such a degree that prevents them from doing so. It also implies that people are able to shop for food at affordable prices, or can grow or otherwise obtain food in a dignified manner that is in keeping with social norms.

In terms of addressing food insecurity, the term ‘food aid’ has been employed as an umbrella term encompassing a range of large-scale and small, local activities aiming to help people meet food needs, often on a short-term basis during a crisis or immediate difficulty. It includes a broad spectrum of activities from emergency one-off operations to well-established foodbanks. The evidence highlights that short-term food provision can relieve symptoms of emergency need but usually does not address the underlying causes of that need\(^3\).

In Scotland, the Independent Working Group on Food Poverty was established in 2015. Its report – Dignity: Ending Hunger Together in Scotland\(^4\) – states that emergency food aid is not a long-term solution. It recommends that any organisation which secures Scottish Government funding and support to work on tackling food poverty must demonstrate how its approach promotes dignity and is helping to transition away from emergency food aid as the primary response. It calls for a collective focus to reduce and remove the need for foodbanks and proposes transitioning from a food charity to a food justice system. It identifies four principles which aim to give a dignified response to food insecurity:

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• That people with direct experience of food poverty help to shape and deliver the service or solution.
• That projects recognise the social value of food and aim to build community around food in order to create the feeling of a place where people choose to go, rather than have to go.
• That projects provide opportunities for people to contribute, for example, through volunteering in different roles, sharing and learning new skills, growing food and participating in local community life.
• That projects ensure that, as far as possible, people are able to choose what they eat: that the choice available should include fresh and healthy food, and that where people can pay something for their food they have the dignity of doing so.

In response to the Working Group’s report, the Scottish Government established The Fair Food Transformation Fund (FFTF) with a total value of £1.25 million to support the development and delivery of more dignified responses to food insecurity and the transition away from emergency food aid as the primary response. It builds upon the Emergency Food Fund that supported projects in Scotland which responded to immediate demands for emergency food aid, and helped to address the underlying causes of food poverty in Scotland. The FFTF supports projects which trial new ways of addressing food insecurity that more closely align to the Scottish Government’s four Dignity principles.

It is also important to recognise that the community food movement has grown consistently over the last few decades with the backing of local and national government dating back to the Scottish Diet Action Plan in 1996. Historically, the sector has undertaken a wide range of activities such as: bulk buying fruit and vegetables and retailing at cost; running fresh food stalls in hospitals; running classes on healthy eating and cooking; growing food; and running community shops and cafés. Community Food and Health Scotland is funded through the Scottish Government and is now part of NHS Health Scotland. It supports work with and within low-income communities that addresses health inequalities and barriers to healthy and affordable food.

The growth in foodbanks

Foodbanks provide emergency food aid to people in crisis, often (but not always) following referral by a health or social care professional or other agency. Foodbanks and other forms of charitable provision are de facto becoming part of the UK welfare landscape, something government and others are trying to counter. The largest provider of foodbanks, Trussell Trust, gathers statistics from foodbanks in its membership and provides the only national-level data on foodbank use. The most recent figures from the Trussell Trust report that they

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6 Community Food and Health (Scotland) https://www.communityfoodandhealth.org.uk/
provided over 1.1 million food parcels in 2016-17 across the UK. Of those 145,865 were in Scotland – up 9% on the previous year\(^7\). It is also important to note that Trussell Trust figures reflect the number of parcels provided and are therefore not a measure of how many individuals are using foodbanks.

The headline Scottish Government statistics on poverty were published in March 2017\(^8\). The publication showed that although poverty rates have been relatively stable over the last decade most rates had risen in 2015/16 and this, alongside other indicators, suggests low income households are falling further behind those on middle incomes. In 2015/16, 10% of people in Scotland were in severe poverty before housing costs (BHC), including 10% of working age people. In 2015/16:

- 56% of children in poverty BHC were in severe poverty, increasing to 64% after housing costs (AHC).
- 65% of working-age adults in poverty BHC were in severe poverty, increasing to 72% AHC.
- 48% of pensioners in poverty BHC were in severe poverty, increasing to 60% AHC.

Scottish poverty statistics also show that the rate of ‘in-work poverty’ has been steadily increasing for several years. In 2014-15, 58% of working-age adults in poverty lived in families where someone was in work and 66% of children in poverty also lived in families where someone was working\(^9\). Additionally, the first comprehensive study into destitution in the UK, published by the Joseph Rowntree Foundation in April 2016, estimated that 1.25 million people (including over 300,000 children) were destitute in 2015\(^10\).

The Trussell Trust also collect data on the reasons for foodbank referral and reports that the primary causes in Scotland in 2015-16 were benefit delays (26.73%), low income (21.91%), and benefit changes (16.31%)\(^11\). Trussell Trust foodbanks report people are still being impacted by sanctions and a mix of delays and changes to various benefits including Jobseeker’s Allowance (JSA), Employment and Support Allowance (ESA) and Personal Independence Payments (PIP).

Citizens Advice Scotland published their report ‘Living at the Sharp End: CAB Clients in Crisis’ in July 2016\(^12\). The report found that recent changes to the benefits system, benefits rates not keeping pace with inflation, low pay, insecure work, rising costs of living and debt-collection practices are the main causes of acute income crises. The report goes onto recommend that public sector bodies establish links with other services to ensure that

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people facing acute income crisis “are able to access relevant support and address the causes of their income deprivation”.

The Trussell Trust report that the main issues that cause working people to be referred to them are low wages, insecure work, high living costs and problems accessing working benefits\(^{13}\). Other contributory factors for the increase in foodbank use include rising food prices, as well as the high costs of fuel and rent, as factors which impact on households’ ability to afford food. The accessibility of shops selling affordable, healthy food, and the cost of transport to reach them, has also been considered to contribute to the experience of food insecurity in some cases\(^{14}\). Scotland-specific studies on the causes of foodbank use are consistent with these UK-wide findings, and have also highlighted instances of problems with the Scottish Welfare Fund (SWF), including a lack of awareness of the Fund and delays in processing applications\(^{15}\).

Empirical evidence from academics and frontline charities also confirms how benefit sanctions and delays, fuel poverty and low paid, insecure work drive people towards foodbanks. This body of research\(^{16}\)\(^{17}\)\(^{18}\)\(^{19}\)\(^{20}\) examines food poverty and foodbank use from different perspectives, with a view to furthering the evidence base and research agenda on foodbanks. A range of research techniques have been used from ethnographic study within foodbanks themselves to interview with volunteers and foodbank recipients.

Beyond the issue of money\(^{19}\) research has shown that while most foodbank users are facing an immediate and acute financial crisis, this was set against a backdrop of complex, difficult lives that made them more vulnerable to life shocks, including experiences of ill health, bereavement, relationship breakdown, substantial caring responsibilities or job loss. Issues with social security were also prominent in their findings which, overall, highlighted the complexity of the reasons that lead people to need to turn to foodbanks.

A different function of foodbanks is revealed by ethnographic research\(^{20}\) with volunteers in foodbanks. This shows that by providing a melting pot of political beliefs and spaces of encounter (between clients themselves, clients and volunteers and volunteers from different political spheres), participation in foodbanks may generate new, or reinforce existing, ethical and political attitudes, beliefs and identities among volunteers.


\(^{19}\) Perry J, Williams M, Sefton T, Haddad M. *Emergency use only: understanding and reducing the use of foodbanks in the UK*. Oxford: Oxfam GB; 2014.

Policy and provision in Scotland

While at a national level the Trussell Trust is the most widely recognised foodbank provider, in many cases at a local level the main provider(s) are local independent organisations; larger national organisations (e.g. Salvation Army); and, churches operating a Trussell Trust foodbank. While some non-Trussell Trust providers capture data, the consistency of this is patchy and is not aggregated at Scotland level. The plethora of other foodbank providers means the real scale of food insecurity is likely to be significantly higher than the Trussell Trust figures suggest. While a comprehensive record of all emergency food providers does not currently exist, the Poverty Alliance ‘Making Connections’ report found that some 167 groups and organisations in Scotland were offering some form of food service (with varying referral models) in 2015. The most common form of emergency food aid provided by such groups or organisations was non-perishable food parcels, provided by 84% of respondents. Of these 27% provided perishable/fresh food. In addition to emergency food aid, 31% of respondents offered cooking classes, 17% had community growing/gardening projects, 10% ran food co-ops, and a small minority ran other community initiatives.

As previously indicated, the Scottish Government has also supported the provision of emergency food aid through its Emergency Food Fund, providing just over £1m of funding over the period 2014-16. Of this, £500,000 was awarded to FareShare to distribute surplus food to community organisations and foodbanks, with a further £523,000 given via grants to a total of 26 emergency food aid projects in 17 local authorities. Funding was provided to projects seeking to “respond to the immediate demands for emergency food aid and help to address the underlying causes of food poverty”. The criteria, method of delivery and monitoring used, reflected the ‘emergency’ context but also aimed to address the underlying causes of food poverty in Scotland. The Fair Food Transformation Fund is currently supporting 33 community food projects across Scotland in 2016/17 and 2017/18, including helping emergency food providers ‘transition’ to food provision in a social community setting, in line with the Dignity principles.

Local context

The context for this study is Glasgow. The fourth wave of the GoWell Community Health and Wellbeing Survey conducted in 2015 provided a unique opportunity to examine the scale of foodbank use in deprived neighbourhoods in Glasgow, and to consider the association between foodbank use and a range of other variables in order to better understand who is using foodbanks. It found that around 4% of households in deprived neighbourhoods in

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21 For example West Dunbartonshire Community Foodshare showed a 51% increase in its service between December 2013 and January 2014. See: http://www.oxfam.org.uk/scotland/blog/2014/01/worrying-surge-in-foodbank-use
Glasgow were foodbank users and that a similarly sized group identified as non-accessors, being either not willing or not able to use a foodbank. It was also established that for every foodbank user, there were nearly four other households who experienced frequent difficulty paying for food, but who had not used a foodbank, suggesting that food insecurity is much more widespread in deprived communities than foodbank use itself would indicate. Rates of foodbank use were highest among single people compared with other household types. According to employment status, people who were long-term sick or disabled were far more likely than other groups to have used a foodbank. Long-term illness and mental health problems were also far more common among foodbank users than those who have never used a foodbank.

Apart from Trussell Trust foodbanks (which has a detailed and up-to-date website), the data and detail of foodbanks in Glasgow is relatively patchy and inconsistent. From the information available there are 15 Trussell Trust foodbanks in Glasgow. These are arranged by locality and each has a central hub and other venues where people can attend on particular days (e.g. Tuesday 1400-1600):

- Glasgow North East has six foodbanks including its base at Calton Parkhead Parish Church
- Glasgow North West has four foodbanks including its base at Blawarthill Parish Church
- Glasgow South East has two foodbanks including its base at Butterbiggins Road.
- Glasgow South West has three foodbanks including its base at Ibrox Parish Church

There are also several independent foodbanks, most which are attached to churches e.g. St Rollox Church; New Life Church; Glasgow Westend Vineyard, Landsdowne Church, Whiteinch Church. There is no up-to-date information about the extent of such foodbanks and it may be the case that some are short-term. There are also ‘soup kitchens’ (e.g. City Mission, Loaves and Fishes) and ‘food parcels’ (Destiny Church) that come under the umbrella term emergency food aid.

There is an established and active community food movement in Glasgow, and a range of community food initiatives. Community Food and Health (Scotland)\(^\text{24}\) supports work with and within low-income communities that addresses health inequalities and barriers (availability, affordability, skills and culture) to healthy and affordable food, and includes support for ten community food initiatives in Glasgow.

**Research gaps**

‘Feeding Britain’, the 2014 report of the All-Party Parliamentary Inquiry into Hunger in the United Kingdom, states: “It became clear there is still a real gap in the research on hunger. We hope that the collective effort now being undertaken by foodbanks themselves, as well as researchers, to improve the collection of data on the numbers of foodbanks and people

\(^{24}\) Community Food and Health (Scotland) [https://www.communityfoodandhealth.org.uk/](https://www.communityfoodandhealth.org.uk/)
relying on their services will help to inform the ongoing debate on hunger in this country.\textsuperscript{25} Similarly, in Scotland, the Dignity report (p19) states: “The Scottish Government should therefore commit to improving the knowledge and understanding of food insecurity in Scotland through the development of a robust evidence base.”\textsuperscript{26}

In order to combat the growth of food insecurity in Scotland, there is a need to better understand the nature, extent and experience of food insecurity. This includes – but is not limited to – the number of people who: experience chronic and acute food insecurity; the number who access foodbanks and why; how individuals can be better supported to access statutory sources of support; as well as what can be done to develop resilience and support early intervention to prevent crisis situations from developing among poor households. The Menu for Change project established by Oxfam and partners is important in informing and evidencing potential system change, including strengthening access to the Scottish Welfare Fund.\textsuperscript{27} In addition, the Scottish Government’s review of the Fair Food Transformation Fund is seeking to establish evidence on how community-led food insecurity projects impact on individuals, households and communities to reduce demand for foodbanks.

**Research aims**

**Aim**

The aim of this research was to investigate pathways towards and following the use of foodbanks, as well as the experience and consequence(s) of that use.

**Objectives**

More specific objectives included to address the following questions:

- Under what circumstances and through what routes did people access a foodbank? What degree of regular or repeated use have people made of foodbanks over time, involving the same or different access routes? Were other forms of help considered or sought?

- What additional advice or assistance have users received directly or indirectly as a result of going to a foodbank? How helpful were these other supports/services?


\textsuperscript{27} The Menu for Change project. https://www.oxfam.org.uk/scotland/blog/2016/11/a-menu-for-change
such supports/services those which people could or would not have accessed otherwise?

- How have users found the experience of accessing a foodbank? Are they convenient, accessible, discreet etc.? How has foodbank use made people feel about themselves as individuals, citizens, family and community members? Are there other forms of assistance that users would find more preferable or suitable?

- What have been the impacts (if any) of foodbank use upon such things as users’ mental health, diet, physical health, pre-existing health conditions.

**Methods**

This was a piece of qualitative research comprising in-depth interviews with 23 participants who had used a foodbank on at least one occasion in the past five years.

**Recruitment to the study**

The sampling frame was the GoWell wave 4 sample of participants from deprived communities in Glasgow. In summer 2015, from a sample of around 3,500 adult householders, it was found that 4.2% reported using a foodbank in the past year. This study used this group of 145 respondents as its sampling frame. Recruitment commenced at the start of May 2017 and was phased initially by contacting potential participants in ‘batches’ of 15 per week. Letters and participant information sheets (PIS) were sent to potential participants at their last known address, explaining the purpose of the research and setting out what their involvement would entail. A £20 shopping voucher was given as recognition and thanks for the respondent’s participation.

People could ‘opt in’ to the research by contacting the researcher through a variety of means – work phone number, mobile phone number or email. An ‘easy’ option was for potential participants to send the message ‘YES’ to the researcher’s mobile phone number (if they wanted to take part). The researcher then sent back a message and contact began this way in order to arrange a time for the interview. If participants had not opted in by a certain date (seven days after receipt of letter) the researcher followed up the contact by using the phone numbers provided during the GoWell survey. Some participants indicated that they knew of a neighbour of family member who might be interested in taking part; if

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so, contact details were taken and the researcher started the process of making contact with the potential participant.

Of the 23 people who participated, the following recruitment routes were used:

- YES text (to researcher’s mobile phone): 12
- Phone call (from participant to researcher’s mobile phone): 6
- Email to researcher: 1
- Follow-up (researcher following up contact after seven days): 2
- Snowballing: 2

When participation was agreed, a time for the interview was arranged. At the start of the meeting, the purpose of the research was explained again, the PIS presented once more, and a consent form signed at the commencement of the interview. A shopping voucher was handed to the participant at the start of the interview and signed for by the participant.

Sample

There are 23 participants in the sample, including two participants who were a couple both of whom responded individually although they were interviewed together. There were five no-shows, i.e. people who agreed to be interviewed but failed to make the agreed time. Table 1 sums up participants’ characteristics. The sample was evenly divided between adult-only households and families with children or young people in the household. The vast majority of the sample were White Scottish by origin, with a small number of Black, Asian and minority ethnic (BAME) households. Nearly all participants had state benefits as their income source, although two participants were in part-time employment.

Table 1. Summary of sample characteristics.

<table>
<thead>
<tr>
<th>Gender</th>
<th>14 female, 9 male</th>
</tr>
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<tbody>
<tr>
<td>Age range</td>
<td>21-65</td>
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<tr>
<td>Household composition</td>
<td>10 family households (i.e. at least 1 adult &amp; 1 child/young person &lt;18yrs)</td>
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<tr>
<td></td>
<td>11 single occupancy</td>
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<td></td>
<td>1 couple</td>
</tr>
<tr>
<td>Ethnic background</td>
<td>19 white, 4 BAME (3 former asylum seekers now with ‘leave to remain’ status)</td>
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<tr>
<td>Work status</td>
<td>At the time of foodbank use, 2 participants were in part-time work. All others were in receipt of state benefits.</td>
</tr>
</tbody>
</table>
More detail about the sample characteristics is provided in the Appendix (Tables 2-4). Table 2 gives more details on each participant’s household characteristics, including age group, ethnicity, household structure and employment status. This can be used as a reference point to check on background characteristics when participants are mentioned by their pseudonym in the report. Participants came from ten localities across Glasgow (see Table 3). Table 4 gives details of Trussell Trust and other (non-Trussell Trust) foodbanks used by participants.

Semi-structured interviews

The method used was a semi-structured interview, with the interviews taking place between 8th May and 12th June 2017. The researcher interviewed participants in their homes at a time and date convenient to them. Interviews lasted approximately one hour (range: 25-90 minutes). A semi-structured topic guide was developed along the following themes:

- Background information about participant.
- Foodbank use: initial thoughts about them; which foodbanks used, where, when and why.
- Personal circumstances: what was happening in your life at the time; any particular circumstances; what might have happened otherwise; other forms of help.
- Route of access to foodbank: how you accessed the foodbank; where the referral came from and how it worked.
- Experience of using a foodbank: convenience; practical issues; treatment by staff and volunteers; how the foodbank works; what you got; anything else you would have liked to have got.
- Feelings about using a foodbank: how using a foodbank made you feel; talking to others about using a foodbank.
- Since using foodbanks: have circumstances changed in any way; how useful was the foodbank in signposting other services or support; other types of help you might like.
- Community-based help: awareness of community-based help around food; involvement and opportunities.
- Wider impacts: sum up experience of using a foodbank and the services it provides.
Analysis

Interviews were audio recorded, professionally transcribed, and analysed by the research team.

The following three key themes emerged which form the structure for this report:

- Prior circumstances: reasons for foodbank use; wider circumstances; other means of support and coping; attitudes to using a foodbank.

- The experience of foodbank use: accessing foodbanks; foodbank provision; support from foodbank volunteers.

- Subsequent developments: reflections on foodbanks; later outcomes.
Prior circumstances

Reasons for foodbank use

In this chapter we look at how participants described the reasons for their use of a foodbank. The primary reason reported for using a foodbank was due to an income crisis but within the context of, or exacerbated by, wider things going on in people’s lives. It was at this point that participants got a referral, either initiated by themselves or by someone working with them such as a Health Visitor or Housing Officer. In relation to financial crisis, the two key reasons for foodbank use were benefit problems and struggling on a low income, although there is an overlap between these two issues. These are now looked at in turn.

Benefit problems

Benefit problems included delays due to benefit change-over or new applications; rectifying overpayments; losing benefits due to changed circumstances; awaiting appeals about ESA\(^{29}\) and PIP\(^{30}\); sanctioning; asylum cases; and, general “mess ups”.

Some participants had limited family income while they were changing over benefits or applying for new benefits as their circumstances changed. Aisha (R1) experienced a delay when applying for a new benefit. She explained the changeover from Jobseekers Allowance\(^{31}\) to Income Support\(^{32}\) because of her son’s recently diagnosed illness and consequent disability: “I was on Jobseeker’s an’ at the time it went tae Income Support ’cause of [son’s] disability, everything had tae change. An’ it takes aboot three weeks, which is a nightmare. What happened, my money got stopped. Everything all got changed an’ it took weeks for a new claim so I was really skint an’ I had tae go tae the foodbank”. Amanda (R7) had to make a new claim from a joint to single claimant when her partner was in prison and said that during this process: “I never had nothing, like they werenae giving me a penny for gas, electricity, food, nothing”.

Fay and Edwin (R22) were asylum seekers and when their asylum application was complete, and successful, they had to start the process of applying for benefits because “now we have to do like everybody else in Britain”. They explained that at this point when their circumstance changed, they had absolutely no money as they had to start from scratch in making an application for JSA:

“When we won the case now... everything stopped... Yeah, fend for ourself. Go on Jobseeker’s. So, while I was... doing the application, it take us like almost two to

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29 ESA – Employment and Support Allowance (illness and disability)
30 PIP – Personal Independence Payment (help with some of the extra costs caused by long term ill-health or disability)
31 JSA – Jobseeker’s Allowance (unemployment benefit paid to people actively seeking employment)
32 Income Support is a means-tested benefit: entitlement is based on income and savings and other capital, which are looked at to see if they are low enough for qualification.
three weeks, and yeah, and I didn’t have no income coming in. And then the Jobseeker’s place give us a voucher to go to the foodbank.” (Fay and Edwin R22)

Stacey (R5) and her family (seven people in the house) were struggling to cope on their low income due to their recently changed circumstances. Her daughter became pregnant while in her last year at school so she lost the benefits for her (e.g. Child Benefit) as she never went into further education. Furthermore, no one in her household was working. She was also awaiting the outcome of her PIP appeal which took approximately eight months so her income was reduced during this time.

“I was getting DLA\(^{33}\) and ESA... And I was struggling because I was losing, like, my Child Benefit, and then I was losing my Child Tax Credit and all that for her as well. So, it was really, really hard when you’ve got, like, other kids that really need it... like, you need [food] to put intae the freezer, into the fridge.” (Stacey R5)

She explained that:

“A period of time had stopped and then my PIP went because remember I’d lost all my benefits at the time when you stopped, you never went into further education because of the wean. I’d lost, like, nearly £200-odd a month already and then after that, there was a sort o’ wee gap, and then all of a sudden, like, took my DLA took that aff me because it was swapped me onto the PIP and then I didnae have it For about eight month.” (Stacey R5)

Sue (R8) was on JSA but claiming for ESA because she was not fit for work (due to a series of physical and mental health problems). She explained that since submitting her ESA application she had no money for about six weeks while they were processing it:

“I never got any payment from the end of November until, because of Christmas, New Year, and the holidays and everything, it was the 8th of January ‘til I got paid, so och, it was terrible. ...I had to phone the social fund, they were very good, they gave me a one-off payment of £80 for to help with food and electric and things.” (Sue R8)

Even Sue’s (R8) rent did not get paid during this time which meant she ended up with rent arrears: “They stopped my money, they said “We’re not gonna pay you further until this has been investigated fully.”

Changed circumstances and proposed benefit changes could lead to an appeal by the applicant, which then caused a problem of insufficient income. Kate (R21) was awaiting an appeal decision about ESA and only had PIP (£21 a week) to live on. As she lived with her daughter (age 18) who had her own benefits she said she was not eligible for any other help. The process took a year and a half until she was put on JSA, while still in the process of appealing for ESA. She explained her condition and why she felt the process was unfair:

\(^{33}\) DLA: Disability Living Allowance (tax-free benefit for disabled people who need help with mobility or care costs).
“And then they took me off, they took me off the sick. They said I was fine for work. But I’m blind on one side and deaf on one side, so it’s like, when I go out, my daughter has to be with me. I’ve walked into poles, I’ve walked into cars, nearly got knocked down, and they’re saying I’m fit to go out on my own. But, even the stairs, I’ve actually fell down the stairs.” (Kate R21).

“It was like I went for a medical and it was like, you have to wait so many weeks. And I went, but, how am I supposed to live until you sort this out… it was March last year, it was just, ‘No, you’re no longer entitled to benefit now’. And I went ‘But what am I supposed to live on?’ … ‘Oh that’s right, you’ve got your daughter living in the house and you’ve got your son’, well my son was here at the time, but that’s not my money. Okay, they contribute to the house but, what am I supposed to live on? So then I appealed it again and I got what, £21 a week for PIP… so it was a year and a half we waited.” (Kate R21).

Some participants had been subject to benefit sanctions. Ellen (R9) who at the time did not have a permanent address was using someone else’s address. As the letters from the benefits agency were not passed onto her she did not receive letters about medical appointments and other meetings so she was sanctioned. Alex (R13) and Sally (18) had also been sanctioned for missing appointments meaning they had very limited income for several weeks:

“I was meant tae go to an appointment but I didn’t turn up, so they cut my money down tae £60 a fortnight. So that had tae do me – that was only £30 a week I had tae do me.” (Alex R13)

“I got sanctioned and I dinnae get any money for about, oh, God, it was terrible. About eight weeks or something?” (Sally R18)

“… if your money gets stopped, your rent’s no’ gonnae get paid either, so, that was another worry. …They were just saying wait to see what the outcome is, you know, and then I was gonnae either have tae, you know, go on that Jobseeker’s thing, Allowance, and then I was supposed tae go up there every week tae show them that I’d been out looking for work. I can’t even go tae the toilet without breaking intae a cold sweat. You know, ‘cause of my breathing? I’m like… Even when I get up during the night to go to the toilet, I hate it, ‘cause see when I get back into my bed, I’m scared in case I’m no’ gonnae be able tae breathe.” (Sally R18)

Amanda (R7) had been sanctioned for missing an appointment (she didn’t say about what) because she had to go and see her mum, and had to live off her daughter’s money of £80 a week for three weeks:

“I dinnae go tae sign on once, because it was – I had to go and see my ma, or pick something for my ma that day. And they just dinnae listen. So I just dinnae go, I says ‘screw your appointment’. They sanctioned me. Aye, a three week sanction… I just lived aff [daughter’s] money.” (Amanda R7)
Alan (R14) had had a benefit overpayment at one time so he had no money while this was rectified by taking money away from him over a period of weeks: “I think because I had an overpayment and because the job centre were taking so much money off me, so I hardly had any money to live on.”

There was not always clarity as to why benefit money had not come through. Susan (R2) had no money for six weeks: “cause my partner was claiming for me an’ it was just a’ messed up, know like the forms an’ that, so we waited aboot six weeks for money”. David (R10) explained that he went to the bank to get his money and the there was nothing there: “you go on a Friday, or a Thursday, or whatever day you get paid and you go to the bank and there’s nothing there… My money was stopped once again, and as I say, you go to the bank on a Friday, they don’t tell you and there’s no money there”. Stephen (R16) said his benefits were not renewed because they wanted to take him off ESA: “and what happened was, they didnae renew my benefits claim. So I went, and I think it was about seven or eight weeks without any money”.

**Struggling on low income**

Several participants were finding it difficult to manage on their household income either due to low pay, losing a job, finding it hard to manage their money (due to being on a low income and/or the combination of not being able to organise their finances), having difficulty managing benefits, and struggling with debt and arrears.

For those in work, part-time employment did not pay enough to live on. Debbie (R3) was struggling to cope on her low income as a part-time cleaner. She worked just under the limit to enable her to claim tax credit and was not entitled to any other benefits. Her unemployed partner was not receiving benefits at the time, and they had a son to support. Jill’s (R12) partner took a job he did not like and then quit it, meaning he was not entitled to any form of benefit. Jill had a part-time job at minimum wage and her overtime had been cut back. She had to support herself, her partner and her mum who lived with them:

“So my partner went to see if he could get any help, if he could like sign on for Jobseekers or anything like that, but they said because I was working 20 hours a week, he wouldn’t get anything… Twenty hours income, and that was for to do two of us. Luckily enough we didn’t have my little girl at the time, but that was to do the two of us on 20 hours a week. And it was only minimum wage at the time, so…” (Jill R12)

John (R4) lost his job through redundancy after working for 25 years and then developed a serious illness. He was initially refused benefits because his wife was working part-time:

“’Cause we’d been refused benefits – although I’d worked all my life and been made redundant – and it was just... we just had to... we were in dire straits, we’d not enough to cover our bills and have food. So, it was either food or the bills, but if we didn’t pay the bills then we’d end up being in trouble with the house and things like that, so, it was just like a snowball effect.” (John R4)
For those not in work, managing long term on benefits or a state pension could be difficult. Bobby (R6) lived by himself and was finding it hard to manage on his state pension:

“’Cause I had found a lot of problems wi’ ... how tae manage the money on my pension an’ that. Well the money I was using on the electricity an’ a’ that, and I’m a smoker, and that kind o’ ate away at it.” (Bobby R6)

Matthew (R11) was on Universal Credit and found it difficult to manage his money: “... I’d been trying to, like, survive on my own, sort of my own means, for a long time, but unfortunately when I paid bills and stuff, I’ve got very little left”. He was also awaiting a PIP decision: “I’m waiting on an appeal for my Personal Independence Payment... If I had the PIP then it would probably help me a little bit”. He explained the difficulties he found being on Universal Credit:

“So, ever since Universal Credit came in, it’s been a nightmare. Right, Universal Credit is basically... it’s like getting your JSA and your housing benefit in one payment. And you have to pay it out yourself. So, it’s on a monthly payment, so you would get two payments of, like, what you would normally get during a month, and then you would get your rent on top of that. I’ll tell you why, it’s because I’m used to actually not seeing the money from... for here, for my house.” (Matthew R11)

Others were either in debt or in arrears so that their incomes were reduced by deductions to repay what was owed. Maggie (R17) lived by herself with her pets and was in financial difficulties largely due to arrears and having debts to pay:

“The noo, they’re taking nearly £15 aff o’ me a week [loan]. Plus the fact they take off £3.70 for Poll Tax arrears, and they're taking £11-something... I don't know what that's for, they're taking that for. So – oh, and I'm left wi’ £182, that’s to last me a fortnight. And that’s also tae feed [cat and dog]... plus the fact that I was in arrears wi’ the electricity.” (Maggie R17)

Asylum seeker participants saw foodbanks as a necessary supplement to the money they were given to live on. Zina (R15) used the foodbank during her asylum claim because she and her daughter only had £96 a week to live on:

“Because we were in asylum, we’re not allowed to work, we’re not allowed to do anything... So while they’re on the case, trying to see if they’re gonna say stay or not, you are being given a house to stay, and you’ve been given some weekly money. But then, like me, I just have a kid, some people have three, four, five, so they need like access to foodbanks. So that is it, that’s how it works ’til your case has been either sent to leader, they say yes or no then you can forge ahead.” (Zina R15)

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34 Universal Credit: a monthly payment for people who are on low income or are out of work. It’s being rolled out in stages across the UK and is replacing other benefits.
Summary

The main reason participants used a foodbank was because of a financial crisis. Most participants were facing an acute financial crisis or had experienced a reduction in their income, leaving them with little or no money to buy food and other essential items. For most, the immediate income crisis was linked to the operation of the benefits system including waiting for benefit payments, sanctioning, benefit ‘mess-ups’ and delays. Other participants were simply finding it difficult to manage on a low income, whether they were living on a wage, benefits, home office allowance (if asylum seekers) or a state pension. Few participants had other means of coping or acquiring money from other sources.
**Wider circumstances**

In exploring the background to foodbank use we also wanted to understand what else was going on in people’s lives (apart from financial problems) around the time of their foodbank use. These can be understood as significant background vulnerabilities among users, and include coping with health conditions and mental health problems, having problems living in their neighbourhood, and experiencing critical moments or events in their lives.

**Health conditions**

The most predominant factor present among our sample of foodbank users was poor health, particularly multiple morbidity. Health and related issues reported by participants included a wide range of conditions. These covered long-term illnesses (e.g. diabetes, asthma, high blood pressure, cancer, lupus), mobility problems, and dependency-related conditions (e.g. cirrhosis of the liver, treatment for drug use, problem drinking).

Several participants of a relatively young age had experienced an array of chronic conditions. Zina (R15) was in her early 30s when she first used a foodbank and had recently been diagnosed with a severe form of lupus that constrained her opportunities:

“So when I went to the doctor, he was like, ‘No, you’re not fit to work’. And I came up again with shrinking lungs, I was breathless and stuff like that. Because like, seriously for like five days now, I’ve not been out of the house, because I’m a bit anaemic, too.” (Zina R15)

Ellen (R9) was in her mid-40s when she used a foodbank and said:

“An’ I’m a diabetic, asthmatic. So an’ I’ve had heart attack, I’ve had two minor strokes.” (Ellen R9)

Aisha (R1), also in her 40s, was dealing with her son’s illness when she was diagnosed with breast cancer. She explained the pressures on her own body from dealing with her own and her son’s illness:

“And high blood pressure now, after the cancer. And the diabetes. And the cancer tablets you need tae take... and injections I have to have... I'm looking after [son] an’ a’ that. [son] can't do anything himself. Cannae cook.” (Aisha R1)

Some participants described long-term and deteriorating health conditions with little possibility of improvement. Stephen (R16) was in his 40s with a background of homelessness and drug addiction:
“I’ve got a lot of damage to my knees with osteoarthritis, so she told me after about nine tae ten year I’ll have no decent mobility left. But the way my health’s deteriorated in the past three year I’m no’ gonnae get the full nine, you know what I mean? And it’s like my mobility’s and my life’s got [worse] and then they’ve just took my driving licence away fae me last week as well. And then wi’ my pancreatitis an’ that, and the diabetes, it’s... I’ve been constantly sick every morning for seven year, you know? ... So it’s a very, it’s no’ a debilitating illness but it’s a very incapacitating illness, and very lonely, and isolating, do you know.” (Stephen R16)

Sally (R18) was in her 50s and felt she had no hope for the future because her health and her habits were so poor and detrimental:

“Do you know, I think I’m actually too late, see wi’ all the damage I’ve done to myself through drinking an’ that. I think my body’s just, as I say, I always say ’if I was a motor, I’d never pass an MOT, or if I was a horse, I’d get shot’.” (Sally R18)

**Mental health issues**

A high proportion of foodbank users have chronic health conditions, and mental health issues in particular, as evidenced in the wider literature. Mental health issues were commonplace among participants and included stress, depression, attempted suicide, self-harm, anxiety, sleeping problems, worry, panic attacks, agoraphobia, and schizophrenia. In some cases, this pertained to employment-related issues. Sue (R8) had developed a lot of anxiety-related problems since her life circumstances had changed quite dramatically after losing her job through a work-related injury. She felt she was going downhill and appeared to lack appropriate support:

“Yeah, and just not having to get up every day and the responsibility of having to go, you know, a regime, a routine, nothing like that... And all of a sudden, after being married and having three children, running around after them for years and years, suddenly for the first time in my life I was on my own, as well... It’s just the anxieties got an awful lot worse. I kinda struggle to leave the house now, to be quite honest with you.” (Sue R8)

Debbie (R3) had a lot of stress and worry about what might happen if she got her hours cut at work or if her husband’s benefits were cut or taken away, and she feared they might lose their house:

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“Well, right noo I’m worried that the benefits is gonnae come back aff. So it’s so stressful because me dae’in my extra time gave me the security that I can actually eat an’ actually stay in my house. Do you know what I mean? Noo, if I don’t have his benefits I’m back through the same door, that I might no’ be in that house... It might have tae be that way. Just wi’ the stress and my anxiety an’ my insomnia, it’s kinda caused a bit o’ sleep craziness, if you want tae call it that. [I’m] Hanging on a thread. Hanging on a thread.” (Debbie R3)

Problems living in the neighbourhood

Several participants were psychologically vulnerable, which along with bad experiences in their local area, led them to not going out much and becoming isolated. Bill (R19) had recently come out of hospital where he was admitted as a psychiatric patient. He had complex mental and physical health problems and said, “I hate going oot. I feel as if everybody's watching me”. Edwin (R22) was suffering post-traumatic stress due to events in his home country and said he and his partner were having to deal with racist attacks and insults in their neighbourhood in Glasgow. He could not sleep and said he was “scarred... basically, I am living on paracetamol”. Maggie (R17) had been seriously assaulted in her home two years previously and had bad memories of living in her neighbourhood. She said she wants to live “anywhere out of here” and her family “never come near”. She called her house a “wee single end, that’s what I call that, because I’m always in there” as she tended to just live in her bedroom.

Critical moments

At some point in participants’ foodbank trajectories a variety of critical moments or events were noted that may, or may not, have exacerbated already difficult circumstances. Conversely, some critical moments had a positive effect, such as gaining a job or a new house. Critical moments can be turning points, or eventually become ongoing issues to deal with, for example the diagnosis of a health problem can be a critical moment in a person’s life but then becomes a chronic condition that needs to be dealt with in an ongoing way (as described above); a bereavement can be a critical moment, but the aftermath of grief and debt can also become ongoing issues.

Several participants had experienced bereavements of family members, particularly at young ages, or were dealing with grief issues, sometimes coping with this alongside dealing with other issues. For example, Aisha’s (R1) brother died unexpectedly in his 40s, Susan’s (R2) partner’s parents both died, and Samantha’s (R7) mum died age 44 from a heart attack. Matthew (R11) was still dealing with his dad’s death a few years previously and Edwin (R22) was experiencing post-traumatic stress since his son (age 21) was murdered through violence. Margaret’s (R17) husband had died suddenly some years previously and Bill (R19) had found his partner (age 46) dead at home.
Summary

It is evident that many foodbank users faced chronic and often multiple health problems, both themselves and within their immediate household. Mental health problems were also very common and both physical and mental health problems were sometimes linked to addiction issues (alcohol and drugs), although mental health problems were also sometimes linked to concerns about employment and incomes. A number of foodbank users had experienced and were still coping with bereavements within the family, which often exacerbated their mental health issues. The combination of having mental health problems, and experiencing unpleasant events in the neighbourhood (not necessarily linked to their mental health issues) had led several people to become socially withdrawn.
**Other means of support and coping**

Given that foodbanks can potentially help people in more than one way, it is important to understand what other means of support foodbank users had available, or in what other ways they sought to cope with their circumstances. People employ many different mechanisms to try and cope with longer term or sudden difficult circumstances, and the literature indicates that turning to foodbanks is often a strategy of last resort, drawn on as one of many ways to manage. People manage in a variety of ways including, other sources of food support for example from community initiatives, adapting shopping and eating habits, juggling rent and council tax arrears, and taking out short-term loans\(^\text{37}\).

We looked at the different types of support and coping that participants were in receipt of or required, and how they might cope without the security of foodbanks. Means of coping and support have been categorised as comprising informal and formal means. Informal means covers family, friends and other strategies. Formal means covers funding sources and organisational help and support. Community support straddles the two as conceptualised in Figure 1. This chapter discusses the different types of support that participants have accessed or discussed.

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Informal support

Family and friends

Many participants did not have family, friends or social networks to fall back on or to rely on for help or financial support. Rather, some participants indicated that they were very much alone and had no support. Stuart (R20) said he had no family; Sally (R18) and Bill (R19) only had neighbours for support; and Matthew (R11) had poor relations with his family and said he lived as a ‘hermit’. Fay and Edwin (R22) were originally asylum seekers and had not yet made any friendships or wider connections with people from the area:

“We don’t know nobody here, and have no friends or nobody that you could go and ask. Because it’s just us alone and we have no relatives, no friends.” (Edwin R22)

Those who did have a family often felt bad about asking for help, often because their families were in similar situations to them, or they did not feel comfortable asking for help, as in these examples:

“I’m no’ saying that I can’t borrow money but a’ my family are just the same as me, know what I mean? They dae get money but they’re skint.” (Amanda R2)

“I have got a sister who would maybe let you tap but, in the bigger picture, she might no’. Sometimes she says she would. But I don’t know if she would or no’. I wouldnae have liked tae ask her. I really wouldnae have liked to have asked her.” (Debbie R3)

In fact, for Jill (R12) and her family, the situation they found themselves in had a negative effect on wider family relationships. Her partner’s family did not help them out and blamed him for getting into the situation of needing to use a foodbank:

“I would say more of an effect with my partner’s family than my family. I feel as if, at the time, my family tried to help us as much as they possibly could. Whereas his family just didn’t want tae know. ... we now no longer speak to a lot of his family, it’s had a negative effect with his family, but I think that’s just – they just kind o’ didn’t want tae help out and things like that.” (Jill R12)

However, some participants had relied on their families in the past or felt they would have to rely on family members when things were bad:

“I’ve had to survive on going tae, basically, charity of friends and acquaintances, and my family.” (Matthew R11)

“Well I would have tae to go to my mum, she’d have gave me a few items.” (Alex R13)

“I would have had tae have basically moved in wi’ my daughter.” (Sally R18)
Other methods of getting by were discussed including taking payday loans, using places such as ‘Cash Converters’ to get money, and stealing.

Stacey explained the difficulty in using places such as Cash Converters because of the necessity of photographic ID:

“I would have probably tried to sell as much as possible in my hoose. Aye, but Cash Converters, you need a passport. You need a passport to go... We couldnæe because I didn’t have a passport. You’ve got to have photographic ID to go in and sell stuff. ...like even like [son] up the stairs, he’s got, like, Xbox games and things like that, and because he’s no’ got photographic ID, he would need tae get my husband to go in.” (Stacey R5)

Jill, and some other participants, felt that in the absence of the foodbank, she might have needed to turn to payday loans:

“I think it would probably I’d have to have turned to things like payday loans and that kind of thing.” (Jill R12)

A few participants talked about stealing things in the past, or needing to steal if things got desperate:

“Aye, for, on occasions I’ve nicked things.” (David R10)

“I’ve went in tae the supermarkets and like got [stole] like a loaf of bread or something, tae get by... As I said four year ago I would go shopping, say I had £5 for shopping, I would like nick like two or three items... Tae get me by, and they’d get me through.” (Alex R13)

“It might have meant getting intae bother or something and actually trying tae go oot and steal something for the sake o’ it. If we got that desperate.” (Stacey R5)

Some participants talked about how they opted for cheap meals or obtained cheap food when finances were scarce, whereas others said they just cut back:

“I would’ve cut back a wee bit [on food]. It was quite hard wi’ [son] ‘cause he’s a fussy eater. Me, I’ll eat any old thing.” (Aisha R1)

“I’d just go without. As long as she [cat] had food I’d be fine. Yeah, she’s my priority.” (Kate R21)

Debbie (R3) said that although she preferred to eat chicken she would buy cheap meat like mince, and Kate (21) talked about eating food like toast and eggs that were cheap:
“I buy cheaper things. I buy cheaper things because it’s a bit cheaper.” (Debbie R3)

“Just cut down everything, like keep bread, I buy bread, I buy eggs, so like make French toast or egg on toast or something like that. Just to keep us going.” (Kate R21)

Sally (R18) said she had lost her appetite – due to her medication and feeling depressed – and lived off biscuits and tinned soup.

David (R10) and Stephen (R16) had both been homeless previously. They knew the means of acquiring cheap or free food from alternative sources, and how to get out-of-date food like rolls and sandwiches through their contacts:

“I was in [resettlement service for recovering addicts]. And a lot of the time I would’ve managed tae scrape through... On a Wednesday they used to go and there was like a vending machine company, a roll company, but a bakers, that would all give you stuff that was going out of date.” (David R10)

“As I say, I was homeless for eight year. I mean I know where I can go up the toon and get a full breakfast for £1.50. Aye. And then you can get a free soup kitchen at night, and it’s – the sandwiches are still fresh, a lot out o’ they Pret a Manger... It’s whatever they’ve got left.” (Stephen R16)

None of the participants mentioned using or accessing community food projects, although there was some interest in this when it was mentioned e.g. growing your own food, and getting cheap meals through initiatives like lunch clubs.

Formal support

Funding sources

There were several examples where foodbank users had been helped through social funding (rarely termed the Scottish Welfare Fund38), either to provide, replace or pay for white goods, or in some cases to cover living expenses. Others said they had tried to get funding but had been refused, and some explained the difficulty in accessing funding.

Sue (R8) got some form of welfare funding – possibly a Community Care Grant – when she moved from homeless accommodation into a social rented home. The money enabled her to buy furniture, a bed and kitchen goods for her new home:

“I mean the social fund were great as well, because that’s what helped – when I initially moved in here, all I had was my TV, basically... they gave me, carpeted the

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38 The Scottish Welfare Fund provides a safety net for vulnerable people on low incomes through the provision of Community Care Grants and Crisis Grants. The Scottish Welfare Fund is a national scheme, underpinned by law and delivered on behalf of the Scottish Government by all local councils. The Scottish Welfare Fund replaced elements of the Social Fund abolished by the Department for Work and Pensions in 2013.
whole place, a bed, a double bed, a wardrobe, a wee two seater settee, all my white goods in the kitchen.” (Sue R8)

On another occasion Sue (R8) got an emergency payment for food and electricity:

“I had to phone the social fund, they were very good, they gave me a one-off payment of £80 for to help with food and electric and things.” (Sue R8)

When Aisha’s (R1) fridge-freezer broke down, she got a second hand one from charity and then she was able to get a new one from the Welfare Fund. She also got a washing machine and new carpets as she explained:

“The welfare gave me money tae buy a brand new one. No’ money, but they just... they give you it. From the Welfare Fund people... I got a washing machine, I got a fridge, I got carpets.” (Aisha R1)

David (R10) managed to get some money, although he did not know its source, by contacting his Welfare Rights officer:

“I think she did do that for me. See, at times, I think I did that get that from Welfare Rights. I think it was £60 I got.” (David R10)

Matthew (R11) said he had accessed all the social funding he was entitled to, and he had received a fair amount:

“You can get Scottish Welfare ones but you’re only allowed three and I used them all up. It was over the Christmastime. I managed until about February. That was – you tell them how much you need. It’s just for living expenses. You can’t ask, like, for rent, so... I might have got – maybe the first time I asked for it – I got about £200-odd, 257, I think it was. That was two years... about 2015 I think it was? And the last few times it was round about 150.” (Matthew R11)

**Difficulties accessing welfare funding**

Some participants talked about the difficulty in accessing social funding because they were not considered eligible or did not know the rules. Alan (R14) applied but said “they rejected me”. Amanda (R7) applied for a ‘welfare grant’ but was refused it:

“I actually just applied for a welfare grant... I actually just applied for one for my mum. My mum just passed away and I applied for one for clothes tae help me wi’ clothes, and I got refused, I never got a penny off them. So I had tae – like I’m struggling the noo ‘cause I’m in the situation I’m still paying towards her funeral, still had tae go and get my clothes and a’ the rest o’ it. The welfare’s no’ helpful, I wouldnae say, at all.” (Amanda R7)

Respondents implied that they could only get financial help if they were the victims of an
event, and if no one else could help. Alex (R13) explained that in order to be eligible for the money “something bad” had to have happened:

“If you phone up the social security and you’ve no money, takes two days and they put money in your account... But the only way they help you is if you’ve lost your purse, or if something bad’s happened. If they’ve not, then they tell you tae go to the foodbank.” (Alex R13)

Alternative sources of financial help also had to be absent. Kate (R21) applied for funding to help her when things were difficult but she did not get it because there were other people (adults) living in her house at the time who were expected to contribute:

“I got knocked back [welfare fund]. They said because there was still people in the house with money... Yeah, they’ve got their own but they’ve got their own things to pay.” (Kate R21)

For others, successfully accessing financial support depended on you being in the know. John (R4) was aware of the hardship fund but felt it was difficult to access for lack of information:

“I think there’s a hardship fund or something... But I think a lot of people, unless you really don’t know about the scheme, see nobody tells you anything, as far as the welfare system’s concerned, or where even the tax system’s concerned, no one tells you anything. So, unless you find it out, you will never know.” (John R4)

Those who knew about the system stood a better chance of success according to Sue (R8):

“Someone has told me about the social fund, that you’re better to make an application at the start of the month, because they’re allocated their money on a monthly basis... whether this is true or not ...but this is someone who works in Citizens Advice actually told me that. So if you apply at the start o’ the month you’ve got more chance of getting help from them.” (Sue R8)

Money advice from organisations

Many participants talked about getting financial advice and practical help from key individuals such as Housing Officers, Shelter advisors and Welfare Advisors, particularly at Money Matters (independent financial advice agency). Many had developed trusting relationships with such officials and this seemed key in getting useful advice and support about finances, and often practical help.

Occasionally, personal and direct financial aid was given. Susan (R2) talked about the good relationship she had with her housing officer who helped her out and gave her money for her electricity when she ran out of money for the power:

“[Housing officer] gave me... I think it was just a one-off but, because she just gave me 16 pound to put in the power, so... She helped me out. She’s really nice. ‘Cause I
had my rent tae pay, everything, an’ obviously I went tae her an’ was like that listen, I’ve no’ had money yet’ an’ she just helped me along, know, like just so I wouldnae get stressed oot.” (Susan R2)

Matthew (R11) also explained the help he got from his advisor at Shelter in relation to direct payments:

“Because I had that meeting with the advisor from Shelter, they’ve actually discovered you can get direct payments due to your circumstances.” (Matthew R11)

Discretion exercised by housing staff was also an occasional help. Jill’s (R12) housing officer told her not to worry about paying the rent when they were in financial difficulty which was a huge relief for her:

“The housing association were very good as well, they told me that I didn’t have to worry about the rent that month, kind o’ thing, they would add it into my arrears and then pay it off.” (Jill R12)

Several participants got help in sorting out their financial affairs and explaining what was going on. Jill (R12) talked about one of the advisers from Money Matters who helped out and offered home visits which she described as reducing the shame people felt:

“Well we were very lucky because we have Money Matters down the road... he’s absolutely brilliant. And if there is something that you can be referred to, he will make sure that he does it for you, he kind o’ goes above and beyond. And they also offer house visits as well ...So instead of having to go down and kind o’ everyone in the housing association sees you going, he’ll come up to the house and sit and discuss all your personal stuff in the house as well.” (Jill R12)

Kate (R21) also got help from Money Matters in sorting out her ESA appeal and other money issues:

“I go to Money Matters for that. They’re helping me out ‘cause they’re trying to get the appeal for this. They actually are good, they help. Well if you’re not sure of something, I just take all my letters down and say, look. Especially wi’ the housing, all these letters you get. They send me letters out about £14.95 they’re taking me off, and I’m going back, ‘what for?’ And so, got all them ready to take down to let her sort out.” (Kate R21)

Stuart (R20) was finding it difficult to pay back a crisis loan because they wanted £7 every fortnight and he could not afford it. He got help from his Welfare Advisor at Money Matters who managed to reduce his payment to £5 a month:

“If you get a crisis loan aff them, they’re wanting the money straight back aff your benefits. ...So I went doon to Money Matters and appealed against it. I says, ‘I’m no’ paying £7’ ...and [advisor] phoned up and says, “[Stuart’s] no’ paying what he’s
paying, any chance o’ you cutting it down”? And they couldnae be any nicer, they cut it right doon to maybe £5 a fortnight.” (Stuart R20)

Stephen (R16) explained the help he got from the Welfare Rights worker, based in the voluntary organisation he used to work for:

“But I was actually quite fortunate that the place where I done my volunteer work driving for a lot o’ years, I knew the welfare rights guy, you know, and he sat me down and explained what had happened. And God knows how normal people must feel like that, you know what I mean? You don’t know if you’ve got money coming in, you’ve got debt, you’ve got gas, do you know what I mean? And I was quite fortunate, he explained that I would be all right, you know.” (David R16)

But it is also worth noting that not everyone was getting help in this respect and there was lack of discussion around financial help for some participants (e.g. Helen, Sally and Bill).

**Provision of goods**

Examples were also given of help being received in the form of providing necessary goods. This included Maggie (R17) who got help from the church minister when she could not afford warm bedding and was finding it cold at night. The minister and his wife took her to Tesco to buy her a quilt and asked if she needed any shopping whilst they were there:

“...I didnae have a proper quilt, a heavy quilt to keep me warm, and, like, she was very nice, him [church minister] and his wife, they took me down tae Tesco’s in Rutherglen and they bought me a heavy quilt. And he asked me if I needed any messages. I says ‘no’. He went ‘are you sure?’ I went ‘aye’, ‘cause I’ll no’ take what I don’t need.” (Maggie R17)

Another example was Matthew (R11) managing to get a washing machine by contacting the charity, Shelter:

“Shelter actually helped me to... put me in touch with a charity which I just got a delivery of a new washing machine yesterday. It’s the first time a washing machine’s actually been in this house.” (Matthew R11).

**Support with health and multiple problems**

Most participants were in receipt of support from a range of agencies, particularly if they had health and social complaints or conditions. Some got support for a specific condition e.g. Macmillan nursing support for cancer; Community Psychiatric Nurse (CPN) for a mental health issue; counselling for post-traumatic stress. Relationships with professionals such as GPs, other health workers and housing officers were mixed but generally positive.
There were some participants who admitted they might need more help but were reluctant to ask for it and who worried about the implications e.g. getting a social worker involved in their family difficulties and what it might lead to; counselling opening ‘a can of worms’.

Sally (R18) was struggling with getting off methadone and alcohol as she explained:

“They came up and they were asking me was I getting any help wi’ my drug and drink thing, you know, my methadone? I’m saying drugs but methadone and alcohol. And then I said ‘naw’, but I meant tae say only because I’ve no’ went an’ asked for help, but they’ve only took it upon theirselves, wrote a letter to my drug counsellor, he’s passed it on to my doctor.” (Sally R18)

Amanda (R7) had lots of problems associated with her childhood, depression and grief but was not receiving any official help and said “I just kind o’ solider on in life, so I dae”.

However, most participants who were dealing with complex issues and conditions appeared to be getting appropriate levels of support from multiple sources, and were mainly positive about the help they got, as indicated by the following examples.

Sue (R8) was receiving help from Community Alcohol Support Services which led on to her getting help from an Occupational Therapist for her physical needs as well as her anxiety:

“So she put me in touch with her and she was an outreach worker and she would come out and visit me like once a week and she also put me in touch with the occupational therapist who was able to help me a lot wi’ the anxiety but I’ve got it all up there, it’s the actual practicalities of, you know, putting it into motion and making it work is a whole different ball game.” (Sue R8)

David (R10) was receiving a lot of help for his alcohol addiction and previous homelessness problem. He had been on a Recovery for Men programme, had a Community Addictions Team (CAT) worker, employment support worker and was involved with the Mungo Foundation. He had also done voluntary work:

“I went into Recovery for Men. Which was five days a week. Like it started at ten and it was on tae half 12 say. But it made you feel like you were part of society again.” (David R10)

Matthew (R11) had a range of mental health, personal issues and financial problems. As well as a lot of financial support from various organisations, he was getting an array of helpful and practical support from organisations including Shelter39, Carr Gomm40, Epic 36041 and the Preshal Trust42:

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39 Shelter is a charity offering housing and financial advice.
40 Carr Gomm provides accommodation linked and visiting support services with a focus on supporting people with mental health problems, learning disabilities, older people and physical disabilities.
“Going through a welfare officer and through likes of Shelter and stuff like that, you know? And I’ve been getting a lot of support that way.” (Matthew R11)

“There was an advisor there (Epic 360) that I was referred to by my doctor, kind of like a welfare sort of like thing. I had to give him the background of what’s been going on in my life and stuff like that, but he just… kind of points us in the right direction of where we could potentially try to bring back out to... feeling normal again.” (Matthew R11)

“My support worker’s brand-new. I’ve got two. Well, what they were trying to do is – because my anxiety was so bad at one point and I never left the house – and they were basically just trying to coach me to, kind of, get back out in the outside world again.” (Matthew R11)

Alex (R13) was receiving help from her Community Psychiatric Nurse (CPN), addiction worker and physiotherapist:

“I’ve got my CPN an’ that so I have. And my addiction worker... Well one’s a clinical nurse, like doctor, and the other one’s just for my addiction. Yeah, the CPN is for my mental health and the addiction worker is about my addiction... And I’ve got the physiotherapist. And I think they’re gonnae put me into the occupational therapist tae get me like, basically, ‘cause I can’t stand and do the dishes as much now, like they say. And things like that.” (Alex R13)

**Community support**

*Volunteering and training*

Only a minority of participants were involved in community activities. There was some interest in having more things to do locally and better community support.

Only a few participants were actively involved in community activities and/or volunteering. Most notably, Zina (R15) was very active in the community, doing voluntary work, involved in local organisations, the church and local activities. She had a chronic condition and said “If there’s anything that could take me out of the house, I sure will do it because sometimes me being in the house makes me really sick”. She both helped as a volunteer and made full use of her local community centre for her own benefit:

“I’ve started voluntary [work] with the Prince and Princess of Wales, I’ve done with Heart and Stroke, and the Scottish Refugee Council and the Truth Commission now... I know Whiteinch Community Centre here. They used to do a lot but most of the programmes, they kind of are programmes I have gone through. Literacy, computing... I did most of it with the YMCA... Literacy, admin, and stuffs like that. So

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41 Epic 360 is a financial capability project which covers budgeting, spending, saving, credit, debt, wellbeing, and financial products and services.

42 The Preshal Trust tackles problems such as drug and alcohol addiction, low literacy and numeracy skills, loneliness, depression and low self-esteem.
most of the thing that comes up there is things that I have done. Even with yoga, there’s a yoga community campus too, I did keys to skills or something like that. Did carpentry, cookery and stuff like that. So most of them that comes up I, I’ve actually done them.” (Zina R15)

A few others had experience of voluntary work – Stuart (R20), David (R10) and Stephen (R16) – which they generally found positive but did not sustain:

“I want to get back into the voluntary work again, ‘cause it gets, like on my CV there, it gets me a chance, well give me a full chance of a full-time job.” (Stuart R20)

Need for more activities and social opportunities

A number of participants indicated they would like more opportunities to be involved in things, but that there was little to do and few opportunities available in their neighbourhoods.

When asked what there was for the local community Kate (R21) replied: “there’s nothing here that I know of, no”; and Fay and Edwin (R22) replied: “I never heard nothing like that... Only thing is just in the church across the road, by the bus stop, you know the church? Parent and toddler groups... things for babies”. Stuart (R20) said “There’s nothing for us here. Most of the community work, it’s all based oot the way, you know right, going into Glasgow city centre or something that way”. Bobby (R6) said there used to be a community café: “but they done away wi’ it, because one o’ the women went in for a hip replacement... so they basically shut it down. Aye. It was quite popular, as well”. He said there was little to do locally except meet up in Greggs the bakery.

These comments indicate that either nothing, or very little is available to meet the people’s social needs, or that they lack awareness about things that are going on.

Quite a number of participants expressed a desire for more social opportunities. Debbie (R3) had tried counselling for her anxiety but not found it very useful, and felt more opportunities to get out and talk to people would be helpful. However, she worked during the day when most activities were happening:

“The church used to dae, like, a wee coffee morning an’ it was likes o’ tae have a wee chat, but it was always through the week.” (Debbie R3)

The need to have somewhere to go and talk was echoed by others such as Aisha (R1):

“Just somewhere tae go an’ [for]... a bit o’ company. Something to do. I know the library sometimes does jewellery classes an’ sewing an’ a’ that. I’m no’ interested... I don’t think there’s any up here. I think the churches do the lunch clubs. Sometimes you pay, sometimes you don’t. Normally the library tells you... But I think a wee bit more should happen. There’s still no sports centre here or anything. They don’t have any community centre tae sit.” (Aisha R1)
Alex (R13) was also experiencing difficulties because she was on the methadone programme that involved a trip to the chemist daily, and had pain and mobility issues. She recognised that having some place to go to get her out of the house might be beneficial:

“I have to go tae the chemist to get my medication every day, but it takes me a long time... I feel that yeah, maybe, sometimes, just to get out of the house. ...Now the weather’s getting better... maybe get to a park or something, you know what I mean?” (Alex R13)

Rather than poor health being a limitation, for others it was childcare commitments. Amanda (R7) thought a place where adults and children could get together would be good for the community. She had a young daughter and felt there was little available for people to come together in informal surroundings:

“Somewhere that the kids can go in, even a book shelf. ...Go round the schools at the play time, speak the parents, would you happy tae take part in painting and the community helping put the café together, and then the community right, no crap but there’s some good books she’s no’ using any mair, there’s some good toys. Put it in tae a wee corner in the café so when the younger kids are in, the parents kinda get talking where there’s stuff for the kids tae dae, but it’s a’ donated.” (Amanda R7)

In other cases, not knowing how to join in was the issue that constrained people. Sue (R8) had lost the structure in her life since losing her job. Her health had declined and she suffering from anxiety. She was really keen to get her life back on track. She had noticed things happening in her community but, like many others, was not sure what they did or how to access them:

“But I’ve noticed now that it’s some kinda community place, and it’s got a wee community garden and... I actually went online last week and looked it up, because I’d driven past it and I thought that’s a lot of people coming and going there and wonder what exactly it is. And I thought, ‘if I could get myself into something like that, even to try and get out.’ Just to try and say, like, once a week to try and go somewhere and get a wee bit o’ structure back and meet people and you know just... I think just the social aspect of it, you know.” (Sue R8)

Community food opportunities
There was some interest in being more involved in community food initiatives, but little awareness as to what types of projects were happening or how to get involved. As discussed in the Introduction, this indicates the potential role of the community food movement, particularly if it can reach out to those who might benefit from this type of support, providing a positive social experience at the same time as access to food.

John (R4) was aware there was a community garden locally but said “I’ve never seen how to get into it”. He had managed to get his own allotment and knew that there was a mental health organisation that worked in the allotments that he might be interested in finding our more about:
“In the allotment... There’s mental health that works there – I can’t remember the name of the organisation – that work in the allotment, they have an allotment.”
(John R4)

There was some interest expressed in food-related social opportunities, be it growing or cooking. Debbie (R3) said she would have been interested in growing food and learning how to cook better:

“Well, growing your own food would be good an’ maybe even making, even learning how tae dae a bit mair cooking would be good. You know, ‘cause sometimes you can make good bits out o’ less food if you know what you’re dae’in.” (Debbie R3)

“You know like cookery classes, baking classes, foreign language, anything.” (Sue R10)

Susan (R2) was keen to get more involved in community activities such as growing food: “that would be brilliant, wouldn’t it? Growing your ain veg. Aye. It would save a lot o’ money an’ that, wouldn’t it?”. However, she found it difficult to leave the house by herself but felt if there were more opportunities then she might be more inclined:

“There’s nothing for you tae dae, know what I mean? There's no... except for if you want tae go for a wee walk at the park or, obviously, take the dog out. That’s the only thing I do. I don't go oot the door ...Even when it’s nice days, know what I mean? You’re getting people oot there, thingmying the sun, an’ I’m sitting in the hoose.” (Susan R2)

**Summary**

Many foodbank users lacked family or social networks that could provide financial or food support for them and hence they often considered payday loans as a main alternative to foodbanks in times of crisis. Some people had made use of the Scottish Welfare Fund and its predecessor for emergency payments, whilst others had been unsuccessful in this regard.

Housing organisations and welfare advice agencies were important sources of assistance for several people, and those people with complex health and dependency needs were often in receipt of multiple forms of support from health services and charitable organisations.

Involvement in community activities was not common and there was a widespread desire for more social opportunities and for greater knowledge of how to participate in those community projects that did exist. Health conditions, childcare commitments and, in some cases, being at work during the day, also limited participants’ abilities to participate. A few people considered food-related projects to be one means by which social opportunities could be expanded.
Attitudes to using a foodbank

There is a lot of stigma and embarrassment associated with using a foodbank which is partly related to how foodbanks have been portrayed (in the media and elsewhere) but also how using a foodbank and relying on charity makes people feel about themselves. Findings from other research shows how the majority of foodbank users experience stigma, fear and embarrassment which can be aggravated by representations contained in ‘poverty porn’ television shows, and the practice of ‘othering’43. This chapter covers the emotions that people expressed prior to using a foodbank, or linked to their initial concerns about going.

The unexpected last resort

Being in the situation of having to use a foodbank was seen as negative and as a last resort for many participants: “as if I was begging” (Kate R21) and “I was desperate” (Aisha R1). Compared with other forms of help and welfare, foodbanks appear to have much deeper effects on people’s sense of self and worthiness. For some, foodbank need and use indicated a failure, or demonstrated a deficit in a person’s character or ability to cope.

Many people never expected to ever find themselves in such a situation as to need to use a foodbank. John (R4) said “I felt really degraded and just felt horrible”. He had worked all his life until he got made redundant and then became ill with a brain-related condition meaning his whole life circumstances changed. Previously he had been able to provide for his family but he had found himself in a situation of having no money and constantly being assessed for his fitness to work. He added: “it’s hard tae ask for help. Because you’re an independent person, everybody is”.

Sue (R8) also said “I’d never expected myself maybe to be in that situation, maybe ‘cause people don’t”. But she had endured a series of life events that turned her life upside down including marriage breakdown, being homeless, losing her job and developing alcohol problems and other health issues. Amid all this, her benefits had been stopped because she was in the process of applying for ESA, so she had no money at all.

Foodbank use came as a shock to those who had a job. Jill (R12) said that she had heard about foodbanks but never imagined herself to be in the same situation as other people who were struggling:

“I thought it was mainly for people who were struggling and it’s one of these things where you know of it, you hear about it, but it doesn’t really affect you, it doesn’t come into contact in your daily life so you don’t really put much thought into it. I knew it was to help people, but I thought it was more people who were maybe having trouble with benefits or on like very low incomes.” (Jill R12)

However, Jill’s (R12) hours at work on a minimum wage got cut back and there was no prospect of any extra hours. She had to support her partner, who was not working at the time, and her mum. She said “It’s not one of these things that you would ever think that you would have to use”, adding “I think it really, really badly affected me at the time psychologically and emotionally”.

Relying on charity

Some participants made specific reference to the notion of having to get food from charitable sources. There was something specific and unsettling about not being able to provide for yourself and your family; something as basic as food was an item many people felt they could and should be able to provide without relying on charitable sources.

Some people felt guilty for relying on charitable food. Susan (R2) had a partner and daughter at home. She said that being able to get food from the foodbank “makes me feel good [but it also] makes me feel bad at the same time because I cannæ afford tae feed my wean or my partner”. She felt guilty because her daughter had said that she wished she could help out with the family’s problem:

“[daughter] said ‘Mum, I wish I had the money. I could help you oot for this, that, the next thing’. An’ that shouldnae be on her mind, worrying about know how, like, her mum an’ dad, where the next meal’s coming fae or whatever.” (Susan R2)

Because their need was for food, people felt they had no choice, especially if they had family members dependent on them. Amanda (R7), who had a daughter at primary school, said she was “in a situation where it was either bite the bullet and get the food, or my daughter goes wi’out... a situation a mother cannæ make it, you need tae go”. John (R4) said “the last thing on Earth you want to do is to depend on anyone else for your family’s food. But we’d no choice. And it just feels really, really degrading and horrible”. Fay (R22) felt sad that she had to use a foodbank otherwise her son would have nothing to eat for breakfast and go to school hungry. When they were in complete dire straits, with regard to income, it was the only way the family could obtain food and she could feel confident sending her son to school:

“He have to go to school, you can’t call and say your child can’t come to school he had nothing to eat, because they [will] call the council... I can’t send him to school if he had no breakfast and nothing like that.” (Fay R22)

Using charity for food made people feel ashamed and damaged their pride, as demonstrated by Debbie (R3) and Matthew (R11):

“It was a bit o’ shame because you’re thinking it’s basic needs, as in for food, that anybody can have food. And the fact that [partner] had been working for a’ that time and yet you still cannæ buy your food. So you were a bit ashamed ...It’s just I cannæ afford it, I’ve no’ got any money.” (Debbie, R3)
“Because there’s nothing worse than having nothing and having to go and get food from someone... because I was quite proud of being self-reliant.” (Matthew, R11)

Embarrassment and other emotions

The main emotion produced by needing to use a foodbank was embarrassment, but participants also talked about shame, desperation and feeling scared, small, nervous, grim, and ashamed. For example: “I was a bit scared” (Susan R2); “Small, nervous” (Bobby R6); “[felt] little frightening” (Fay R22); and “Felt really grim” (Sue R8).

The overwhelming feeling, however, was of embarrassment and not feeling comfortable about using a foodbank, among both men and women:

“I felt quite embarrassed the first time I went, right enough. And that was me on my pension, I still had to go.” (Bobby R6)

“...feeling actually quite embarrassed about it and like almost ashamed that I hope nobody knows why I’m going in here, and I hope I don’t meet anyone in here that I know.” (Sue R8)

“Other people were saying to me that that’s what it’s there for, so, why be embarrassed? But you dae, because when you’re no’ used tae going tae places like that, you dae get embarrassed.” (Maggie R17)

A couple of participants did not feel embarrassed themselves but recognised the embarrassment in others attending. Putting it into perspective, Stephen (R16) said that because of his background and lifestyle, he was not shocked but knew that others were:

“And because I’ve been oot and in prison and in hostels where it’s no’ easy ...going tae soup kitchens, I didnae find going tae the foodbanks that shocking, not much of a shock.” (Stephen R16)

It was rare that people viewed foodbanks in a matter-of-fact way, as Zina (R15) did, although she could readily identify the embarrassment in others:

“I have come across people that are really ashamed to say they go to foodbanks. They don’t like saying it. I’ve met people in foodbanks that I saw them and they kind of were a bit shy, and I was wondering why – you understand? So I know – I don’t know how it comes across to some people, you know, but I know I’ve met people... But for me it’s – it’s just a set of people trying to give out a helping hand, you know?” (Zina R15)

Some participants talked about the embarrassment of people seeing them going to the foodbank. There were concerns that they might be seen by people from the area who knew why they were there, might bump into people who know them, or that people might tease them for using a foodbank:
“An’ he told me aboot it. It was actually in the, he said that they just gie you food. I was like that, ‘Is it no’ embarrassing?’ But, know, ‘cause people walk by. But… at first I kinda hid my face, turned away an’ that if I seen people I knew. D’you know what I mean? But after a while I just didn’t bother.” (Ellen R9)

“Don’t know, just because I thought if I went, people would know me and take the micky out o’ me.” (Alan R14)

The stigma of foodbanks

Stigma was a key underlying concern for people; the process of having to collect a voucher, obtain a ‘food parcel’ and potentially bump into people who knew what you were doing was highly stigmatising for many and linked to feelings of failure, exclusion and shame. This feeling was linked mainly to the expectation and anticipation of using a foodbank, but for some it was also part of their experience. For some participants, using a foodbank meant that other people looked down on them: “like a piece of dirt”, “garbage” or “worse than a dog” were some of the comments made.

Amanda (R7) explained why she felt this way:

“I know loads o’ people that dae it, so there’s kinda a stigma wi’ foodbanks for people – it’s embarrassing tae go tae – so I was quite a wee bit, ‘don’t really want tae dae this, I’m gonnae need tae walk in, it’s gonnae be people from my area, they’re gonnae know I’ve been there, they’re gonnae see me wi’ totally different bags, it’s obviously no’ my shop...’ I had a lot, quite a lot I’d going on.” (Amanda R7)

There was a (mis)perception by a minority of participants that foodbanks are used or abused by people who do not really need to use them. This relates to the concept of ‘othering’ as previously mentioned by which people in disadvantaged circumstances can internalise public discourse about the ‘deserving’ and ‘undeserving’ poor. Through this process of differentiation and demarcation a line is drawn between ‘us’ (legitimate foodbank users) and ‘them’ (abusers of the system) through which social distance is established and maintained. Thus, some people were concerned not to be classed the same way as illustrated by the comments made by Amanda (R7), Stacey (R5), Zina (R15) and Maggie (R17):

“There’s a lot of stigma about foodbanks, because they are abused by the wrang kinda people, people that don’t need them... like they’ll spend their money on their selves, and then live aff foodbanks.” (Amanda R7)

“I didnae really want tae go at the time because I thought ‘Right, it’s gonnae be like... Like, the people that stand about the shopping centre, like you’ve got your drug addicts and you’ve got your alcoholics and things like that, and then it sort o’... So, I felt as though I was lowering myself tae actually dae it, but I really needed it at the time.” (Stacey R5)

“But except people just come there for selfish reasons, that’s why they should be –
actually maybe, some people that are capable but they, because they know they can get stuffs there, they just come.” (Zina R15)

“And then I’ve saw a person that stays roon’ the corner there, he’s single – I think if your face fits, you’re okay – and some of the foodbanks, he goes. Now, he’s only single, I’ve seen him coming out wi’ five bags of messages. Which he shouldnae be getting that much, because he’s only on his own.” (Maggie R17)

This view is contradicted by others who explained that it was difficult to get a referral to a foodbank, so you had to be in genuine need in order to qualify for a foodbank referral (eligibility):

“[for use] Just in emergencies. I think that’s the way the council, or if your money’s stopped. But I don’t think you can go all the time.” (Aisha R1)

“I can’t see anybody just doing it for the sake of doing it.” (John R4)

“You had to prove that you were worthy of it, that you needed it... People can be skint for different reasons. I’m skint... because he’s no’ working. Some people could be skint because they’ve maybe got debt. Whatever your reason is, doesnae mean that you’re no’ entitled tae it. It’s just that you’ve got tae prove it.” (Debbie R3)

Several participants opted to use a foodbank further away from their home so that they could be more anonymous, including Jill (R12) who lived across the road from her nearest foodbank but chose to use one a bus journey away:

“I think the other reason why we chose the one that was slightly further away, just to keep going to that one, was the fact that no one knew you there. I think that played a big part in it, as well, is the fact that I wasn’t quite ready to let anyone know that we had to use a foodbank.” (Jill R12)

Most foodbanks are in church halls or community centres and are not obvious to people who are not using them. Some however have a banner outside making them visible to others who would know why you were attending. This was an issue for some, including Amanda who saw it as stigmatising:

“But when I got in, as soon as you’re in they doors, the only thing is they put ‘foodbank’ outside. So it was a big sign, so it was kinda like marking you walking in, people knew what you were going in for, it’s a busy road, so – and then you don’t know if it’s people knowing you driving past and, it’s just me, I’m just embarrassed about things like that, not everybody would really care but I think the fact that it had “Foodbank Here” I was like, oh my God I need tae go in here.” (Amanda R7)
Summary

Many foodbank users were surprised, embarrassed and ashamed at having to resort to charitable sources for a basic need like food. They particularly felt guilty and a failure if they had others depending on them for sustenance. People considered having to use a foodbank as stigmatising as it signalled their failure to others. Some, despite being users themselves, subscribed to the view that there were others who ‘gamed’ the system to get free food (i.e. scroungers to use common parlance) and they were anxious about being considered part of that group. These feelings were heightened where the foodbank they used was readily identifiable as such; people preferred to be anonymous in using a foodbank.
The experience of foodbank use

Accessing foodbanks

In this chapter we look at how people experienced the practical aspects of getting to and using a foodbank. Table 5 (Appendix) summarises the pattern of use for each participant including: source of referral, identity of foodbank(s) used and frequency of use.

Referrals to foodbanks

Referrals to foodbanks (see Table 5, Appendix) came from a wide range of sources, including: Housing Officers; Job Centre; Social Security; Money Matters (Independent financial advice service); Drumchapel 3D (charity project for children and young people); Health Visitor; CAT worker (Community Addictions Team); Moving On Housing Association (transitional housing); CPN (Community Psychiatric Nurse); Occupational Therapist; asylum case worker; Loretto care manager. Only two participants had not had a referral.

Requesting help from service organisations

While some participants requested a direct referral to the foodbank themselves, referrals to foodbanks also involved participants requesting help for financial problems and foodbanks being offered as a first-line solution, as illustrated by the following examples:

“I went down and asked if they had any help and they suggested, ‘well, we can give you a foodbank voucher’, so, it went from there.” (Matthew R11)

“I’d went to the doctor and I told him how dire our situation is, ‘cause we’d been refused benefits – although I’d worked all my life and been made redundant... we were in dire straits, we’d not enough to cover our bills and have food. So, it was either food or the bills, but if we didn’t pay the bills then we’d end up being in trouble with the house and things like that, so, it was just like a snowball effect, and the doctor says ‘well, look, I can give you a letter to take to a foodbank’, and I was like that – and that’s how I got introduced to foodbanks, where they were, and so I looked up on the Trussell Trust.” (John R4)

“We had went down to speak to the advisor that works down in the housing association to see if there was any benefits my partner could get, or anything we could do, and that’s when we were advised the only thing that we could do is use the foodbank. And we were told that you can get – you could get the vouchers at the time from the Law Centre. So I went down to the Law Centre with my partner, and we filled in all the paperwork for it and things like that, and they gave us tokens.” (Jill R12)

“So, money did run out... And then the Jobseeker’s place give us a voucher to go to the foodbank.” (Edwin R22)
Identification by health professionals
Some health professionals identified a person’s need and suggested foodbanks to participants whom they felt were struggling because of their circumstances, as in the cases of Stacey (R5), Amanda (R7) and Sue (R8). Stacey (R5) was involved in a local charity working with children and families, and had a good relationship with one of the workers there. The worker from the charity knew of Stacey’s circumstances and had suggested she got help from the foodbank. She took her there in person as Stacey was initially embarrassed about having to go, and completed a referral sheet:

“...it was a referral sheet and [worker] actually came up wi’ me, actually at the time – Aye, she’s a worker there. She took me up because I was like... ‘I know it’s up there but I don’t really want tae go’... And on that day, it was an emergency supply that she’d gave me, so, she took me to the main office and that’s just right across the road fae it.” (Stacey R5)

Amanda (R7) had a young child at the time and was being seen by her Health Visitor who knew of Amanda’s difficult circumstances with her partner going to prison. She had suggested that Amanda use the foodbank and got her a referral:

“So my health visitor it was at the time.” (Amanda R5)

Sue (R8) managed to get a referral from her occupational therapist:

“I was seeing an occupational therapist because I’ve had a lot of health issues... and anxiety, and things like that. She was able to get me one as well through her job.” (Sue R8)

Difficulties making the connection to foodbanks
Some participants commented that foodbanks were not advertised or were initially difficult to access. Some only found out about them through word-of-mouth:

“The housing told me... Yeah. They don’t advertise things like that so you just need tae find it...” (Aisha R1)

“Well, I’d met a lady on the bus, she had just been fired fae her job, her husband wasnae working, an’ a neighbour had told her that there was a wee help that you could get, as long as you can prove that you didnae have anything. You had to prove that you were worthy of it, that you needed it. She told me aboot them in the community centre but when I looked at the community centre I never seen anything.” (Debbie R3)

While most referrals appeared straightforward, some participants explained that this was the most difficult part. David (R10) had the ‘hassle’ of getting a voucher from the Job Centre and trying to navigate his way through security there. The second time around he was referred by his CAT worker and said that was much easier.
“...it’s getting the voucher to get to the foodbank is the problem.” (David R10)

“I was referred by my CAT worker, social worker, to the foodbank after I had my initial experience of going to the job centre, then I found out through my Community Addiction Worker that I could get the referral. So, that took out the element of the uniform and the wall to get past.” (David R10)

Debbie (R3) waited several hours at Money Matters with all her financial documents in order to get a referral voucher:

“I think we waited seven hours. It’s a ticket an’ you’ve got tae be... we’re savvy now. You’ve got tae go at six o’clock in the morning... It doesnae open at six. It doesnae open tae half eight but you have to be there at six in the morning. I think we were lucky tae get... maybe we were number eight or ninth in that day that she was gonnae take us.” (Debbie R3)

Amanda (R7) explained the difficulty in getting an appointment with a Housing Officer or GP (which could take two weeks to get), which meant you had to wait even longer when the purpose of a foodbank referral was that it should be instant:

“It’s no’ as easy, because then the housing officers – you need tae get appointment, GPs you need an appointment. I had tae go in and make an appointment there wi’ my GP, and I made that last week and that’s no’ until next Monday... So it’s like two weeks. So if I had said tae my GP when I go and see them “I need support wi’ a foodbank,” then I would be waiting nearly two weeks ‘til I even got an appointment.” (Amanda R7)

“So I don’t actually know anybody that you could walk in tae and directly get – the job centre doon there have nae time for naebody... just they’re awkward. So there’s naebody that I know tae – like say for instance [if] I needed it today.” (Amanda R7)

Some foodbanks (independent ones linked to churches) had no referral system and you just turned up, although you still had to give your personal details and prove that you had little money upon arrival:

“I just went up there. But, as I say, back now, it’s... noo, it’s worse, I think. You’ve gottae have proof... Aye, a letter. I think I did manage tae get something, you know, saying that I wasnae getting any money.” (Sally R18)

“If you’ve got a care worker or something like that, they can refer you. You get a wee list, a letter, you take it up, you register, you only get about four weeks there but... No you can just go.” (Bobby R6)
Location and frequency of foodbank use

Most participants used the ‘big’ foodbanks – either Trussell Trust or independent foodbanks that operate similarly in that you need a referral (pink voucher) in order to access them (see Chapter 1). Only two participants made direct reference to the term ‘Trussell Trust’. People are given the location of foodbanks operating closest to their home at the next convenient date (or they can select a different foodbank located somewhere else), and then turn up at a given time. Where a referral is required (pink voucher) the person’s name is on a list when they arrive. Some participants were vague regarding where the foodbank was e.g. “it was in a church up the hill next to...” and therefore it proved difficult to verify all the foodbanks referred to.

A few participants used ‘alternative’ foodbanks such as an Asian foodstall set up outside a shop, church foodbanks and a van. For these, a person did not require an official referral, although they still had to give their personal details on arrival in order to access the facilities.

Most participants talked about a clear procedure where you turned up at the foodbank and were dealt with relatively promptly. Few participants mentioned having to wait or there being a queue with the exception of certain busy times, but in general this was not a concern. No one encountered any specific problems in being able to find or locate a particular foodbank:

“I was [in] straight away... it was just me walking in, there was a couple o’ other people there but as soon as I went in I got dealt with straight away, aye, there was nae waiting aboot, there was no queue, I had nothing like that.” (Amanda R7)

“It’s always busy... I think ‘cause it’s only a couple hours, you only get certain days.” (Aisha R1)

“There are loads of people there, lined up.” (Zina R15)

“So, really, you see some weeks when we were going up there, there was over 50 people.” (Stacey R5)

Frequency of foodbank use ranged from one visit in total to a visit every week for over a year. The earliest foodbank use reported was in 2012 and the most recent on the day of the interview (May 2017). Some participants were vague regarding when they had used a foodbank, especially if it was several years earlier.

Physical access issues

The main problem with accessing foodbanks was that most were a distance from where people lived. Although this was often a short distance in terms of miles, it often necessitated a long walk, bus journey or car travel and there were heavy bags to carry on the return trip. It seems that people were often not informed that they would be carrying heavy products back, and may need to get someone to help them or give them a lift, or consider bus or taxi
costs, which was considered to be a counter-productive expense. In some instances the foodbank gave people money for a taxi or they were given a lift home by foodbank volunteers. The following quotes illustrate the accessibility issues for several participants:

“It was a wee bit far out. That was the only problem... The thing wi’ the bus was you got off, you had tae walk. So I walked down so I know where it was an’ I came back in a taxi ‘cause... Yeah, but it was quite heavy as well. They gave you quite a lot o’ stuff. Twenty-minute walk. Aye, it was quite a lot. I should’ve taken somebody with me. I dinnae know how it worked, I was better just going... Well, on the second time the man actually gi’ed me a lift home.” (Aisha R1)

“You’ve still got a big, massive hill to go up. ...So, and there’s only one bus that goes to it. So, ‘cause I’ve got a companion card, we got it. Sometimes we got the bus up, but that was only if the bus was sitting there, so, if the bus wasnae sitting there... Like, I’ve got holes in the bottom of my shopping trolley and everything noo and it was really hard just trying to get... But some of the time, the foodbank actually paid for taxis for us.” (Stacey R5)

“Apart from the fact when I didn’t have my bus pass, I’d have to get, like, go there and then carry it all the way back. Two bags full, you know.” (Matthew R11)

“Well the first time I went by myself, just because I had the – I had a bus pass for my work anyway, so it made sense for us not to spend the money on the bus. But then because I struggled with the shop- with the bags that time, I says to my partner, I says, ‘You’re gonnae have to come with me the next time’. ...See I was lucky, I had my bus pass. So it was only my partner we were paying for, so it was almost £4.” (Jill R12)

“You can walk it but it’s a good trek. It is. It’s a good distance. ...I don’t mind carrying bags but, especially when it’s all tins, it would have been up here and I’d have still been up the road... Not just that, it was, I felt as if I had to keep asking somebody for a lift, and her having the wean, and I went, I can’t put her in that situation. I could have jumped a bus, but it’s like, defeating the purpose.” (Kate R21)

Access was more problematic for those with health problems, or if they had children in tow. Amanda (R7) had gone to the foodbank with her four year old daughter and found the walk to be long and her bags heavy on the return trip:

“I walked up wi’ my daughter, and I had tae walk back wi’ all the stuff. And it’s no’ light stuff they give you, it’s loads o’ tins, and so you look at the size o’ me and the build o’ me and I had these bags that I was really grateful for, don’t get me wrong, but it’s at the point that was a wee bit o’ distance for me and my four year old tae be walking there and then tae have to humph a’ the shopping back home. (Amanda R7)

Alex (R13) could not walk there herself because of her back problems:

“Well what I did, I can’t walk ‘cause I’ve got a bad back. So basically my granddad comes in the car... picks me up and takes me down. Because I’ve got rheumatoid
arthritis in my back so walking far distances is too much.” (Alex R13)

Fay (R22) was pregnant at the time, and had several health problems, so she found the walk home difficult:

“We walk with the bags. From Parkhead all the way to [home]. Yeah. Yeah. And the bags was heavy, so, I would be walking from like here, to there, stopping, resting, she was like out of breath.” (Edward R22)

Summary

Knowledge of foodbanks has spread widely in the professional world, with people referred to foodbanks from a variety of other organisations, particularly in the welfare advice, health and housing sectors. It is notable that these sources of referral to foodbanks include several public sector agencies. This suggests foodbanks can be considered as becoming part of the welfare landscape.

The referral system that applied to most foodbanks was seen as a source of difficulty at the start of the process, i.e. obtaining a referral was for some an obstacle to be overcome, but thereafter the use of the referral system was reported as an efficient way of dealing with users at the foodbanks themselves.

Accessing foodbanks presents something of a conundrum for users. On the one hand, as we have seen, people prefer foodbanks to be anonymous and for others not to know they are going there, with some people opting to use a foodbank further away from home. This relates to the issue of stigma and shame as previously discussed. On the other hand, users reported not being aware of the local presence of a foodbank that they could approach for help, and several complained of the distance they had to travel to find a foodbank, or rather the distance they might have to walk home with bags of food. For some people, there is a self-defeating element to having to pay for buses or taxis to travel home, while using a foodbank because they have no money.
Foodbank provision

The premise of foodbanks is that they supply emergency food rationing to last up to three days. Foodbanks cannot cope with storing perishable foods, so discarded fresh fruits and vegetables are not suitable produce for distribution.

Trussell Trust guidelines for example specify exactly what each food parcel should contain: cereal, soup, juice, tea/coffee, tinned fruit, rice/pasta, tinned tomatoes, pasta sauce, sugar, tinned vegetables, tinned fish, tinned meat, biscuits, longlife milk, sugar, extra treats (where available) of jam, chocolate and sauces. Food parcels given out by the Trussell Trust have in fact been designed by dieticians to provide recipients with nutritionally-balanced food.

Although food is the main focus of most of the foodbanks, organisations occasionally received donations such as baby food, toiletries, hygiene products and nappies, which are given to clients who really need them.

We asked participants about what they got from the foodbanks they attended. Their accounts are based on memory (often from long ago) so the detail is unlikely to be fully accurate.

Food provision

Basics

Most participants reported getting a selection of basic foodstuffs. Some made reference to the fact that there was nothing fresh, although they understood why this might be the case and appreciated what they got:

“It was all tinned processed foods... And some pasta and... there was enough to keep you over the four days, but because they didn’t have any fresh foods, they depended on what was given, and what’s given is usually tinned processed foods... And it’s easier for them to give out to people, who may have limited cooking abilities.” (John R4)

“Loads of tins. There’s no fresh stuff but, you can see their point. Well there’s beans, peas, spaghetti, mushy peas, I can still remember that. Pasta.” (Bobby R6)

“I got a stack of tins, good things like tins of soup, tinned potatoes, tinned veg, custard, creamed rice, packets of pasta, packets of rice... tins of food basically. Like things that kinda wouldn’t perish, but... No I got a great amount o’ stuff, I really did.” (Sue R8)

“It was cans, tinned potatoes and things like that. Biscuits, tea, sugar, coffee.” (Kate R21)
[Lack of] fresh food
Most foodbanks do not generally provide fresh foods but some people did get fresh items including fruit, vegetables, fresh bread and milk from the foodbank they attended. The foodbanks that some participants attended had fresh products available:

“Bread, everything that you need. You can get apples, bananas, pears, if you like your fruit an’ that.” (Susan R2)

“The good things is you get bread, they always offer you fresh bread, so that’s good. Yeah, a selection o’ cakes sometimes as well. Scones and doughnuts.” (Alex R13)

Zina (R15) went to two foodbanks, one for fresh food and the other for other basic items and toiletries:

“The [name] foodbank, probably I went like – there was two of it. One was, I basically went... because of the food, they have real fresh fruits, so I go there basically because of the fruits, all the bell tomatoes and all the stuff, vegetables.” (Zina R15)

Others were aware of schemes where fresh products were sometimes available:

“No [fresh stuff] I believe they do now... ‘cause I know there’s a scheme where the supermarkets give their use-by-date to agencies.” (John R4)

“Ours had bread, fresh bread as well. I think it was kind of the supermarkets, it was going out that day so... Yeah, so that’s probably the reason it was there. But it was absolutely fine, and we found that we actually froze a lot of the bread at the time... and then just used it for toast.” (Jill R12)

Some would have liked to get fresh bread and milk but understood the restrictions on being able to accommodate such needs:

“I suppose it was maybe things like your fresh produce like milk, like a carton o’ milk or some butter or whatever. But then again, you can’t expect people, I suppose because they don’t know how long they’re maybe gonnae have stuff... No that’s exactly what I was thinking, they would need to refrigerate – you know what I mean, refrigerated temperatures type o’ thing.” (Sue R8)

Treats
As well as basic items, most people also got treats – biscuits, sweets, puddings – in their packages which were appreciated:

“Yeah, they gi’ you chocolate biscuits. Like, the last one I got was I got an apple pie, so... which it was actually quite nice.” (Susan R2)

“Packets o’ biscuits, tins o’ fruit, like I say it wasnae just your basic rationings of food. They gie’d us some treats as well.” (Amanda R7)
Choice, preferences and needs
There was some variation regarding how much choice people had at a foodbank. Some participants said they got no choice and others were guided through the different products and given an element of choice. Some noted that you were given what had been donated so they were aware of the charity aspect of foodbanks:

“Depends on what goods they have. What’s been donated.” (John R4)

Alex (R13) and Fay (R22) said they were given what was available, but there was no choice at the foodbanks they attended:

“Well you don’t get a choice…” (Alex R13)

“It’s all they give you what they have. You can’t pick and choose.” (Fay R22)

However, some participants indicated that they had an element of choice, particularly regarding whether you wanted meat or fish, which was usually tinned tuna or a meat pie or tinned meat:

“The actual parcels were made up, it’s either meat or fish – aye, you get a choice.” (Bobby R6)

“Well they ask you, ‘would you prefer…’ It was either, ‘would you prefer like fish?’ Which is obviously tuna, or, ‘Would you prefer like luncheon meat?’ or something.” (David R10)

Choice was sometimes offered to cater for particular diets. Susan (R2) said she got a choice:

“No, actually, they gi’ you a choice. See, like, they’ll come and ask you, right, if you cannae eat fish or things like that. ...’Cause they don’t just pap everything in and say ‘Oh, here’. They ask you what you like an’ what you don’t like... They ask you that. They ask you ‘Right, can you eat this? Can you eat that?’... an’ they’ll go ‘Help yourself’. So you can basically pick what you want.” (Susan R2)

Indeed, most foodbanks asked about family likes and dislikes and whether there were any particular health conditions or intolerances in the household. There is a limit, however, as to what foodbanks can offer and accommodate but this was acknowledged:

“Well they do ask you is there anything particular that you don’t eat? Do you like fish? Do you – can you – oh I think you were asked about any intolerances or anything like, something like any allergies or whatever it was, some kind o’ question along those lines.” (Sue R8)

“They – sometimes they had bags already made. And then they would ask you what kind of things you liked and is there anything you can’t eat, they’re very aware of
things, like, you might have diabetes and things like that as well or certain stomach problems... asking what we can eat, what we can’t eat. Did we have any like dietary requirements and things like that... They did at the time ask if we had any children, because they had lots of baby things in as well…” (Jill R12)

There were clearly limits to what foodbanks could do to help those with restrictive diets for health reasons. Stephen (R16) had a variety of health-related problems which meant his diet was restricted. Due to his condition he was unable to get much food he could digest from the foodbank:

“I didnae get a great deal because I’m diabetic and I’ve got pancreatitis, I’m on Creon. My food doesnae digest, you know, so I’ve gottae watch what kind o’ products [I eat].” (Stephen R16)

There were two families in the study from different nationalities who had alternative dietary tastes. Zina (R15) was from an African background and said she enjoyed cooking and eating a lot of fresh food. She was able to get her fruit and vegetables from one of the foodbanks that supplied this (as previously indicated), but she did not eat tinned food and much of the food she got from the foodbank was of little use to her as she liked cooking from fresh:

“I don’t really eat canned food from cans... I kind of prefer making my meal and because I eat a lot of spicy food... most canned and tinned food are not spicy.” (Zina R15)

Fay and Edwin (R22) were originally from the Caribbean and did not like much of the food they were given at the foodbank and did not even know what some of it was e.g. tinned soup, baked beans and sausages, pickled onions. They did not get any rice and indicated that items such as rice, lentils, chickpeas and kidney beans would have been preferred and better used:

“We got some of the stuff that we never taste. And so many things that we don’t know what to use it, how to use it.” (Fay R22)

“We get cereal... We got a lot of ketchup paste in our box... Pickled onions... They had a lot of, like, soup. Soup in a can. Tomato soups. We get baked beans. Yeah, got the beans with sausage in it. It wasn’t really much but mostly like those stuff, we didn’t get no rice.” (Edwin R22)

“If they give us, like, rice...Yeah, rice. We didn’t get no, like... peas and, like, split-peas, lentil peas. They have like red beans, it’s kidney beans y’all call it over here. Yeah, we didn’t get kidney beans, ‘cause we eat kidney beans. Chickpeas. No. We never even tasted, but we had no other choice, we had to eat it, ‘cause we had nothing to eat.” (Fay R22)
A criticism by some of the participants was that it was difficult to make a meal from what was provided, or that they were not getting enough protein because the food they got was largely starchy.

Jill (R12) was fortunate in that she enjoyed cooking and had a lot of other ingredients in her house, but she was aware that other people in such situations may find it more difficult to make meals from what they got:

“I’m lucky because I do do a lot of cooking. But with what they give you, if you didn’t cook a lot you may need to kind o’ look up or ask people some things because I can, I could quite happily fling things together and I usually always have herbs and spices in my cupboard as well, which is great ... But I suppose if you didn’t know your way around cooking very well, it could have – could be a struggle that way…” (Jill R12)

“The only thing that I could think of from a kind of dietary point of view, they didn’t provide much protein. Like kind of meats and things, it was mostly rices and pastas and things like that, which I suppose is great if you’re only using it for a short period of time. But if you did have to use it on a longer basis... you wouldn’t necessarily be getting the kind of nutrients that you would need.” (Jill R12)

Others commented that it was difficult to make a meal, particularly a dinner, from the food they got:

“The only thing is you can’t really make a dinner out of it. See when you get it, you can’t really make a meal. It’s snack things, if you know what I mean. As I say, like, you get a tin o’ hotdogs, so. Or well if you get the pasta sauce and you get pasta... I can’t eat pasta with just pasta sauce, so if we’ve got mince then we can make a spaghetti Bolognese or something... it’s not so we can just sit down and have a meal fae what you get.” (Alex R13)

Kate (R21) said she liked to eat healthily, but the food she got from the foodbank was mainly tins and pasta. She would have preferred foods to make meals with:

“It’s all tins... Yeah, in the bags it was mainly pasta, you know like six bags of pasta. I’m going, I like pasta but not that much. It’s like every time you go it was like pasta, pasta, pasta.” (Kate R21)

“Not just mainly, see like if they gave you sausages, stuff that you could make dinners with. ‘Cause it was like beans, spaghetti, potatoes, tinned potatoes, carrots, peas. There’s nothing there. Nothing there to make a dinner with. Or, you could have it with the dinner, but you’ve got no fish, you’ve got no chicken, you’ve got no, stuff like that.” (Kate R21)

One participant reported a negative impact from foodbanks. Matthew (R11) had tried to be healthy and had lost weight prior to using foodbanks. He said that since using foodbanks he...
had gained weight through eating too much “stodge”.

Food quality
There were some issues raised about the quality of food received, in that some participants mentioned battered tins or things that had been lying around for a long time. Others said some foods were past their sell-by date.

Stacey (R5) and Stuart (R20) mentioned some tins being out-of-date and not wanting to eat the food inside them:

“When you did open up some tins, the food right? I don’t know whereabouts they were storing their stuff or whatever, right, but it must have been – it was in a cupboard – and when you opened the tins, they had, like, big rings right roond aboot them... Like, they’d been lying so long. They’d been lying so long, like maybe besides a heater or something.” (Stacey R5)

“There is only one thing you need to watch there is, the sell by dates on the tins, you need to just watch that way. And I check all mine, when I come in, back in the house I check a’ the dates on them doon at the bottom. And if they’re rotten [chuck them].” (Stuart R20)

From a cultural perspective, Fay and Edwin (R22) did not like the idea of seeing bashed tins as they felt the food inside would be bad:

“One thing I would like to stress and say is that some of the foodstuff they gave, cans, there be damage, and I think they can try... I know this when tins damage and denting and bend is not good... In our country, they very dangerous.” (Edwin R22)

But others did not mind that some foodbanks had bashed tins and out-of-date products (e.g. jars of sauce) which they were able to help themselves to, and appreciated this:

“I think they’ve also got a table where they’ve got tins that are maybe slightly bashed or the labels are ripped, or they’re maybe come their sell by date or whatever. But they’re still fine tae use... I think there’s a table like that that you were allowed to choose... just take anything you want from that as well.” (Sue R8)

“There was also a section which I really like because I try not to waste food... if it’s tinned or jarred, even if it’s past its use by date, if I check it and I know it’s okay then I’ll use it. They said that they weren’t allowed to give you things that were out of date, but they had a basket of things that were ...And they kind of encouraged you to take as much of that as you liked... I found things like jars o’ sauces and things like that.” (Jill R12)
**Food quantity and waste**

The majority of participants did not report having too much food or a lot of wastage. Some participants talked about finding tins of food weeks later or getting food they didn’t like, but felt they could not reject it at the foodbank. There were examples, however, of participants who reported stocking up, ending up with too much food, giving it away and feeding spare food to the foxes.

Regular visits to a foodbank caused some participants to hoard excess and unwanted food as they had inadequate storage arrangements. Stacey (R5) had used a foodbank every week for a year and had acquired far more food than she and her family could use:

> “But we still had millions o’ stuff. It got to the point where some weeks, we still had, like, we were putting stuff into boxes an’ a’ that because we’d too much in our cupboard and we had tae actually put them intae plastic bags and shove them under the table.” (Stacey R5)

Bobby (R6) had also been using a foodbank – church van – every week until it had been reduced to a monthly visit fairly recently. He said himself that he had acquired too much food and no longer needed the food but went for the company:

> “I've got that much rice in there and pasta, I don't want to dae with now. ‘Cause they used to gi'e you it every week... Aye. I'm stocking up, aye... I've got 14 kilos o’ rice... I've got about 15 tubs o’ spaghetti. I've got sauces so actually I don’t, I’ll never go hungry.” (Bobby R6)

Surplus food also resulted from people receiving items they did not want.

> “There’s a lot o’ stuff in it that you wouldnae eat.” (Maggie R17)

Matthew (R11) did not drink tea or coffee but was given it every time he went, although he also revealed that there was scope to change items. He said:

> “Every time I go, ‘I don’t want coffee or tea’, I still get coffee and tea. And it’s like that, I’ve got more teabags than I know what to do with in there, you know.” (Matthew R11)

> “If there’s something in it that I don’t really need, or I can’t eat, I’ll ask kindly if they could sort of swap it with something else. Like basic things, just like the long-life milk, that’s more use to me because if I run out of milk, I’ve still got that in reserve, you know.” (Matthew R11)

Some participants said they got packets that were too big:

> “Big packets of pasta, this size, and you go, ‘what am I gonna dae wi’ that? why no’ just give me a wee portion?’.” (Stuart R20)
While several people stored their spare food, others re-distributed it. Kate (R21) gave her spare food to the foxes:

“Like I say, we did eat most of the stuff. And what we didn’t eat, I say we mashed up, fed, take it out to the foxes.” (Kate R21)

Other family members were also an alternative destination for spare food. Alan (R14) gave away much of his food to his mum:

“Half o’ the food just stayed in there [cupboard] or I gave it to my mum or family. Well the one I went tae, it was actually quite reasonable, they give you – gave you quite a lot.” (Alan R14)

Some food got recycled by being taken to the foodbank bin at the supermarket, as indicated by Fay (R22):

“To be quite honest, we didn’t eat all... Didn’t eat the tomato soup. What we did is the ones that we didn’t use... we take it to Tesco. So it went back in- [the foodbank box].” (Fay R22)

Provisions beyond food

Foodbanks regularly distributed items other than food, particularly toiletries and pet food, and less often, also clothing and fuel vouchers.

Toiletries

Most participants received toiletries at the foodbank. These included female sanitary products, nappies, shampoo, toothpaste, shower gel, toilet rolls, razors, shaving foam, wipes, soap powder. People could either ask for specific items or they were just given them. No particular issues were raised about these, except appreciation:

“I just thought just basic food, then when I open the bag, a wee bit o’ toiletries.” (Aisha R1)

“They just ask you if you need any toiletries an’ you go ‘yeah’ an’ then they’ll just put whatever in in a separate bag. Yeah, they give you sanitary towels if you need... they just put it in.” (Susan R2)

“The good thing as well at the foodbank is, I was running low on toiletries and on woman stuff, and I said to them, and they gave me a nice bag of, you know, feminine stuff. It was great, do you know what I mean? It was brilliant.” (Alex R13)

Stacey’s (R5) daughter’s partner was getting nappies from the foodbank the day his daughter was born. The new baby was coined the “foodbank baby” because of this. They also got wipes and breastfeeding biscuits:
“I got so much bags of nappies fae the foodbank it was unreal.” (Stacey’s daughter R5)

**Pet food**

Pet food is offered at foodbanks. Those with pets really appreciated the help they got with this, although they realised other people may not understand that help with pets is important to them:

“’Cause people don’t think the pets matter. The pets matter mair than the people, they don’t understand we’ve got no money, we’re struggling, we’re trying tae get-they don’t understand that, they just, you know, it’s like a baby, you need tae gie them food.” (Amanda R7)

“They’d have, like, pet food and litter and stuff like that, that kind of thing, you know? It’s so nice. I’m a big animal lover, so, you know.” (Matthew R11)

**Clothing**

Although no one in the study had obtained clothes from a foodbank, some were aware that clothing was available if required. At one foodbank you put your request in for clothes one week and the following week they would be ready to collect. Some had seen other people getting clothes and shoes:

“My friend... she was saying tae me they gie you clothes, you get clothes an’ a’ that... You tell the person what you need an’ they’ll bring it to you [the following week].” (Ellen R9)

“They have clothes that they are ready to give to you. Yeah. Clothing and bedsheets and stuff like that.” (Zina R15)

**Fuel**

Some foodbanks offered help with gas and electricity, and some used the term “fuel banks” linked to foodbanks. This appeared to be something that people found out about

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44 How the Npower Fuel Bank works: “When the individual goes to the foodbank with their voucher, if their household is on a prepayment meter (PPM) for electricity and/or gas, they will receive a top-up voucher. As standard, customers will be issued a maximum of three vouchers in six months, and not receive more than one voucher within ten days. Npower will provide a fuel bank voucher to the client via text message or email. If the client doesn’t have a phone or email account the voucher will be emailed to the foodbank within 24 business hours (vouchers are not issued on weekends or bank holidays). If required, the foodbank will then contact the individual via an agreed means to share the voucher. The client then takes this code to any shop with a PayPoint machine where it can be redeemed against electricity and/or gas using their pre-payment key or card at no cost to the customer. The Npower fuel banks code can only be used for electricity and gas. Once the code has been redeemed, when the individual puts the relevant pre-payment key or card in their meter or meters, the money will appear as a credit”. See: https://www.npower.com/home/about-npower/in-the-community/fuel-bank/
during their foodbank use, as opposed to having prior knowledge of it. This involved foodbank volunteers putting money on someone’s pre-payment card, or giving them a voucher to redeem:

“If people’s not got money for like power or gas, you take your cards an’ that up an’ they’ll take you over to the shop an’ they’ll put money in the card an’ that for you.” (Ellen R9)

“One time when I went to the foodbank, I says, ‘I don’t know how tae ask, but I’m struggling wi’ my fuel’. She went, ‘Oh, we can get you a fuel bank here’. And he says, ‘Oh no, we can give you a voucher’ …So they take your name, your address …So they put all the details in and Npower text you that day… Email them away… with a code and you take that tae a PayPoint. I wouldn’t have known otherwise no.” (Alex R13)

“But what I was told, they could also help you wi’ your electricity. I don’t know if that's true or no.” (Maggie R17)

“They give you a voucher, and it’s £49, and you take to the Co-op which is the only place that takes it… So you can split it between your gas and your electric or whatever, so.” (Kate R21)

**Summary**

As regards food provision, the main consistent feature was that people got a lot of tinned and dried goods such as pasta, rice, tinned soup, breakfast cereal, long-life milk, tea and coffee meaning that people had basic rations and would not need to go hungry. Foodbanks varied in the extent to which they offered fresh food to users, which depended mostly on their relations with local supermarkets. Small, sweet treats beyond the basics were, however, much appreciated by users.

Many foodbanks offered a degree of choice to users and tried to also cater for particular diets and allergies, although it was harder for them to meet the needs of those with specific health or cultural requirements. The healthiness of the food offered was questioned by some users, while others pointed out that some users would need advice on how to produce healthy meals from what was provided. Indeed, several users reported storing a lot of the basic items they got from foodbanks, either because they lacked cooking skills or didn’t know how to use them, or because the quantity received was too much for them, especially if they went to the foodbank regularly and received the same provisions each time. Thus, there are some questions that could be asked about the effectiveness and efficiency of foodbank provision, although foodbanks are nonetheless achieving a primary objective of meeting people’s basic food needs. There may however be scope for greater
provision of menu-based food items with cooking instructions, akin to the Flat Pack Meals initiative in Drumchapel, which has been found to improve people’s cooking skills and diet\textsuperscript{45}. Beyond the food, users particularly appreciated the provision of toiletries and pet food by foodbanks. The provision of assistance with fuel payments was less widespread and less well known.

\textsuperscript{45} Burton P. \textit{Flat Pack Meals – An Evaluation of a Healthy Food and Cooking Initiative in Glasgow}. Glasgow: NHS Greater Glasgow & Clyde; 2014.
Support from foodbank volunteers

Foodbanks are run by volunteers. This chapter discusses how participants found their treatment, care and support from the people working in the foodbanks they attended. It also looks at other types of support and signposting they received.

Treatment and care by staff and volunteers

Everyone talked about the kind and compassionate treatment offered by people working at the foodbanks. Many participants were feeling vulnerable upon arrival, and volunteers managed to allay fears and treat people with kindness and consideration.

Participants mostly said that the people working in foodbanks explained things clearly and carefully about how the system worked and took each individual case in turn. Most participants talked about a calm and supportive atmosphere. There was no sense of being rushed along.

Surprise at how nice it was

Many participants were surprised at how welcoming the foodbank was, in the terms of the overall set-up (e.g. means of access; internal environment; waiting arrangements, etc) and their treatment by volunteers. It was quite different to their prior expectations which often were that it would be like a queue at a soup kitchen, as in ‘Oliver Twist’.

Sue (R8) talked about how she was treated the first time she went, taking her mum for support. She was surprised at how nice it was as she did not expect it to be like that:

“I think the first time I went in they could obviously tell it was my first time, ‘cause I was a wee bit kinda just looking around an’ that. The woman came over she was like that, ‘Hi, how can I help you? Have you got a voucher with you?’ She said, ‘Right, we’re just in the middle o’ making up packages now,’ she said, ‘but see if you go and sit down over there, I’ll bring you over a wee cup o’ tea, and you can have a cup o’ tea and we won’t be long’ and…” (Sue R8)

“I was quite surprised, because I kinda went and sat down a wee bit like that, my mum had come with me and I kinda sat down a wee bit like that, you know, looking, just looking up. And then people just started chatting, quite the thing and it was really, it shocked me, it surprised me how nice it was.” (Sue R8)

Amanda (R7) was just expecting to get tins of food and be rushed in and out, so was surprised to be treated so well by the volunteers:

“It’s no’ the way you think they’re gonnae be. What you need another tin o’ beans, really? Do you know what I mean? It’s no’ - what do you need? Really? Do you know what I mean, they were really nice.” (Amanda R7)
Amanda said that before going to the foodbank, no one told her that the people would be nice and supportive and this is something that should be advertised:

“I never once heard, ‘oh you’ll go in and the woman will be nice, she’ll speak tae you, and she’ll make you feel at ease’. Nothing ever got mentioned tae me about who was inside the building.” (Amanda R7)

“And that’s what it tells you, you’re going tae a foodbank, you’re going somewhere, it could be a conveyor belt from what you’re telling me, do you know what I mean? Pick what you need and get oot the door.” (Amanda R7)

It may well be that participants’ past negative experiences of agencies (mainly Jobcentre Plus and Department for Work and Pensions) led them to be anxious about using a new agency, and they may have expected to be confronted by staff rather than welcomed by volunteers. John (R4) said the process of getting a voucher and the prospect of going to the foodbank was terrible, but the experience once you were there was totally different:

“Initial experience was really terrible, getting started, right? But once you’re in the foodbanks, and the people inside are lovely – you can’t fault them, because they volunteer to support, organise and to help people, so, you can’t really fault them.” (John R4)

Making users feel at ease was a big part of the successful experience of foodbanks for users. Debbie (R3) said that the church minister welcomed her “wi’ open arms so he made me feel at ease” and she was surprised to get a cup of tea from someone she didn’t know.

**Not being judged**

An important element of people’s foodbank use was the values showed by volunteers in not appearing to judge them. Amanda (R7) said the people at the foodbank “had total respect... like it was like they understand mair... they didnae judge you”. She said they took their time and asked if she wanted any other support.

Matthew (R11) made a number of comments about the treatment by people at the foodbank emphasising their compassion, and he and others talked about how the attitude of volunteers eased some of the shame and stigma people felt about using a foodbank:

“Compassionate... They actually want to listen... They don’t judge you ‘cause of your circumstances or your financial circumstances. Just basically the compassion side of things, you know? They just treat you like a human.” (Matthew R11)

Being treated as if your misfortune could happen to anyone and wasn’t your fault made people feel better, as well as volunteers being open to talk about anything. Alex (R13) said that “you’re treated like a normal person instead. Whereas at the job centre you’re just treated like a number”. She added later:
“They don’t make you feel – like see ‘cause you’re down on your luck... they don’t make you feel like that, do you know what I mean?” (Alex R13)

“You feel you can actually speak to them about anything. See whatever you’re going through? You feel – you don’t feel that embarrassed, you feel they’re dead welcoming.” (Alex R13)

Jill (R12) said the volunteers were “aware of everyone’s situations”. She was very emotional during her first visit but said the volunteers easily coped with this and treated her with kindness:

“They get it a little bit more – so they were a little bit more understanding and they didn’t actually panic when I kind o’ burst out crying the first time I went in, because I was so emotional with it. And they just got me some hankies and a cup o’ tea and things and made sure that I was okay. So I thought that that was very kind of them as well, the fact that they weren’t phased by that at all. Which was very good.” (Jill R12)

The sense of not being looked down on by those serving you also contributed to a very positive experience:

“Very, very respectful. They don’t look down on you. Know how, like, think ‘Oh, you’re in the foodbank. Wow.’ Nope, they make you feel welcome all the way.” (Susan R2)

Overall, volunteers were described as “great”, “brilliant”, “amazing”, “caring”, “friendly”, “outgoing” and “down-to-earth”. Other ways of describing the experience included: “welcoming”, “someone listening”, “not judging you”, “taking time”, “treated normally”; “like a human”; “aware of people’s situations”.

Café-style
The foodbanks participants described were mainly café-style in that upon arrival people are greeted and offered food and drink. There was some variation as to what was offered but it tended to be tea, coffee, cakes, sandwiches, rolls, biscuits and fruit. This was appreciated by most participants who found it nice, and unusual, to be offered something to eat and drink, as reflected in this sample of many similar quotes:

“Brilliant. They came in, I would come in and they immediately asked me if I wanted, like, a cup of tea or something. They gave me a sandwich or something, you know.” (Matthew R11)

“Oh they were lovely, absolutely lovely. And when you go in, they were offering to make tea and coffee or juice and biscuits and things like that for you.” (Jill R12)

“They’re very, very nice. In fact, when you go in, you’re offered tea or coffee along wi’ a biscuit or a bit of cake, which, I mean, it is really good.” (Maggie R17)

Amanda (R7) spoke about the kindness that was offered to her four year old daughter. She
was asked if she had eaten breakfast and was given some snacks:

“She offered [daughter] food straight away. ‘Have you had breakfast?’ She’s like, ‘yeah I’ve had something tae eat’, she was like, ‘well do you want a wee snack?’. And she gave her like wee biscuits and that while she dealt wi’ me.” (Amanda R7)

Comparisons
Participants talked about their relationships with a wide range of organisations and professionals with whom they were dealing and were being offered help and support from (as discussed earlier in this report). These were mainly positive accounts, and there were many examples of successful relationships being formed.

However, one reason for the appreciation of such kind attention from foodbank volunteers was because many participants had less favourable experiences of dealing with agencies such as the Jobcentre Plus and Department for Work and Pensions, including undergoing assessments, which are generally regarded as ‘harsh’, ‘cruel’ and ‘unkind’. As a parallel, we can review some of the ways participants described these other experiences.

John (R4), Samantha (R7) and David (R10) talked about their experience at the job centre, the prominence of security officers and the lack of care and respect by staff:

“It’s the [name] job centre, they’ve got more security there than banks… And you’re saying ‘But why do they need such extreme measures?’ It just adds to the process where people get more degraded.” (John R4)

“‘Nope, if you’re not on the benefits, you can’t get foodbank vouchers’. This is a security man. I’ve no’ even seen anybody official… this is the first face, ‘cause you’ve hit a wall right away. Luckily enough one o’ the staff was sitting and they overheard all this… [job centre] Because they’re jobsworths! Basically, that’s it. They treat you as scum. I’ve got a job, you’ve no’, you’re scum… Whereas the people at the foodbank are volunteers and do. They do care about people.” (David R10)

Several participants talked about being looked down on by benefits agency staff:

“I go into the job centre… they look down their nose at you straight away, there’s arguments, they’ve got nae respect for people walking through the doors… so I kinda thought it would have been like that [but] it was total opposite… they talk tae us like crap ‘cause they know we’re gonnae get it, whereas in the foodbank they were so non-judgemental, if you know what I mean? They were really nice, really nice people.” (Amanda R7)

“It’s not the first time I’ve had an argument wi’ the Social Security, because they dae treat you like dirt. I mean, it’s ‘Look at me, I’m working and you’re going to foodbanks’, know what I mean? That’s the impression that they gi’e you, which is no’ right because they don’t know – they could be in this position theirselves one day.” (Maggie R17)
Sue (R8) talked about going for her assessment about her ability to work. She had been unable to work since injuring her leg and consequently had a series of physical and mental health problems. She felt humiliated at the process. She talked about her own situation and experience, how it made her feel ill and sick because of all the worrying. She said she was treated in a very uncompassionate manner during her interview:

“Going for the assessment [fitness to work], you’re made tae feel like you’re begging for something that you’re not deserving of. And I feel, I worked all my life. There was seven years I didn’t work in which I waited ‘til all my children were at school and then I went back to work again... You know, but I’ve worked all my life, my husband worked all his life, my mother and father... And because o’ an accident in my work I can’t – I can’t – I can’t work now and it’s awful. I just – it’s so undignifying and most of the interview I was just in floods o’ tears because it’s so embarrassing, you’re having tae bare your soul to these people.” (Sue R8)

“...I had an upset stomach and... well I was just like a gibbering wreck, I really honestly, it’s terrible. It’s a horrible feeling, it’s not nice. And anyone that I’ve known, whoever has been to [benefits centre] will totally...say exactly what I’ve said.” (Sue R8)

Kate (R21) talked about her lack of control when talking to staff at the benefits agency; the constant fear of your benefits being taken away from you:

“They treat you as if you’re... rubbish... they sit and talk to you ‘but you have to do this, but you have to do that’. Inside I’m going like, I don’t have to do this, I don’t have to do that. But you can’t argue wi’ them or they can take you off, or can suspend you.” (Kate R21)

“[job centre] It’s like they intimidate you, they give you a list of what to do and what you have to do. So it’s just a nightmare. And he wants me back on Friday. I’m not supposed to sign on until next week, but he wants me back on Friday to go through all this again and try and put me out for charity work.” (Kate R21)

In comparison with the alternatives, a couple of participants felt that getting food from a foodbank was better than being offered money or a grant as these could lead to people buying the wrong things:

“Before the foodbanks it’d be the crisis loan... Yeah, well you would phone up social security and they would put money into your account in two days’ time, and that would help you. I think foodbank’s better. They just treat you better... ‘cause you’ve got food.” (Alex R13)

“Well I believe the foodbank is actually the best for some people, because some people – when you give them money, they don’t know what to do with it, they just misuse it for drink, drugs, and stuff. So if there is a foodbank where people can go in,
have tea, a wee bit of something to eat and food to take back home with. I believe that’s – that should be the best thing for the less privileged people, because some of them – just because they are less privileged they don’t know what money maintenance is.” (Zina R15)

**Foodbank users’ support needs**

Many participants really appreciated the role of the foodbank in helping support their needs. They felt the staff and volunteers were patient, gave them time and that they could sit down and talk to someone who seemed to be listening and understood what they were going through. Although, given the feelings about stigma and shame attached to foodbank use, there is an issue as to whether foodbanks are the best place or means by which to provide these opportunities, it is nevertheless the case that at present foodbanks are meeting social and emotional support needs for many users.

There were some exceptions, however, with two of the participants, David (R10) and Susan (R2) describing their foodbank experience as straightforward, with no opportunity to discuss any issues.

**Having someone to listen and talk to**

For some people, knowing that there was someone in the foodbank they could talk to either about their situation, or just when they were feeling down, was a comfort; the foodbank was therefore a form of social support:

“If there’s anything in my life, I’d had naebody to talk to, they would o’ listened. It gave me the feel that they were ready tae listen, if I had stuff tae talk about. I’m not like a person tae open up to anybody, but I can imagine maybe somebody in my situation that really struggled with things... Sitting down and speaking to one of they women or men for hauf an hour could actually save somebody fae walking out there, do you know what I mean.” (Amanda R7)

“You can go o’er and speak to them if you feel depressed – if they've got the time.” (Maggie R17)

“I was sitting talking to him as well, so. And, ‘how you feeling?’ I says, ‘I’m feeling a wee bit down, no’ much’. He says, don’t worry’, he says, ‘you’ll get there. We’re here if you need a wee chat’. And I went, ‘right, thank you very much’. (Stuart R20)

In other cases, the foodbank volunteers were a source of social contact:

“It's more for company now, really.” (Bobby R6)

**Signposting**

There were no examples given of participants themselves being signposted to other services by foodbank volunteers, but there was an awareness that this was one of the roles of foodbanks:
“They can link you in wi’ other services. ...And I think if they maybe seen somebody wi’ a special need, they’ll go in an’ ask them if everything’s kind o’ okay. The right direction for who tae link in wi’ tae get the best support, you know.” (Stephen R16)

“If you want tae speak to them like that, if you just want tae go in and just grab whatever, but if you want tae speak tae somebody, they can sometimes put you onto somebody. Know-how for like a bit of advice?” (Sarah R18)

Some participants were aware that you could access other organisations for information and advice with regard to specific issues via the foodbank:

“And someone had says to try like Citizens Advice... another person had actually said that your local Law Centre as well should be able to offer more advice and things like that as well.” (Jill R12)

“...again so I can tell you, now – like there’s this lady and she was wanting to ask about homelessness. And they couldn’t help her, but they referred her to tell her... where to go.” (Alex R13)

“So when you went, if you, like, if you wanted advice like for if you were struggling with finances and stuff, they would lead you in the right direction. Or they would have a chat to you about it.” (Alan R14)

Some foodbanks are linked into different organisations so could help people to get back into work for instance:

“They have different sort of activities and stuff like that during the week, and they help people, like, to get back to work and stuff like that, you know.” (Matthew R11)

Again, foodbanks were said to offer support after users had engaged with other agencies:

“And then they’ll talk to you about if it does go kind o’ worse for you instead of better, they can give you help for that kind o’ thing as well and just advice on it. I suppose it’s just someone to sit and... listen and chat to about it.” (Jo R12)

**Volunteering**

Some foodbank users wanted to be doing something if they were not in work, and reported that the foodbank had helped them pursue this. Zina (R15), a former asylum seeker, had found out about volunteering opportunities through the foodbank: she felt alone because she had separated from her partner, had a six-year-old daughter and was undergoing the asylum process alone. She also had health problems, recently being diagnosed with lupus.

“When I go to the foodbank here, like the one I was going to then, they were so like friendly people there, they tend to interact with you and try to let you know what you can do then, because we were in asylum, we’re not allowed to work, we’re not allowed to do anything. But when you get to that place, they kind of interact with
you and tell you you can go in, you can volunteer, you can do this, you can do that… And since I was like getting out of my illness then I wanted to like be doing something while I was still in the asylum system. So they told me organisations I could go to, you know, that, you know, have something for me, I could learn new things and stuff like that” (Zina R15)

Stuart (R20) had also found out about volunteering work through the foodbank:

“They gave us a lot of help, know what I mean? They turned round and gave me a lot of help... It is, they're there as well to try and help us... It's them that said to me about the Food Train, and I'll go.” (Stuart R20)

Summary

On the basis of their own expectations and harsh prior treatment from other agencies, the almost unanimously positive comments from foodbank users about the way they were treated was striking. For many it was the surprise element that someone actually cared about their situation and was not judging them for it. The surprise, and the impact the foodbank environment had on users (mainly its set up and their treatment by volunteers), stemmed from their negative experiences in dealing with public sector agencies about benefits and employment issues, where they felt they were being negatively judged, not empathised with or understood, and not supported.

Foodbanks were said to offer support via signposting users to other agencies to help with their circumstances. More commonly, however, foodbanks can be seen to offer emotional support to users by making it easy for users to open up about their stresses, worries and concerns. This can clearly help some people cope with periods of loneliness, anxiety and depression. It is not clear how many foodbank users avail themselves of this support, but many of them got comfort from knowing it was available to access, much as a form of latent social support. It appeared as if some participants got something of their humanity back through the treatment they received at foodbanks, almost when they were least expecting it as they were in a vulnerable position in asking for charitable aid.
Subsequent developments

Reflections on foodbanks

This chapter looks at the range of emotions felt since using foodbanks. It covers positive emotions including empathy, understanding and positive resolution about foodbank use, but also negative feelings such as guilt, anger and stigma.

Empathy

Through using foodbanks many people became more aware of other people’s situations and reasons for using a foodbank. For some, it made them realise that others were experiencing similar problems to them. Some had become less judgemental and more empathetic as a result:

“It made me kinda realise... maybe not to be so quite judgemental about people or situations or these kind of things. I think it can be quite easy to make judgement on situations that you don’t really know very much about. And I think everyone’s guilty o’ that.” (Sue R8)

“It’s actually made me think, I mean there must be like a lot o’ people out there in the same situation, d’you know what I mean? I thought oh like people talk about you an’ that but it’s not like that an’ it’s not, it’s different.” (Ellen R9)

“It’s maybe made me more aware of the situation other people find themselves in. And maybe a bit more empathy towards [them].” (David R10)

“I’m more conscious of other people, now, as well, and what they go through. Because I think if it can happen to – I kind o’ thought at the time that we were in a good position, so if – I think if it can happen to me then it could happen to anyone. So it makes me more aware of, even if someone’s out driving their car, it doesn’t necessarily mean that they don’t have financial problems and they need to need to use a foodbank kind o’ thing.” (Jill R12)

Stephen (R16) told a story about a family with several children he had seen walking past his house and up the hill in the direction of the foodbank. A couple of hours later he saw them on their return journey with their bags. The experience made him question what plight a family like that must be in in order to have to make that journey:

“God they’ve had tae walk up, all that way, away up there, do you know what I mean? So what kind o’ position is that people in and it’s like, as I said the foodbank stuff, they’ll try tae accommodate you, but it’s not always the best o’ stuff. So you’re like that, God what kind o’ position are they in.” (Stephen R16)
Understanding

Some participants learnt of other people’s specific issues or reasons for using a foodbank, and made connections with people in this way. Often they were in similar situations to themselves:

“I got chatted tae a woman an’ she was like… I think she had aboot three kids. Obviously, she was a single parent herself. We just started talking away, as you do.” (Susan R2)

“I spoke to a woman who’d a young child, but they were similar to us, they’d just been sanctioned and they had no money. So, they had to go to the foodbank, but they had nothing at all.” (John R4)

“You got to learn how people got intae these situations. Because a lot o’ people were losing their PIP, or their DLA when it was changing to PIP.” (Stacey R5)

Guilt

Many participants talked about feeling ‘guilty’ for using the foodbank because other people were in more need, or they considered them more worthy than they were. Jill (R12) had been affected psychologically by using a foodbank and explained she felt like this because there were other people in much worse situations:

“I felt awful. Because I think for me I kept thinking to myself, there’s people out there that are a lot worse off that could do with this more than me. I think that’s what kind of played a part in my head, and I think that’s why I took it so badly because I thought of people like, people that are obviously homeless and there’s people with children that can’t afford to feed the kids and things, and that really, that really got to me kind o’ psychologically. That way I struggled with it.” (Jill R12)

Kate (R21) felt similarly to Jill. She had been affected by seeing a family who appeared to be in need but never had a voucher, so pretended they had lost it in order to access the foodbank. The family were rejected from the foodbank (due to their lack of a voucher) and Kate felt guilty for getting her food when the family – whom she perceived to be in greater need – did not get anything:

“As if I was putting people out that needed it more than me… And she’d two young children …I felt like saying just take that for the weans.” (Kate R21)

Others had feelings of guilt about taking food from the foodbank and were reluctant to keep doing so. A degree of self-regulation of the use of foodbanks was reported:

“I know I’ve got food in the house, but I feel sometimes as if I’m taking it away fae somebody else. Although it’s, I’m no’ really, but – mm, that wee niggle, you know.” (Bobby R6)
“I was wanting tae keep still using it, I went ‘naw’, I says, saying to myself, ‘it’s too
greedy.” (Stuart R20)

“Let some other poor family have it.” (Aisha R1)

An exception to this was Fay and Edwin (R22) who believed that there should be “no limit on
giving... I thought it’s like a place that should contribute a certain amount at each foodbank”. They were of the opinion that everyone should have equal access to foodbanks.

**Giving back**

Linked to developing greater understanding, several participants had decided to give back to the foodbank, or were aware of other people giving back, so that others could get the support they got:

“I thought maybe in the future go up an’ give them something. I know, like, Morrisons have got foodbanks. Aye, so I’m gonnae maybe help.” (Aisha R1)

“What I discovered was, I’ve actually become more aware of the need for foodbanks. So we quite often donate to the foodbanks now. We can donate food down at wur housing association, and my partner works for Tesco and they have the big kind of box at the front of the store... Where you can buy things when you’re going through, and then just pop it into the box, and that’s for the foodbank now, as well.” (Jill R12)

“Now I just feel going to the foodbank, why not? It’s just me going – because I would love to go to the foodbank [to volunteer] but then I might not want to take anything out of the foodbank.” (Zina R15)

**Anger**

Several participants were politicised by their foodbank experience, stating that this is not the right way forward in a rich country. There was a lot of anger at how people were treated within the welfare system and the perceived lack of dignity in the process, although treatment at actual foodbanks was said to be compassionate for most:

“I think a lot of people don’t feel they’ve got dignity in the process, but if you’re in trouble and you really need help, there should be an easier way to give people help... And the only reason foodbanks are there is because of the government and Westminster no’ providing enough support for people at the bottom, bringing in sanctions to punish the ones that are struggling... [things have got worse] because of the way the benefits system is... it’s the system that’s to blame for the foodbanks in the first place.” (John R4)

“It’s gave me the view, how can a government be – the way they go on about foodbanks, it’s something tae be proud o’. It is something to be proud o’, but no’ in the way they’re using it in the context. I mean they’re using it, well, we’ve got foodbanks, and we should be so proud o’ it. And I’m like, ‘Well aye, but no’ in the sixth country in the world, in the 21st Century’.” (Stephen R16)
Feeling more positive about foodbank use

Although feelings of stigma and shame persist after using foodbanks the majority of participants had positive experiences in relation to their treatment and care, so that their negative feelings, mainly concerned with anxiety and embarrassment, decreased after their initial visit. Most said they felt more comfortable, or would feel happier, if they needed to use a foodbank again. Things got easier for most people as time went by:

“The feeling of nerves or anxiety disappeared very quickly, I felt, when I went in. Because maybe it was other people that had used the foodbanks before and maybe weren’t quite as uptight as I was the first time. But I never felt like that going in again after that.” (Sue R8)

“I’ve done it three times, so, to do it – once you’ve got over the first one, you know what it’s like, it’s the same wi’ everything. Once you get the first one under your belt... And then you go again, you feel more relaxed than you were the first time, then the third time you know what’s gonnae happen.” (David R10)

“As I said I was nervous at first but noo it’s a part o’ the family. That’s the only way I can describe it.” (Bobby R6)

Some people had to become resolved themselves to the fact that they had resorted to using a foodbank. Jill (R12) used the foodbank as a short-term measure and it helped her to get through a rough patch, but she felt she had come to terms with it:

“I think maybe the first two or three times, I was still the same. But then I kind o’ got – I suppose I kind o’ got used to it... I mean, I realised that it was only for a little while, until we were on wur feet. And it was kind of a means tae an end, I guess, and it was just to help us by this little rough patch... So I did eventually come to terms with it. And now I’m quite open with the fact that we’ve used foodbanks before, and I don’t mind speaking to it about friends and family and things, that’s fine. But it took me a while to get to that stage.” (Jill R12)

Alex (R13) said she only felt embarrassed the first time and after that things were fine:

“Just because when I went there was a lot o’ people there, and I felt I was like – right – I didnae know the experience but then after it they made me feel at ease, I didnae feel embarrassed after. I felt embarrassed just going in, but once I was there, I felt okay. Yeah, once you’re in – well they made me feel dead welcome and not to be embarrassed... as I said, I was only embarrassed the very first time that we were going. Ever since then, every time I go, I’m fine.” (Alex R13)

Using a foodbank put a smile on Susan’s (R2) face knowing that she could feed her family:

“’cause it gi’es me a smile on my face because I’m feeding... know, like, I’ve got stuff there that the wean can go ‘Mum, right, I’m having this’. There’s choices in there for her, that she can make or I can make.” (Susan R2)
The ability to rely on a foodbank as a safety net was reassuring for some people:

“It makes you feel alright. At least you know there’s somebody there tae help you. So, there is, there is people there tae help you.” (Maggie R17)

Stigma remains

A few people never fully got over their feelings of embarrassment or stigma associated with foodbank use:

“I think I’d still be quite embarrassed if I had tae go back, because o’ the way it is. I think something else needs tae be put in place.” (Amanda R7)

“It helped me at that particular time, the fact that I didnae need tae figure oot how tae get food. So it definitely helped me. I just pray and hope I don’t need tae go through it again.” (Debbie R3)

Fay and Edwin (R22) and their family had a bad experience. They had arrived in the country three years previously from the Caribbean seeking asylum and were housed in an area of the city which they found hostile and unsupportive. They used the foodbank when their asylum claim went through and they were in the process of applying for benefits; during this period they had no money to live on. Fay talked about her experience of using the nearest foodbank which had a banner outside:

“Everybody know that is a foodbank, because it have a banner, it have a banner on the outside, ’Foodbank’… Anybody could read it and know it is a foodbank, so, by people seeing you coming out of there now, they start to look at you at you as if you were less than... than a dog”.

She later added “I can’t describe the look that they give you, coming out of a foodbank… Coming out with bags from the foodbank, they look at you like if you was like... nothing, garbage”. In order to protect their son from being teased or bullied because his parents used the foodbank, they told him to wait in the school while they collected the food: “And it was around by his school, because school is now over, so we tell him wait in school ’cause we going round there, and then come back and pick him up”. It may be that racism played a part in the stigma Edwin and Fay felt projected at them from others as a result of their foodbank use. Although things improved for them over time, they were never completely comfortable with the idea of using foodbanks, although they would do so if needs be:

“To me, like, the third time, it was... it was alright because it wasn’t like the first time you’re going… But, at the... at the end of it all, if I ever had to use the foodbank again, I would do it. Because it’s a bit of common sense. It’s about survival.” (Fay R22)
Despite being a regular user of foodbanks, Stacey (R5) referred to the stigma of other people knowing that she used a foodbank. She mentioned that people could tell your food was from a foodbank because dates were written on the tins in a marker pen and the stigmatising effect of this:

“See the only thing that I didnae actually like about going to the foodbank? See, like, see when people came into my hoose, right, like my kids’, my son’s friends an’ a’ that, right? That’s when they know you’ve been to the foodbank. [date on tins] Aye. So, like, my cupboard door in my kitchen’s been broke for nearly a year. So, every time my son’s friends were coming in— Because they know other people [who have been]. So, that makes you feel, like, downgraded, really.” (Stacey R5)

Summary

Using a foodbank got easier psychologically for people over time, including some people who had to come to terms with the fact that it was the most sensible course of action for them in the circumstances and admit that they could or would do the same again if needs be. Nevertheless, for some people using a foodbank was still a stigmatising experience particularly if friends, neighbours or acquaintances could see or tell that they had used a foodbank, either by virtue of observing them go into the foodbank or by the food they had in their cupboards. Foodbank use also made some people feel guilty, because they were aware of more needy cases than themselves, and self-limitation of foodbank use was described.

Foodbank users reported developing empathy and understanding of other people’s needs and of the unpredictable nature of poverty which could affect people unexpectedly. Nevertheless, some were angry that a lack of other support meant that foodbanks needed to exist.
Later outcomes

We looked at how people’s lives had changed since they last used a foodbank based on changes in their financial position and wider circumstances. We use three categories as a focus for discussion:

- Those who had seen improvements financially and in other aspects of their lives.
- Those who had seen improvements financially, but their lives had remained the same, or deteriorated, in other respects since they last used a foodbank.
- Those whose financial circumstances and wider life circumstances had either remained the same, or deteriorated, since they last used a foodbank.

Each of these three groups will now be discussed in turn. Tables 6, 7 and 8 which summarise the details for participants in each category can be seen in the Appendix.

Improvements in finances and wider circumstances

Five participants reported improvements in their lives, both financially and in other respects since using a foodbank (see Table 6, Appendix).

The foodbank helped Stacey’s family financially and had become part of their family routine. Her daughter had received nappies and other baby-related goods from the time of her birth, and her children liked going along with her to the foodbank.

“Well, it [foodbank] was a good... If we didnae have it, it would have really... made our life even harder. It might have meant getting intae bother or something and actually trying tae go oot and steal something for the sake o’ it... A good experience to actually realise if they know you’ve got a small child, they provide as much as possible for them.” (Stacey R5)

Stacey’s finances had improved because her benefits had been reinstated after her appeal had been successful, and her daughter’s partner now had a job. In addition, her family had acquired a small business (car washing), involvement with which had given Stacey purpose and confidence:

“Because I’ve actually been managing it (business) the past three days, because my husband has been busy, so, ... Like, so excited and, sort o’... bursting wi’ happiness.... I’ve just felt so excited I’m actually doing something.” (Stacey R5)

This was a significant advance for Stacey (R5) who had to deal with a range of personal issues in her life to do with sexual abuse as a child, and related mental health issues. The
opportunity to work, along with support for her mental health issues, combined to improve Stacey’s quality of life:

“The past couple o’, for years, I just didnae actually have any confidence or any... and to actually get oot my bed for. Even though I had kids and everything else... It’s the way you just feel absolutely drained... But I got the doctors the other day to up my medication a wee bit to see if that was gonnae make me feel any better.” (Stacey R5)

Having tried different types of support (like addiction services that she deemed not helpful), Stacey eventually got referred to a counselling organisation from a local charity she was involved with for children and young people. There, she appeared to be getting appropriate support and had had around 40 counselling sessions which gave her the confidence to work despite her mental health:

“... and during that time I was going tae the foodbank, I was actually going tae a counselling service called Spark. Referred by a voluntary organisation ...Like I’ve never had power. I felt as though I’ve never had the power to actually dae it, and, noo, I can actually see what Sparks actually helped me to dae... And see even like six month ago, or a year ago, I wouldnae have actually been able to say that I could actually dae something like this. And I’ve never actually – I’ve never had a job... I’ve never had a job. No, ‘cause I’ve had – I’m on anti-depressants and a’ that and everything, so, I’ve never actually had a job.” (Stacey R5)

Stacey had also got heavily involved with a local African church and the family had been baptised:

“We’re all involved. Like that tae... go to that church, it’s honestly like it has changed all our lives.” (Stacey R5)

In Stacey’s case, several organisations in combination – the foodbank, a youth charity she volunteered at, a counselling charity, and the local church – had helped bring about positive changes in her life.

“So, I don’t know between that and being doon there the past three days is actually gie’ing me a big bit of happiness and enjoyment.” (Stacey R5)

In some cases, the foodbank served as a stop-gap until other circumstances improved, but was not instrumental in bringing about those wider changes. Jill (R12) had had a lot to deal with at the time of her foodbank use. She had experienced the recent death of her dad, her partner had lost his job, her hours were cut at work and she was in the desperate situation of having to use a foodbank which affected her very badly, emotionally and psychologically.

“I feel as if, if we hadn’t have used the foodbank, it could’ve had a kind o’ knock-on effect, and it could o’ – it might not – we might not have been where we are at the moment.” (Jill R12)
Not long after using the foodbank several things changed in her life for the better. She got a new job in a pub and went back to college. This coincided with her partner getting a job and their getting engaged and having a baby. She also had plans to continue studying and hopefully go to university, though she wasn’t sure when.

“Yeah, 2015, that would have been, I started pub work in the March. I had went back to college and things like that, we got engaged and planning a wedding, everything kind o’ all happened at the one time... and then at the start of 2016 that’s when we discovered that I was pregnant.” (Jill R12)

Alan’s (R14) story was relatively straightforward in that he had used a foodbank due to a benefit overpayment which had then been cut back to rectify the situation. He had since got a fulltime job as a carer and reported being much happier and financially secure. The foodbank had helped at an important time, but was relatively insignificant as part of the bigger picture.

There were cases where the foodbank had played a role in wider improvements in people’s lives, by acting as broker to community or voluntary organisations. Zina had used a foodbank during her asylum claim as she and her daughter had very limited income during this time. Prior to this Zina had been interested in community and voluntary work and the foodbank helped her in terms of making links with the wider community, so eventually she went to help out and meet others. Through her wider community contacts she got onto a course at a local college, and was hoping to study community development at university to give her a greater opportunity of obtaining work in the future:

“And you know volunteering and all the stuff, I think it was even from the foodbank that I really got the interest that – you know, people want to go out of their way to help others and stuffs like that.” (Zina R15)

Even though she had significant health problems she still wanted to work, although she recognised the limitations that her health (suffering from lupus) placed on that:

“So if there was a job like that, I could manage. But I can’t go into an organisation and then I’m fit for four weeks and I’m out for six weeks, which my health too can... And most of the time I just need that constant rest. I don’t have the full strength to, like, carry on for a long time. Even I don’t – to travel real long distance is a problem for me ...Sometimes you know I just – if I’m to leave then and I know I’m gonna catch the bus then I – funny enough I go to the bus stop like 30 minutes before time.” (Zina R15)

Stuart (R20) had previous difficulties managing his money although he was currently doing better financially and learning to cope better. He had been signposted to voluntary work via the foodbank but had to give it up (due to personal reasons). He was trying to improve his skills, particularly literacy, and getting help from a local organisation, and hoping to do further voluntary work in the future. He associated some of this positive change with his
involvement with the foodbank, as it was there that he learnt about volunteering opportunities:

“It’s made a big change for me. I know the foodbank’s there for us. I think it made a big change for me. I think it gives me a couple of ideas inside me, and I’ll go, ‘right, I know the Food Train’s there, the staff’s there’, and it just clicks in.” (Stuart R20)

Financial improvements only

The largest group of respondents were those whose financial situation had improved but whose lives were unchanged in other respects, as seen in Table 7 (Appendix).

Several respondents – Ellen (R9), Alex (R13), Stephen (R16) and Sally (R18) – were dealing with complex problems associated with drug addiction and its aftermath in terms of ongoing physical and mental health issues, or methadone dependence. As a result, they did not see how they could work in future and saw little prospect of an improvement in their quality of life. Some like Ellen and Stephen had experienced homelessness and were still trying to progress to independent living. Ellen was living in transitional housing and hoping to get her own place eventually. Stephen was living in supported housing.

Sally (R18) said herself that her quality of life was very poor. She had complicated health problems, and mobility issues as she was very unfit due to lung disease. She explained that she “did not have much of a life” and had no prospect of working, and blamed herself. Her everyday life was ruled by getting methadone; she had been on the methadone programme for 15 years but could not see a way out of it:

“I was thinking of getting aff it, I’m thinking ‘Ach, this’ll be alright’, ‘cause they’ve been telling me for years, ‘oh, you cannae come aff it just like that’, you know? And I’ve been worrying and then because I’ve been cutting doon – alright, I’ve been getting, like, a lot of sleepless nights because I’ve no’ had as much, ...But I was hoping to be aff it by the end of this year but the way things are looking, I don’t think so.” (Sally R18)

Similarly, Stephen (R16) also had very poor health and had been on the methadone programme for 17 years. Like Sally, he had no prospect of working and spent most of the day at home. He also largely blamed himself for what had happened to his life:

“And I’ll tell you what I’ve noticed as well, see when you’re like in the house and isolated and you’re feeling low? Your aches and pains are sorer... And you kind o’ slacken more, you become lazy, you become lethargic, you don’t – and then you don’t want tae talk tae people, you know? ...and like I said and then they’ve just took my driving licence away and that as well, which is another barrier. But as I say, I know I cannae really moan, it’s – a lot o’ it’s o’ my ain making. You know what I mean?” (Stephen R16)
Stephen (R16) was grateful for the foodbank experience and said it was helpful at that time for providing social interaction, but in fact he had only used a foodbank twice:

“I must be honest, when I came away fae it I felt a wee bit better. Because I had interacted, as I said the lassies were dead nice, you know, and after being you know maybe stuck in the house, and it was a Sunday I had went up, you know what I mean? I actually came away fae it feeling... a bit better.” (Stephen R16)

David (R10) had a life of ups and downs. He was currently getting JSA so had a regular income. He was however undergoing assessment for ESA as he felt he could not do a proper job due to his alcohol problems. He had previous problems of homelessness although was now a social sector tenant. He had tried to overcome his problems, been on recovery programmes and tried different types of support and volunteering. He had got a job at one point that made him feel better but when his employer found out about his previous convictions he lost the job and went back on the drink. He had had previous help for his alcohol addiction but felt he needed to get more support to help him overcome it.

David (R10) had enjoyed doing voluntary work on a community food initiative, delivering food to older people, but he had to stop as he was undergoing an appeal for ESA; if he was doing voluntary work then he would be considered fit for a paid job:

“Because I’m on Jobseekers and I’m appealing against it, I’m now in a catch-22 situation... I can’t do volunteering... but I’ve now got – I’ve got one side, my CAT worker, my employment support worker, saying ‘you’re no’ fit tae work’...But the other side are saying ‘you’re fit for work’! You need to prove you’re looking for a job every day of the week!” (David R10)

The value of volunteering, in this case on a food project, was described by David:

“Confidence. Gets you out, gets you involved wi’ people. Gives you self-esteem.” (David R10)

However, for David, the foodbank experience was one of meeting immediate food needs:

“Well, it did help in the short-term, ‘cause you have two bags full o’ food. You’re like that, “I’m eating the night!” (David R10)

Ongoing problems of anxiety and stress, much of it related to health problems and/or benefit eligibility and assessments, lowered quality of life for many people on an ongoing basis, irrespective of improvements in finances or foodbank use. Aisha (R1), a single parent, developed a series of health-related problems within her family over the past few years. Her son developed a serious psychiatric condition and was hospitalised while still at school. Aisha had planned to get a job but this was no longer possible as she became her son’s official carer (his mental health problems were ongoing). Due to her son’s illness Aisha’s benefits were stopped until the correct benefits were worked out; it was during this time that she needed to use a foodbank. Eventually the benefit issues was resolved and she was in receipt of the appropriate benefits including Income Support and Carer’s Allowance, and
thus her finances had improved. However, since then, Aisha had more setbacks in that she was diagnosed with breast cancer, had related health problems, and suffered a family bereavement (her brother died suddenly). She had more worries about the future and concerns for her son:

“I wasnae worried about death. I was worried about [son] an’ I thought too much is going on. I don’t know if it’s ‘cause o’ stress. Nobody knows how it happens. So I got the operation. Macmillan helped me quite a lot. I got some disability money for a while but once the cancer was away they stopped it.” (Aisha R1)

“I think I’m more scared now. I think that time, everything was happening fast, I thought ‘If I die, I die’. But now it’s that way you worry ‘What if it comes back?’ Flashbacks.” (Aisha R1)

John had worked all his life (25 years) when he got made redundant then became ill with a serious brain condition. Initially he could not claim benefits because his partner was working. He was eventually awarded ESA but had the enduring stress of going for assessments.

Sue’s life took a turn for the worse when her marriage broke up and she became homeless. She then had a work-related injury and lost her job, receiving no compensation for what had happened to her. She then turned to alcohol and suffered from depression and anxiety. While she was applying for ESA her benefits were cut, but when the money was reinstated she was much better off and she discovered she had been underpaid, so received a back payment which was very beneficial. While Sue declared that “Financially I’m an awful lot better, because I’m on the correct money now” (Sue R8), she also said that she no longer had any structure in her life, was very sad and emotional, suffered from severe anxiety and panic attacks and was becoming socially isolated:

“And all of a sudden, after being married and having three children, running around after them for years and years, suddenly for the first time in my life I was on my own, as well... It’s just the anxieties got an awful lot worse. I kinda struggle to leave the house now, to be quite honest with you... it’s just like a panic attack feeling that, the thought o’ going out anywhere.” (Sue R8)

She also lived with the stress of losing her ESA and being called back for more assessments:

“See if they say that they’re taking me off o’ ESA and they’re gonnae put me back on Jobseeker’s, because I know they’re, this is what they’re trying to do with people, it’s terrible.” (Sue R8)

Sue said that the foodbank had helped her when she was feeling very low because of the care and support she received, but again, she was not a regular user of foodbanks to gain the ongoing social benefit.
Although Kate’s financial situation had improved due to being put on JSA, where previously she had been living off PIP (£21 per week) for over a year, she was trying to appeal for ESA. She described her life as being ruled by having to look for work, when she claimed she was unfit to work because of her disability and lack of skills:

“And I’ve to hand out CVs. But how am I supposed to do this? No one’s going to take me on, at my age, with difficulty seeing and hearing. I’m 56… computer… My daughter’s tried to show me, it’s like going in and going out. I mean I’m hopeless with computers, and hopeless with this. Even sitting staring at a computer I get sore heads, and this eye flares up. I keep getting infections in it. So I attend the hospital for that. But no, he can’t see this… but you need to do this. And then go and do voluntary work in the second hand shop. And I went, ‘but, why’? If you don’t do it you’ll end up getting taken off benefits. So I’ve got two weeks to prove, to hand these out (CVs), take a note of where I’ve handed them out so he can check I’ve done this.” (Kate R21)

In the case of migrants Fay and Edwin (R22), their ongoing problems stemmed from lack of work and their migrant status. Although they were now in receipt of the correct benefits (JSA), they struggled financially from time to time:

“’Cause sometimes we do run out of food. Even though we have [benefits] and he isn’t working, it’s still kind of tough.” (Fay R22)

Edwin had tried hard to get a job but been unsuccessful, but did not know if he could access training:

“I mean, nothing I can do, I just have to go with the flow… But I just need a start… they tell me to look up online and see what is available but the time they had it, it wasn’t really available, and then I think I might have to go onto a course, I don’t know if I have to pay for the course and all this stuff.” (Edwin R22)

Edwin was also suffering from post-traumatic stress and other issues, including sleep problems. His GP had sent him to counselling but he stopped going because it became too expensive to travel to it. The family also lived in fear of being sent back to their home country as they currently had less than five years left of their ‘leave to remain’ status:

“We still don’t know what will happen, because we have five years… We don’t know… Appeal a… appeal something they call it, a lawyer, we have to go in, a month before the five years, see lawyer and lawyer will put you some papers so then they will give us our next five years, and then it was two years, or you get it indefinitely which would mean… So, you still have this in your head.” (R22)

Their migrant status was exacerbated by living in a fairly hostile and unsupportive community, dealing with local racism issues.

“I don’t like to use the phrases ‘White’, but they had some White girls talking and laughing and making jokes and my wife start to laugh – and they had kids too – and
they turn around and tell her that they ain't cracking no jokes for no niggers to laugh.” (Edwin R22)

“Yeah, this lady downstairs by me, yeah, she come and oppose me on the staircase and she was very abusive, and she was – she used racial comments to me. So the police got involved.” (Fay R22)

Edwin and Fay felt they had to go everywhere together and had few friends or social contacts:

“We always together, we go everywhere together, we come back home together. All we do is just stay here.” (Edwin R22)

Stress and anxiety also extended to those in low paid work. Debbie (R3) had got more hours at work so she was able to claim Tax Credit, and her husband’s benefits had been resolved. As a household they had a more secure income even though they were still sometimes struggling to manage, especially as Debbie had a teenage son who required clothes and trainers that were costly. She also had the constant worry about losing their house as she was paying a mortgage (if she lost her job or her husband lost his benefits), and still had a lot of anxiety and sleeping problems.

**Unchanged or deteriorated finances and other circumstances**

There were five participants whose financial and other circumstances either remained unchanged, or deteriorated, in the period after using a foodbank, as seen in Table 8 (Appendix).

The group of participants whose circumstances remained largely unchanged or deteriorated after foodbank use exhibited a common set of problems including mental health issues, bereavements and ongoing debt. Susan (R2) and Amanda (R7) still found it hard to cope on the benefits they were getting. Susan said her bills took up all her money. Amanda was still paying off debts. She has the usual costs associated with having a young daughter (clothes, food, toys, trips etc) and was expecting a baby. She was also in debt and paying off her mum’s recent funeral:

“Struggle for money. Know how, like, when you dae get paid you've got your bills to pay, you've got your phone bill, you’ve got your council tax, you’ve got all sorts. It’s like I’m just back tae square one... No, nothing’s changing for me at all.” (Susan R2)

“wi’ my ESA, it’s fortnightly money, know what I mean? An’ it’s like two-ten a fortnight, so by the time you’re paying your bills I’m left wi’ hardly anything.” (Susan R2)

“I’m struggling the noo, like I say, clothing, she [daughter] needs summer clothes. But I’m having tae pay for the funeral, and then I’m having tae buy for a baby, and then I’m having tae dae a hoose... I’ve been still applying for jobs but since I fell pregnant
this time, we found oot my mum died, found out I was pregnant, I collapsed, ended up in hospital.” (Amanda R7)

Maggie (R18) was still in debt and arrears, finding it hard to manage her money. She had a range of health problems and pain issues. She was not happy where she lived as it held unhappy memories for her, and felt the only way out was to be relocated to a better area.

Some participants had ongoing needs stemming from mental health problems. Bill (R7) had complex mental health problems and had recently been in hospital after a psychiatric episode. He said he had no money and was unsure what was happening with regard to his benefits because there was nothing in the bank. He clearly needed help and support to figure out what was going on. He had several bereavements (friends and family members) in recent times, and had found his partner dead in his flat recently. He appeared to need help in getting his home and life organised (he was in receipt of services from Loretto Care who came to his house to help him):

“I want tae be here. A lot of people say would I like to flit? No, I don’t want to flit. I’d like to clean this hoose oot. I’m trying. I’ve done my living room and kitchen best I could. I can dae better. I’d love to get this table thrown oot. It’s a’ falling to pieces, I’m scared in case I fall o’er it.” (Bill R19)

“Still feeling a bit strange. I cannae get nothing organised.” (Bill R19)

“And I’ve lost nearly all my family.” (Bill R19)

Matthew (R11) was struggling to cope with Universal Credit and was still using the foodbank (he had attended the foodbank on the day of the interview). He was in receipt of a wide range of different supports and therapies and his doctor had recently suggested music therapy for his mental health problems as he enjoyed playing the guitar. However, little had changed for Matthew since he started using foodbanks. He said his life was very much up and down and he was desperate to achieve a ‘normal life’ but did not appear to have the means to get there:

“My doctor can now refer me to certain services to try and, kind of... He goes, ‘are you playing music now? I was like, ‘Yeah, okay’. It’s like there’s projects and stuff like that that help people... Helping with their mental health issues and stuff like that, you know? I mean, you put a guitar in my hand and I’ve got something that actually talks to me like a human and enjoys my company, and, honestly, it makes a world of difference for me. It just makes it go away. It really does.” (Matthew R11)

“There’s nothing more I want to be, is back to a normal life, settled, and on the up and up, because I can’t deal with this for the rest of my life... I really just can’t.” (Matthew R11)

“I can feel fantastic one day and then the next day I just feel like I just cannae dae anything an’ face the world.” (Matthew R11)
Summary

In terms of later outcomes, foodbanks played a role for many participants in getting through a difficult time, and it was often the case that the emotional support provided was as helpful as the practical help. In this regard, some people drew comfort from incorporating foodbank use into their routines. Wider improvements in people’s lives occurred for some participants, but foodbanks were not pivotal to these other changes. These participants appeared to have the resources and motivation to get on better due to personal changes, getting a job, voluntary work or the prospect of education. They also seemed, mainly, to be receiving an appropriate level of support. There were instances where people had either experienced volunteering around food, or been directed towards volunteering opportunities via a foodbank, and the volunteering experience had given them a way forward in their lives, in line with one of the Scottish Government’s food insecurity dignity and inclusion principles.

The household’s financial situation improved for the majority of participants because their acute financial crisis had been resolved (e.g. benefits were back in place). Many, however, still reported struggling on a low income. For those whose financial situation had not improved, this tended to be because they had difficulty managing their limited money, were in arrears or were still paying off debts.

For the majority of participants, their wider circumstances, apart from finances, did not alter greatly in the period after using a foodbank. This was often to do with difficult and intractable problems particularly concerned with poor physical and mental health, drug and alcohol addictions, homelessness and poor quality of life. A lot of vulnerable people suffered ongoing stress related to low incomes, uncertainties about benefits, and employment pressures – either wanting to find work, or feeling under pressure to get work when they considered themselves unfit to do so. Although many were in receipt of support, some lacked the right type or frequency of support, particularly in dealing with issues associated with loneliness, anxiety, and other mental health issues. The foodbank provided compassion, kindness and often a listening ear, but more regular and ongoing support than foodbanks can provide is required for many such people in vulnerable situations.
Conclusion

The use of foodbanks

Participants used foodbanks at times of acute financial crisis, sometimes simply because they had been struggling for some time on a low income, but more often due to changes or problems with their welfare benefits. The bigger picture, however, was that many foodbank users had a number of chronic physical and mental health problems, often linked to addictions, past episodes of homelessness, and family bereavements. As a result of their personal problems, many participants had a number of sources of professional support. However, they could also be socially withdrawn and lacked social support (emotional, practical and financial). A number of foodbank users in our study desired more social interaction and involvement in community projects, which they either lacked knowledge of or were unaware how to access.

Participants were embarrassed and ashamed at having to use a foodbank, as it signalled their perceived failure to others and made them feel guilty that they had let their family members down, or that they were taking food that others needed more than themselves. Many people used foodbanks two or three times, or in some cases up to half a dozen times, but there were a few people who had become regular (e.g. weekly) users, while others curtailed their use of foodbanks on the grounds that they were not as deserving as others in acute need.

Participants were referred to foodbanks by a wide range of other organisations, including particularly housing officers, health professionals and financial advice agencies. The voucher system was seen as a straightforward means of being allocated food at a foodbank, but prior to that vouchers were somewhat of a barrier to access due to having to find or wait for a source of referral. Awareness of foodbanks was low prior to use, and for some people geographical distance to a foodbank was an issue that resulted in physical difficulty or financial expense. Most foodbanks were anonymous, which suited users as it shielded them from being observed, but some foodbanks had signs outside which users disliked for this reason.

Foodbank provision

In the main, foodbanks provided basic foodstuffs, which enabled people to feel they would not go without food. Participants appreciated what was provided and understood the limitations on what foodbanks could provide, and there appeared to be sensitivity on the part of foodbanks to the needs and preferences of different users. Foodbanks varied in the extent to which they were able to provide fresh food. There were some issues of storage and/or wastage by some regular users of foodbanks, particularly in circumstances where there was less choice about what was provided. A bigger issue was the fact that there were participants who did not know how to make a meal with what was provided by a foodbank. There may be scope for foodbanks to provide assembled ingredients with cooking guidelines
and demonstrations to their less adept users, i.e. in some cases, the suitability or utility of provisions was an issue; this is related to, but not quite the same thing as, the principle of choice contained in the Scottish Government’s approach to food insecurity. The provision of toiletries and pet food by foodbanks was very welcomed by users.

The foodbank experience

Foodbanks exceeded people’s expectations, in terms of the welcoming environment and the way participants were treated by volunteers. Participants lacked prior understanding of foodbanks and anticipated a straightforward, perfunctory occurrence, but found the foodbanks much more welcoming than that. Many appreciated the caring, helpful and understanding attitude of foodbank volunteers, and were unanimously positive about their experience. They also liked the relaxed, social atmosphere which allowed them to sit down, have a cup of tea and talk to someone, which seemed for many to be of great value alongside the food provision. Again, this relates to the Scottish Government’s principle of recognising the social value of food. However, whereas that principle attests to the collective and transformative value of food in the community, here we are referring to the way in which the provision of access to food for those on very low incomes can be done in ways which restore dignity, provide support (see below) and enable social contact and the amelioration of loneliness for the individual.

Although many participants still felt guilty and embarrassed about using a foodbank, they also better understood the range of circumstances that people could be in and the misfortunes that could occur that led people to use a foodbank. Although they highly valued foodbanks and found using them easier, participants still felt that foodbank use was stigmatising, even in deprived communities.

Outcomes from using foodbanks

Foodbank use did not transform people’s lives, although it did improve lives for some people at a particular point in time. Many participants had chronic physical and mental health problems associated with current or past addictions and bereavements, as well as ongoing stress and anxiety surrounding benefits, low incomes, employment issues, and debt. People in these circumstances tended to be socially withdrawn and were in need of social and emotional support and inclusion beyond the intermittent interactions they had at foodbanks. In some cases, however, the foodbank had helped people obtain a social outlet and for some also a development experience through directing them to a volunteering opportunity, but it seemed that more people could benefit from this kind of assistance.
The value of foodbanks

Considering the place of foodbanks within the landscape of welfare, there was some evidence that foodbanks were useful to other agencies, both state and non-state. For staff of other agencies, including state benefit and employment agencies, foodbanks provided a place to direct people in desperate financial need towards for food aid. On the other hand, foodbanks were sometimes also a source of referral to some of those other agencies.

The biggest value of foodbanks was to the individual users. This started with providing food and helping people through a financial crisis, but it also extended to helping people cope with extreme poverty in general by the provision of other groceries, particularly toiletries and baby goods, which acted as a supplement to very low incomes.

In addition to financial aid, foodbanks were revealed as having a very important social value. They offered participants a much needed opportunity for social interaction through the relaxed, café-style atmosphere at many foodbanks. This included interaction with other users, but particularly valuable was the interaction with volunteers. This extended to a form of social support both emotional (having someone to talk to about worries and anxieties) and practical (signposting people to other helpful agencies). Knowing that this source of social support was available should they need it was also highly valued by users, although it was also clear that many people would benefit from more regular social interaction than the general set-up of foodbanks (for example with restricted opening hours) currently enables.

Over and above all this, however, it was very striking how valuable the interaction at foodbanks was for restoring some aspects of users’ dignity and humanity. Foodbank volunteers acknowledged, and often identified with, the shame, embarrassment and despair that some participants were experiencing, but did not judge or blame people for the situation they found themselves in. Volunteers helped to lessen the shame and embarrassment some participants felt in resorting to a foodbank, and treated them with respect and without judgement or suspicion, all of which was a welcome relief and surprise to users. The contrasts which participants drew between the quality of interactions they had at foodbanks with the treatment they received from public sector welfare and employment agencies stands as a tribute to the former and a criticism of the latter.

The debate about whether or not foodbanks should exist in a prosperous nation continues and it is not our place here to declare a position on that question. What we can say, however, is that foodbanks offer a degree of social and personal value to their users beyond the food itself, and that such value should not be lost in this debate, nor jeopardised by decisions on the future of foodbanks. There are clearly ways in which food aid (including but not limited to foodbanks) can serve as a means to enhance social inclusion and support for some of the most vulnerable people in society. The potential to convert or extend foodbanks into a less covert, less stigmatising and more inclusive means of food aid and social support is something worthy of more consideration, and is being facilitated by the Scottish Government’s Fair Food Transformation Fund.

The fact that the stigma associated with foodbanks prevails, whether that is anticipatory or experienced (as evidenced in our findings and wider research in this field), raises a question
about whether foodbanks are best suited to provide the dignified and socially inclusive access to food that policy seeks in the longer term. The Scottish Government in its ‘Dignity: Ending Hunger Together in Scotland’ report\(^46\) recommends that any organisation which secures Scottish Government funding and support to work on tackling food insecurity must demonstrate how its approach promotes dignity and is helping to transition away from emergency food aid as the primary response. It calls for a collective focus to reduce and remove the need for foodbanks, and proposes transitioning from a food charity to a ‘food justice’ system. This would imply that community food initiatives are considered best placed to provide this supportive role as, in principle, they are closer to the Dignity agenda.

**The evidence gap**

The community food movement plays a valuable role in many people’s lives in supporting communities through identifying barriers to food security and developing local responses using participatory, creative and practical ways of working, offering tangible benefits. The available evidence for this comes largely from those involved in such projects (e.g. the Fair Food Transformation Fund evaluation; Community Food and Health Scotland case studies), although the recent Review of the Fair Food Transformation Fund will provide further independent evidence on the impacts of community-led food insecurity projects, and of the key characteristics of projects that enable such impacts.

However, both foodbanks and other types of community food provision face the twin challenges of being accessible to those in need (and in most need) and being able to provide suitable food and social inclusion and support that users feel able to engage with. We have already noted GoWell evidence that a large group of people experiencing food insecurity do not access foodbanks, probably for reasons of shame and stigma\(^47\). There is no evidence yet to indicate the extent to which different models of food assistance achieve these accessibility and inclusion and support objectives, or indeed whether one model performs better in these regards than others. Therefore, before realising any full transition away from foodbanks (or other emergency food providers) towards community food projects, it is important to ensure that those in greatest need, or with complex needs, or who are considered ‘hard-to-reach’, are able or have the means and confidence to access such initiatives; and, for some projects, also to be sure that those in need want to be involved in food-related activities in order to obtain the support they require. These are dilemmas that need addressing and where more evidence is sought, which ongoing monitoring and evaluation of a diversity of food assistance projects might provide.

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Table A1. More detailed sample characteristics.

<table>
<thead>
<tr>
<th>Participant ID</th>
<th>Area</th>
<th>Personal &amp; household characteristics (at time of interview)</th>
</tr>
</thead>
<tbody>
<tr>
<td>R1 (Aisha)</td>
<td>Pollokshaws</td>
<td>F 40+ lives with son (17)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Scottish Pakistani</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Not working</td>
</tr>
<tr>
<td>R2 (Susan)</td>
<td>Birness Drive</td>
<td>F 40+ lives with partner and daughter (17)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>White Scottish</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Not working</td>
</tr>
<tr>
<td>R3 (Debbie)</td>
<td>Cardonald</td>
<td>F 50+ lives with husband and son (18)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>White Scottish</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Part-time cleaner</td>
</tr>
<tr>
<td>R4 (John)</td>
<td>Govan</td>
<td>M 50+ lives with partner and son (17)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>White Scottish</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Not working</td>
</tr>
<tr>
<td>R5 (Stacey)</td>
<td>Drumchapel</td>
<td>F 40+ 7-person household (partner, 3 children, daughter’s boyfriend and baby daughter)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>White Scottish</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Not working</td>
</tr>
<tr>
<td>R6 (Bobby)</td>
<td>Drumchapel</td>
<td>M 65 Single</td>
</tr>
<tr>
<td></td>
<td></td>
<td>White Scottish</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Retired</td>
</tr>
<tr>
<td>R7 (Amanda)</td>
<td>Govan</td>
<td>F 26 lives with partner and daughter (6)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Expecting baby in Nov 2017</td>
</tr>
<tr>
<td></td>
<td></td>
<td>White Scottish</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Not working</td>
</tr>
<tr>
<td>R8 (Sue)</td>
<td>Birness Drive</td>
<td>F 50+ Single</td>
</tr>
<tr>
<td>Code</td>
<td>First Name</td>
<td>Location</td>
</tr>
<tr>
<td>--------</td>
<td>------------</td>
<td>-------------------</td>
</tr>
<tr>
<td>R9</td>
<td>Ellen</td>
<td>Drumchapel</td>
</tr>
<tr>
<td>R10</td>
<td>David</td>
<td>Eastwood</td>
</tr>
<tr>
<td>R11</td>
<td>Matthew</td>
<td>Pollok</td>
</tr>
<tr>
<td>R12</td>
<td>Jill</td>
<td>Castlemilk</td>
</tr>
<tr>
<td>R13</td>
<td>Alex</td>
<td>Birness Drive</td>
</tr>
<tr>
<td>R15</td>
<td>Zina</td>
<td>Scotstoun (previously lived Govan)</td>
</tr>
<tr>
<td>R16</td>
<td>Stephen</td>
<td>Yoker</td>
</tr>
<tr>
<td>R17</td>
<td>Maggie</td>
<td>Bridgeton</td>
</tr>
<tr>
<td>R18</td>
<td>Sally</td>
<td>Charles</td>
</tr>
<tr>
<td>Reference</td>
<td>Name</td>
<td>Address</td>
</tr>
<tr>
<td>-----------</td>
<td>-----------------</td>
<td>-----------------------</td>
</tr>
<tr>
<td>R19 (Bill)</td>
<td>Charles Street</td>
<td>M 50+ Single</td>
</tr>
<tr>
<td>R20 (Stuart)</td>
<td>Govan</td>
<td>M 40+ Single</td>
</tr>
<tr>
<td>R21 (Kate)</td>
<td>St Andrews Crescent</td>
<td>F 50+ Lives with daughter (19)</td>
</tr>
<tr>
<td>R22 (Fay &amp; Edwin)</td>
<td>Shettleston</td>
<td>M 40+ and F 30+</td>
</tr>
</tbody>
</table>

(NB: pseudonyms are used)
Table A2. Localities of residence among participants.

<table>
<thead>
<tr>
<th>Neighbourhood</th>
<th>n</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pollokshaws/Birness Drive/Eastwood</td>
<td>5</td>
</tr>
<tr>
<td>Govan/Cardonald</td>
<td>4</td>
</tr>
<tr>
<td>Drumchapel</td>
<td>3</td>
</tr>
<tr>
<td>Pollok</td>
<td>1</td>
</tr>
<tr>
<td>Castlemilk</td>
<td>1</td>
</tr>
<tr>
<td>Scotstoun/Kingsway/Yoker</td>
<td>3</td>
</tr>
<tr>
<td>Bridgeton</td>
<td>1</td>
</tr>
<tr>
<td>Shettleston</td>
<td>2</td>
</tr>
<tr>
<td>Charles St/Sighthill</td>
<td>2</td>
</tr>
<tr>
<td>St Andrews Crescent</td>
<td>1</td>
</tr>
<tr>
<td></td>
<td>23</td>
</tr>
</tbody>
</table>
Table A3. Types of foodbank used by participants: Trussell Trust (TT) and others.

<table>
<thead>
<tr>
<th>Trussell Trust foodbanks</th>
<th>Other (non-TT) foodbanks</th>
</tr>
</thead>
<tbody>
<tr>
<td>Parish Church, Ibrox</td>
<td>Phoenix Centre, Drumchapel – independent foodbank</td>
</tr>
<tr>
<td>Hillington Park Church, Cardonald</td>
<td>Church Van, Drumchapel – ran by Destiny Angels, Destiny Church Glasgow</td>
</tr>
<tr>
<td>Butterbiggin's Road Foodbank, Govanhill</td>
<td>Eat Well – Glasgow Housing Association. Offers emergency food parcels, money, debt and budgeting support</td>
</tr>
<tr>
<td>The Preshal Trust, Govan</td>
<td>Glasgow City Mission – Christian charitable organisation</td>
</tr>
<tr>
<td>Baptist Church, Mosspark</td>
<td>Asian food stall – temporary food stall giving out free fruit and vegetables</td>
</tr>
<tr>
<td>Blawarthill Parish Church, Scotstoun,</td>
<td>[former] Elim Church Foodbank, Anniesland – independent foodbank supported by ‘Vineyard’ church</td>
</tr>
<tr>
<td>Parish Church, Parkhead</td>
<td>Unity in the Community, Govan – charity providing practical support and solidarity, especially aimed at asylum seekers – focus on wholefood, fruit and vegetables</td>
</tr>
<tr>
<td></td>
<td>St Rollox Church, Sighthill – church-led foodbank with particular focus on asylum seekers/refugees</td>
</tr>
</tbody>
</table>
### Table A4. Foodbank use by participants.

<table>
<thead>
<tr>
<th>Participant ID</th>
<th>Area</th>
<th>Foodbank use, referral &amp; location</th>
</tr>
</thead>
<tbody>
<tr>
<td>R1 (Aisha)</td>
<td>Pollokshaws</td>
<td>2x (2014 &amp; 2016)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Referred by GHA Housing Officer</td>
</tr>
<tr>
<td></td>
<td></td>
<td>FB: Hillington Park Church, Cardonald, Trussell Trust (TT)</td>
</tr>
<tr>
<td>R2 (Susan)</td>
<td>Birness Drive</td>
<td>3 x (vague on dates; most recent was few weeks previously 2017)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Referred by GHA Housing Officer (2) and Job Centre (1)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>FB: Parish Church, Ibrox, TT</td>
</tr>
<tr>
<td>R3 (Debbie)</td>
<td>Cardonald</td>
<td>2 x (2015, over 2 weeks)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Referred by GP and Money Matters</td>
</tr>
<tr>
<td></td>
<td></td>
<td>FB: Parish Church, Ibrox, TT</td>
</tr>
<tr>
<td>R4 (John)</td>
<td>Govan</td>
<td>2 x (2015)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Referred by GP and Money Matters</td>
</tr>
<tr>
<td></td>
<td></td>
<td>FB: Parish Church, Ibrox, TT</td>
</tr>
<tr>
<td>R5 (Stacey)</td>
<td>Drumchapel</td>
<td>Every week for a year (2015/16)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Referred by Drumchapel 3D</td>
</tr>
<tr>
<td></td>
<td></td>
<td>FB: Phoenix Centre, Drumchapel, non-TT</td>
</tr>
<tr>
<td>R6 (Bobby)</td>
<td>Drumchapel</td>
<td>Every week since 2015 (reduced to monthly)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>FB: Church van, Drumchapel, non-TT</td>
</tr>
<tr>
<td>R7 (Amanda)</td>
<td>Govan</td>
<td>1 x (2016)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Referred by Health Visitor</td>
</tr>
<tr>
<td></td>
<td></td>
<td>FB: Hillington Park Church, Cardonald, TT</td>
</tr>
<tr>
<td>R8 (Sue)</td>
<td>Birness</td>
<td>4 x (end 2015/2016)</td>
</tr>
</tbody>
</table>
| Drive            | Referred by benefits advisor at the housing office. Once got voucher from CAT worker.  
| Drive            | FBs: Hillington Park Church, Cardonald, TT  
| Drive            | Parish Church, Ibrox, TT |
| R9 (Ellen)       | Drumchapel | 3 x (2017)  
| R9 (Ellen)       | Drumchapel | Referred by Housing (Moving On)  
| R9 (Ellen)       | Drumchapel | FBs: Church van, Drumchapel, non-TT (occasional use for about a year)  
| R9 (Ellen)       | Drumchapel | Phoenix Centre, Drumchapel, non-TT |
| R10 (David)      | Eastwood  | 3 x (2015 over 18 months)  
| R10 (David)      | Eastwood  | Referred by Job Centre and CAT worker  
| R10 (David)      | Eastwood  | FBs: Butterbiggins Rd FB, Govanhill, TT  
| R10 (David)      | Eastwood  | Hillington Park Church, Cardonald, TT |
| R11 (Matthew)    | Pollok    | 9/10 x (2012 – current day)  
| R11 (Matthew)    | Pollok    | Referred by GHA Housing Officer, Job Centre and CPN  
| R11 (Matthew)    | Pollok    | FBs: Hillington Park Church, Cardonald, TT  
| R11 (Matthew)    | Pollok    | The Preshal Trust, Govan, TT  
| R11 (Matthew)    | Pollok    | Baptist Church, Mosspark, TT  
| R11 (Matthew)    | Pollok    | GHA Eat Well scheme, non-TT  
| R11 (Matthew)    | Pollok    | Glasgow City Mission, non-TT |
| R12 (Jill)       | Castlemilk| Advised by Money Matters; got referral voucher from Law Centre in Castlemilk  
| R12 (Jill)       | Castlemilk| FB: Butterbiggins Rd FB, Govanhill, TT |
| R13 (Alex)       | Birness Drive | 6 x (2016 – Easter 2017)  
<p>| R13 (Alex)       | Birness Drive | Referred by CPN |</p>
<table>
<thead>
<tr>
<th>Reference</th>
<th>Location</th>
<th>Date</th>
<th>Referral Details</th>
</tr>
</thead>
<tbody>
<tr>
<td>R14 (Alan)</td>
<td>Kingsway Court</td>
<td>2/3 times (2014)</td>
<td>Referred by Job Centre, FB: Parish Church, Scotstoun, TT</td>
</tr>
<tr>
<td>R15 (Zina)</td>
<td>Scotstoun (previously lived in Govan)</td>
<td>4 x (2013)</td>
<td>Referred by case worker, FBs: Baptist Church, Mosspark, TT, Unity in the Community, Govan, non-TT</td>
</tr>
<tr>
<td>R16 (Stephen)</td>
<td>Yoker</td>
<td>2x (3 vouchers) 2013</td>
<td>Care manager referred (Loretto Care), FB: Elim Church FB, Anniesland, non-TT</td>
</tr>
<tr>
<td>R17 (Maggie)</td>
<td>Bridgeton</td>
<td>3x 2015</td>
<td>Referred by Social Security, FB: St Francis Church, Bridgeton TT</td>
</tr>
<tr>
<td>R18 (Sally)</td>
<td>Charles Street</td>
<td>2015/16</td>
<td>No referral, FB: St Rollox Church, Sighthill (non-TT)</td>
</tr>
<tr>
<td>R19 (Bill)</td>
<td>Charles Street</td>
<td>2x 2017 St Rollox (vague on dates and whereabouts)</td>
<td>No official referral, FB: White chapel near Sighthill (unable to verify)</td>
</tr>
<tr>
<td>R20 (Stuart)</td>
<td>Govan</td>
<td>2x 2016</td>
<td>Referral from Money Matters, FB: Parish Church, Ibrox, TT</td>
</tr>
<tr>
<td>Reference</td>
<td>Location</td>
<td>Frequency</td>
<td>Description</td>
</tr>
<tr>
<td>-----------</td>
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<td>-------------</td>
</tr>
<tr>
<td>R21 (Kate)</td>
<td>St Andrews Crescent</td>
<td>7x. 2015. 3 FBs</td>
<td>Referral by Money Matters. FBs: “Wee Asian foodbank”, Pollokshields, non-TT. Went about 3/4 times (no referral) Butterbiggins FB, Govanhill, TT Hillington Park Church, Cardonald, TT (2)</td>
</tr>
<tr>
<td>R22 (Fay &amp; Edwin)</td>
<td>Shettleston</td>
<td>3 x 2015</td>
<td>Referred by job centre FB: Parish Church, Parkhead TT</td>
</tr>
</tbody>
</table>
Table A5. Foodbank users whose lives had improved financially and in other ways.

<table>
<thead>
<tr>
<th>Participant (foodbank frequency)</th>
<th>Previous/ongoing issues</th>
<th>Financial change</th>
<th>Recent circumstances/change</th>
</tr>
</thead>
<tbody>
<tr>
<td>R5 Stacey (Every week/year)</td>
<td>Series of health and social problems, depression, anxiety</td>
<td>More money brought in to household [benefits reinstated and daughter’s partner working]</td>
<td>Involvement with church</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Money from family business</td>
<td>Family obtained small business</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Successful counselling</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Feeling more optimistic</td>
</tr>
<tr>
<td>R12 Jill (6)</td>
<td>Partner lost job; her work hours cut back so family living on 20 hours minimum wage. Lot of stress</td>
<td>Both now working (she on maternity leave)</td>
<td>Got engaged, partner has a job. New baby</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Plans to study at University</td>
</tr>
<tr>
<td>R14 Alan (2/3)</td>
<td>Few issues</td>
<td>In full-time work</td>
<td>Recently got full-time job as care worker</td>
</tr>
<tr>
<td>R15 Zina (4)</td>
<td>Relationship breakup, single parent. Multiple health problems (lupus), mobility problems</td>
<td>ESA and other benefits</td>
<td>Still dealing with wide-ranging health and mobility problems</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Very engaged in voluntary work. Plans to study at university</td>
</tr>
<tr>
<td>R20 Stuart (2)</td>
<td>Asthma, panic attacks – says not able to work due to health problems</td>
<td>Improvement in managing money and budgeting</td>
<td>Doing literacy course</td>
</tr>
<tr>
<td></td>
<td>Experience of voluntary work</td>
<td></td>
<td>Wants to get back into voluntary work but lacks skills / develop skills e.g. cash handling</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Feels more optimistic</td>
</tr>
</tbody>
</table>
Table A6. Foodbank users whose lives had improved financially but not otherwise.

<table>
<thead>
<tr>
<th>Participant (foodbank frequency)</th>
<th>Previous/ongoing issues</th>
<th>Financial change</th>
<th>Recent circumstances/change</th>
</tr>
</thead>
<tbody>
<tr>
<td>R1 Aisha (2)</td>
<td>Health problems</td>
<td>On different benefits due to son’s illness (carer status) and her own illness – feeling better off</td>
<td>Cancer diagnosis Family bereavement More stress</td>
</tr>
<tr>
<td></td>
<td>Not able to work as son’s carer due to his illness</td>
<td></td>
<td></td>
</tr>
<tr>
<td>R3 Debbie (2)</td>
<td>Health issues, anxiety, worry, sleep problems Low paid work</td>
<td>Husband’s benefits reinstated; more hours at work so eligible for Tax Credits</td>
<td>More hours at work No change in stress, anxiety and sleep problems</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>R4 John (2)</td>
<td>Redundancy then illness (initially unable to claim benefits because partner working) Poor health; unable to work</td>
<td>Benefits reinstated</td>
<td>Still undergoing assessment for fitness to work – stressful</td>
</tr>
<tr>
<td></td>
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<td></td>
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</tr>
<tr>
<td>R6 Bobby (Every week to month)</td>
<td>Difficulty managing money on state pension – diabetic, epilepsy, smoker</td>
<td>Improved because getting food from foodbank every week so no need to buy food from pension</td>
<td>No change</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>R8 Sue (4)</td>
<td>Marriage breakup Lost job due to work-related injury Physical and mental health issues, alcohol problems</td>
<td>Backdated payment (£3000) which helped her buy a car. Benefits reinstated ESA</td>
<td>Anxiety and difficulty coping. Lacks structure in daily life. Stress of benefit re-assessment</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>R9 Ellen (3)</td>
<td>Homelessness issues, ex-heroin user, multiple health problems. Hoping to get own home</td>
<td>Benefits reinstated</td>
<td>Waiting in transitional housing to get own tenancy. Health problems still very bad, poor mental health</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>R10 David</td>
<td>Homelessness,</td>
<td>Benefits reinstated</td>
<td>Got a job, lost it, still drinking. Hoping to go</td>
</tr>
<tr>
<td>Case</td>
<td>Details</td>
<td>Status</td>
<td>Notes</td>
</tr>
<tr>
<td>------</td>
<td>---------</td>
<td>--------</td>
<td>-------</td>
</tr>
</tbody>
</table>
| (3)  | Alcoholism  
Convictions  
Done voluntary work previously | back into recovery.  
Would like to volunteer but not able to at moment | |
| R13 Alex | Recovering heroin addict, multiple health issues, mental health problems | Benefits reinstated | No change |
| (6)  |  |  |  |
| R16 Stephen | Homelessness, addiction issues, mental and physical health | Benefits reinstated | Little change |
| (2)  |  |  |  |
| R18 Sally | Multiple health and addiction issues | Benefits reinstated | Some deterioration in health; methadone and alcohol issues |
|  |  |  |  |
| R21 Kate | Disability and mobility issues.  
Previous homelessness.  
Family attacked and had to flee for safety | Improvement – PIP reinstated and on JSA but hoping to get back onto ESA (appeal) | Fed up having to look for work (diary, CV, meetings at job centre) when has so many problems and few skills |
| (7)  |  |  |  |
| R22 Fay & Edwin | Some health problems, particularly mental health (Edwin)  
Experienced racism in their neighbourhood  
Unsuccessful in gaining employment | Now on JSA  
Still struggling financially at times | Still looking for jobs but not successful  
Mental problems persist for Edwin – post-traumatic stress and sleeping problems  
Neighbourhood problems and racism persist |
| (3)  |  |  |  |
Table A7. Foodbank users whose financial and other circumstances remained unchanged or deteriorated.

<table>
<thead>
<tr>
<th>Participant (foodbank frequency)</th>
<th>Previous/ongoing issues</th>
<th>Financial change</th>
<th>Recent circumstances/change</th>
</tr>
</thead>
<tbody>
<tr>
<td>R2 Susan (3)</td>
<td>Health problems persist, depression, self-harm, bereavements, family problems</td>
<td>Says still struggling to pay bills etc</td>
<td>Problems mount, cannot see a way out</td>
</tr>
<tr>
<td>R7 Amanda (1)</td>
<td>Mental health issues and debt, coping with bereavement (mother)</td>
<td>Still struggling to cope and manage debt (funeral costs)</td>
<td>Expecting child Still depressed and coping with death of mother</td>
</tr>
<tr>
<td>R11 Matthew (10)</td>
<td>Anxiety, personal problems Difficulty managing money</td>
<td>Still finding it difficult to manage money on Universal Credit Still using foodbank</td>
<td>Hoping to overcome anxiety and personal problems but needs more support</td>
</tr>
<tr>
<td>R17 Maggie (3)</td>
<td>Health problems and pain Bereavement Serious assault</td>
<td>Still dealing with debt and arrears (electricity)</td>
<td>Desperately wants a move to another area Health problems and depression persist</td>
</tr>
<tr>
<td>R19 Bill (2)</td>
<td>Mental and physical health problems</td>
<td>Decline – says he has nothing</td>
<td>Deterioration in health/life Disorganisation Bereavement of partner Recent psychiatric episode – hospital</td>
</tr>
</tbody>
</table>