

What's wrong with us? A patchwork ethnography of the lived experiences of the clients of a surplus food project in London

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With 7 million people in the UK going hungry and 2 million tonnes of food wasted annually, there has been a call to arms for surplus food projects to feed people utilising these resources. Surplus food projects have been identified as a potential community response to the challenges facing the UK in the current economic climate⁽¹⁾.

The aim of this study was to deploy an evolving method of qualitative research called patchwork ethnography⁽²⁾. Specifically, to immerse the researcher in the participant community to gain a deeper understanding of the lived experiences of those involved in providing and receiving food surplus distribution services in a geographic area of London statistically mapped as affluent by the English Indices of Multiple Deprivation (IMD)⁽³⁾.

A food surplus project in South-West London was identified with the researcher training as a volunteer, getting to know the project and participants prior to data collection. During eighteen sessions, each lasting three to four hours, over a six-month period of data collection, participants were observed, through discussion, observations, and natural conversation recorded by audio, or writing on the environment, interactions and experiences of both visitors and volunteers. On average there were seventy visitors and twelve volunteers at each session. Participants visited the project from an approximate five-mile radius of the South West London location. Data gathered was analysed using a fusion of template analysis⁽⁵⁾ to provide a priori theming to reify the lived experience of using a surplus food project. Thematic analysis (6) was deployed for further analytical depth to explore nuanced and diverse pathways to food security for families who traditionally do not fit the typical definition of socioeconomic deprivation.

This study identified several categories of lived experiences of food poverty. These included experiences from queuing for food, to the collection and availability of food plus how the project impacts and interacts with social and sustainability outcomes. Moreover, a priori theming highlighted key elements of this project, attributed to its success, are not present in many traditional food banks. Such elements included non-compulsory referral, abundant fresh food plus community space to socialise. Additionally, there was strong indication of lack of empowerment or belief of visitors accessing the project, in their right, or ability to improve their circumstances. The thematic outputs suggest that interaction between end users and health agencies is instrumental in the navigation of food poverty in nested deprivations.

These findings highlight that the role and access to food provision services in socioeconomically deprived areas need to be dignity-centric. We advocate the removal of traditional gatekeeping by referral and developing the process of projects to enable access for any person requiring support regardless of benefit, socioeconomic, or geographic status.

References

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