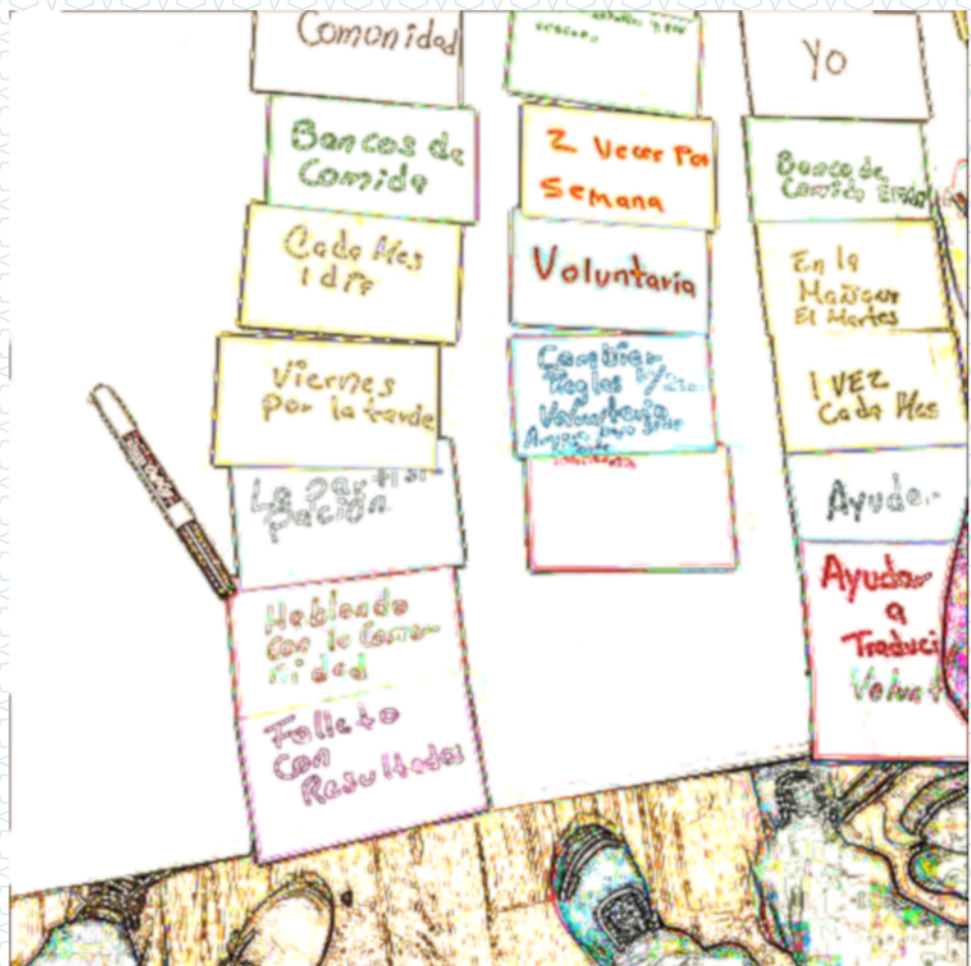


# FOOD ACCESS IN BOULDER, CO

Boulder Food Rescue

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# About the Authors

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## What Is the Purpose of This Report?

This report aims to offer the general public, policy influencers, foundations and funders, government agencies, nonprofit service providers, and anyone else interested in food access, a deeper look at how someone experiences food insecurity within the Boulder food access landscape. Although focused in the city of Boulder, many of these concepts extend beyond the city limits.

## Who Is Boulder Food Rescue (BFR)?

BFR works towards a more just and less wasteful food system.

We facilitate food donations directly from donors to communities. Food donors set aside food that courier volunteers deliver to a Boulder community where people have a difficult time accessing food, including food pantries, shelters, community meals, and affordable housing properties.

## Who Can I Contact About This Report?

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## What Are No Cost Grocery Programs (NCGPs)?

NCGPs are community-led and operated food distribution points, hosted in places convenient to the people who use them. In Boulder, these are cohosted by Boulder Food Rescue. While the community operates the program, BFR coordinates delivery and supports the community in distribution of the food and operation of the program.

This work acknowledges that -

1

Resource consolidation, specifically, wealth, land, and power consolidation has shaped and continues to shape the food access landscape.

2

This resource consolidation is intentional, and operates according to race, class, geography, gender, ability, and other characteristics of identity and difference.

3

Communities, especially those on the losing end of that consolidation, have a long history of organizing, sharing, and leading towards their own health and wellbeing.

All food access programs, including this one, have barriers. In food access, barriers are what makes getting food more difficult, challenging, or time and labor intensive. No Cost Grocery Programs are created with the goal of barrier reduction.

No Cost Grocery Programs are run out of easy-to-access locations like backyards and community centers to reduce barriers associated with operating hours, transportation, and transporting groceries. Programs are run by community members and other program users to reduce barriers associated with shame and stigma. BFR coordinates with community members in order to only deliver food items program users want to receive in quantities they can use. This reduces the burden of unwanted food that can often exist in food rescue and charitable food services. BFR trains courier volunteers to carry out quality control sorting procedures before delivering food to communities to deliver food in desirable quality and reduce the burden around receiving poor quality food, another barrier common in food rescue and charitable food services.

# Abstract

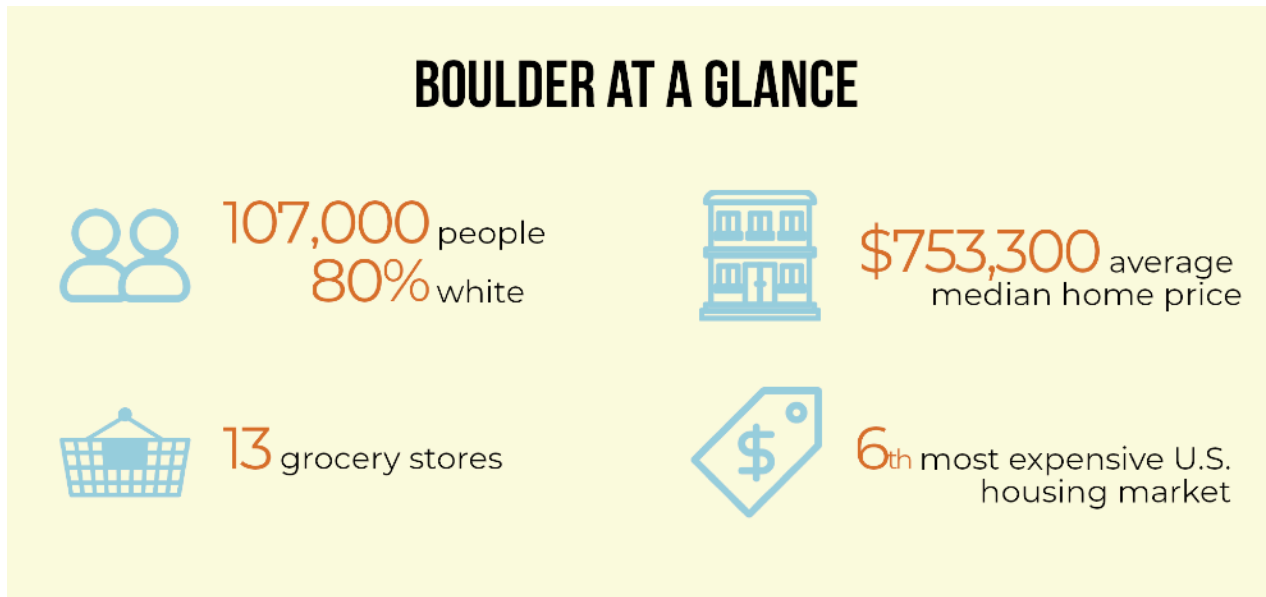
A great deal of scholarship documents the prevalence and impacts of food insecurity, as well as barriers to food access. This report serves to synthesize the experience of food insecurity documented in [Boulder, CO](#) for the general public, service providers, policy influencers, foundations and funders, nonprofits, government services, and other researchers.

Resources exist to mitigate some of the worst symptoms of food insecurity. However, they do little to address the pervasive inequities associated with race, class, gender, and our economic system. These are the primary drivers of food insecurity. To use food resources considered “benefits” or “charitable,” people have to circumvent many [barriers](#) as well as undergo considerable stress, trauma, and [invisible and emotional labor](#). Even for people who are able to access food through charitable or governmental food programs, the negative impacts on their [physical](#) and [emotional](#) health and wellbeing persist. To mitigate this system’s barriers and shortcomings, people employ incredible amounts of work, including [ingenuity, resourcefulness, and community support](#) to feed themselves and their families.

People want a food system that more equitably meets the needs of people. They desire increased power, choice, control, and autonomy in their own food systems. Community-led food systems, reduced food access barriers, and advocacy that addresses the root causes of food insecurity are broad recommendations to address food insecurity. A full list of [recommendations](#) is available in this report.

# Food Landscape

Boulder is home to over 107,000 people. It has 13 fully stocked grocery store and several other smaller food stores, some of which are culturally specific. Hundreds of restaurants and a thriving local economy center Boulder as a city well-known for its abundance of high-quality local food, raising the important question, food access for whom?<sup>1</sup>



Known for its environmentally-friendly policies, bike lanes, and the iconic Flatirons, Boulder is known as a desirable place to live. However, with increased demand, the city's housing market has inflated and increased the cost of living, disproportionately displacing people of color<sup>2</sup> who make up roughly 20% of the population<sup>3</sup>, people living with disabilities, and the city's low-income population. The poverty rate is considerable and the lack of affordable housing is severe.<sup>4</sup> In 2018, only 3 single family homes were sold under \$360,000 in the entire city of Boulder, all as part of an affordable home ownership program provided by the municipality.<sup>5</sup> A 2017 survey

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<sup>1</sup> Colorado Tourism Office (2019). *9 Ways to Savor "America's Foodiest Town."* <https://www.colorado.com/articles/9-ways-savor-americas-foodiest-town>

<sup>2</sup> The Community Foundation of Boulder County. "Household Income Split Along Race." Boulder County TRENDS Report, 2019 <https://www.commfound.org/trends-2019/economy-indicators>

<sup>3</sup> U.S. Census Bureau (2018). American Community Survey 1-year Estimates. Retrieved from Census Reporter Profile Boulder, CO <http://censusreporter.org/profiles/16000US0807850-boulder-co>

<sup>4</sup> The Community Foundation of Boulder County. "Boulder County Families Living in Poverty." Boulder County TRENDS Report, 2019. <https://www.commfound.org/trends-2019/economy-indicators>

<sup>5</sup> The Community Foundation of Boulder County. "The End of Affordable Housing." Boulder County TRENDS Report, 2019. <https://www.commfound.org/trends-2019/economy-indicators>

found Boulder to be the 6th most expensive housing market in the country.<sup>6</sup>, with the average median value of a home being \$753,300.<sup>7</sup>

Though food is a basic need and fundamental right, when the cost of living is higher than an individual's or family's income, certain basic needs are sacrificed. Families often prioritize paying for housing, since they have to cover all of their rent to remain in shelter. Families balance a number of costs and bills for basic needs, including food. While food costs can be reduced in the short-term by cutting corners on quality, quantity, or nutrition, people face long-term consequences to their health and wellbeing when they are repeatedly forced to forego or make concessions with nourishing food. People also sacrifice other basic needs in order to obtain food. All of these scenarios describe a state of food insecurity. The physical, emotional, and mental health impacts of food insecurity in Boulder are detailed in this work.

“Food insecurity” is widely defined as not having consistent, reliable access to healthy, nourishing, and culturally appropriate food. Low income accompanied with high cost of living makes it extremely difficult for many Boulder residents to have consistent access to healthy, nourishing and culturally appropriate foods. Because of the gap between federal poverty guidelines and a living wage<sup>8</sup>, especially where the cost of living is high, more people are likely experiencing food insecurity in Boulder (and nationally)<sup>9</sup> than widely accepted measures of food insecurity capture.

It is impossible to separate food insecurity from economic insecurity. Before COVID-19, only 11% of Boulder County residents were considered food insecure by accepted measures, but at least 27% of adults in Boulder County were not making enough money to cover their basic needs.<sup>10</sup> Our economic system, in which basic needs are commodified and privatized (health, education, food, housing), is failing the majority of Americans. For example, more than half of Americans have avoided necessary medical care because they can't afford it.<sup>11</sup>

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<sup>6</sup>Martin, E. (2017, July 27). Retrieved from The 15 Most Expensive Places To Buy a Home in the Us - <https://www.cnbc.com/2017/07/27/most-expensive-places-to-buy-a-home-in-the-us.html>

<sup>7</sup> S. Census Bureau (2018). *American Community Survey 1-year estimates*. Retrieved from *Census Reporter Profile page for Boulder, CO* <http://censusreporter.org/profiles/16000US0807850-boulder-co/>

<sup>8</sup> Economic Policy Institute, *State of Working America Data Library*, “Poverty Level Wages,” 2019. <https://www.epi.org/data/#?subject=povwage>

<sup>9</sup> Adamczyk, A. (2019, May 26) *Full-time minimum wage workers cannot afford a 2-bedroom rental anywhere in the US*. CNBC Make It. <https://www.cnbc.com/2019/06/26/minimum-wage-workers-cannot-afford-2-bedroom-rental-anywhere-in-the-us.html>

<sup>10</sup>The Community Foundation of Boulder County. “Cost of Being Self Sufficient in Boulder County.” Boulder County TRENDS Report, 2019. Original data from Colorado Center for Law and Policy. <https://www.commfound.org/trends-2019/economy-indicators>

<sup>11</sup> Lagasse, J. (2019, Nov 25) *More than half of Americans have avoided medical care due to cost*. Healthcare Finance News. <https://www.healthcarefinancenews.com/news/more-half-americans-have-avoided-medical-care-due-cost>



At the initial drafting of this report, 1 in 9 people in Boulder were considered food insecure, however these numbers have been drastically impacted by COVID-19<sup>12</sup>. Nationally, COVID-19 has more dramatically and negatively impacted communities of color, disabled communities, seniors, and low income people.<sup>13</sup> In the COVID-19-era economy of summer 2020, it's estimated that 1 in 5 Americans is experiencing food insecurity<sup>14</sup> and as many as 1 in 3 Coloradans is struggling to access food in Colorado.<sup>15</sup> According to a Marketplace-Edison Research Poll, forty-four percent of Americans fear they won't be able to afford food, with those concerns concentrated according to race/ethnicity. "Sixty-three percent of Hispanics and 47% of African Americans are afraid they won't be able to afford groceries, compared to 39% of whites."<sup>16</sup> Similarly, 61% of Latinx households, 44% of Black households, and 38% of white households have experienced at least one job loss due to COVID-19.<sup>17</sup> While we do not have specific figures on COVID-19's impact on food insecurity in Boulder, based on observational data and an increased demand of no-cost food resources, we see similar trends of growing food insecurity in Boulder.

While Boulder has a social service support network of city, county, and not-for-profit programs that assist with, and advocate for, more affordable housing and food security, several basic needs are still unmet. Federal government SNAP and WIC programs are implemented in Boulder County, allowing individuals who qualify to receive benefits for food assistance. The Boulder County Farmers Market not only accepts SNAP, but participates in a Colorado state-wide "Double Up Food Bucks" program to double the amount of SNAP an individual can spend at the market. However, participants in our research indicated that these benefits consistently ran out before the end of the month. Many people live above the qualifying income limit based on the federal poverty line, but make significantly less than a living wage for the city. Many people do not qualify for SNAP because of their immigration status, and while their children may be eligible,

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<sup>12</sup> Feeding America. (2017). *Food Insecurity in Boulder County*. Map the Meal Gap. <https://map.feedingamerica.org/county/2017/overall/colorado/county/boulder>

<sup>13</sup> Center for Disease Control and Prevention. (2020, June 4). *COVID-19 in Racial and Ethnic Minority Groups*. Coronavirus Disease 2019 (COVID-19). <https://www.cdc.gov/coronavirus/2019-ncov/need-extra-precautions/racial-ethnic-minorities.html>

<sup>14</sup> Bauer, L. (2020, May 6). *The COVID-19 crisis has already left too many children hungry in America*. Brookings. <https://www.brookings.edu/blog/up-front/2020/05/06/the-covid-19-crisis-has-already-left-too-many-children-hungry-in-america/>

<sup>15</sup> Hindi, S. (2020, August 8). *1 in 3 are struggling to eat in Colorado: "It would be impossible without the food banks"*. Denver Post. <https://www.denverpost.com/2020/08/08/food-banks-help-coronavirus-covid-colorado/>

<sup>16</sup> Fields, S. (2020, May 22). *"Record Levels" of Food Insecurity in the U.S. because of COVID-19*. Marketplace. <https://www.marketplace.org/2020/05/22/record-levels-of-food-insecurity-in-the-u-s-because-of-covid-19/>

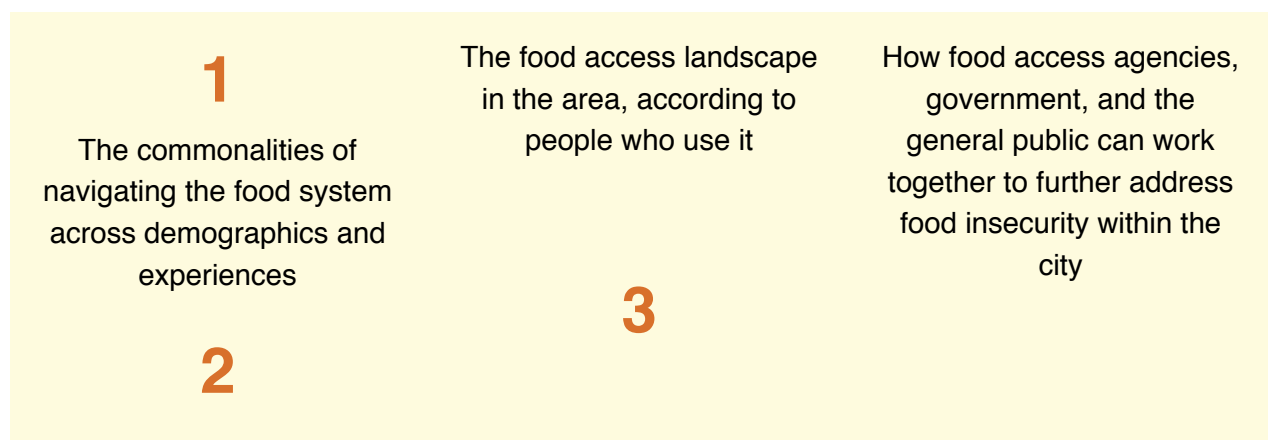
<sup>17</sup> Pew Research Center (2020, April 21). *About Half of Lower-Income Americans Report Household Job or Wage Loss Due to COVID-19*. Pew Research Center Social & Demographic Trends. [https://www.pewsocialtrends.org/2020/04/21/about-half-of-lower-income-americans-report-household-job-or-wage-loss-due-to-covid-19/?utm\\_content=bufferc3962&utm\\_medium=social&utm\\_source=twitter.com&utm\\_campaign=buffer](https://www.pewsocialtrends.org/2020/04/21/about-half-of-lower-income-americans-report-household-job-or-wage-loss-due-to-covid-19/?utm_content=bufferc3962&utm_medium=social&utm_source=twitter.com&utm_campaign=buffer)

the fear of deportation for formally enrolling in a federal food assistance system prevents them from applying for benefits.

Food assistance programs help to close these gaps by providing emergency food relief. Multiple participants repeatedly referred to these programs as “life saving.” There are several such programs within Boulder. Community Food Share is Boulder county’s food bank, which is located in adjacent Louisville but redistributes food to Boulder, both by way of local food pantries and access to CFS’ onsite food pantry. There are several local food pantries, including Emergency Family Assistance Association (EFAA) and of Hope. Meal programs like the one associated with Bridge House also support those living with unstable or no housing. This report removes the names of agencies. Additionally, we use the term “food pantry” to refer to any program in which research participants access groceries directly from a centralized pantry-like setting. This is to allow some degree of public anonymity for the agencies themselves.

Boulder Food Rescue (BFR), the agency that created this report, works to redistribute healthy food, primarily from grocery stores, farmers markets, and small farms to many direct service programs (food pantries, shelters, meal programs, mental health programs) and also co-hosts 30 No Cost Grocery Programs located in affordable housing sites, preschools and daycares across the city. These grocery programs bypass traditional food agencies by taking food directly to where people are already going to be. This program engages voice, experience, and leadership of program participants. This engagement is intrinsic in the design: these programs simply wouldn’t work without the participants leading them. Participants do the work of receiving and distributing the food amongst their neighbors. They are in charge of the program itself - how food gets redistributed, when it arrives, and where the distribution happens. BFR imposes no requirements or reporting to use the programs and is focused on distributing fresh produce, something often in short supply through the charitable food system of food banks and food pantries.

With all of these resources in place, Boulder Food Rescue sought to better understand:



# About the Project

In May 2015, Boulder Food Rescue partnered with researchers from the community and the University of Colorado Boulder (Chris Schaeffbauer, PhD, Joel Martinez, and Ingrid Castro-Campos), to explore the issue of food insecurity and access in Boulder. Through a community-based participatory research process, the team developed a research agenda to understand the experiences of people facing food insecurity. The project aimed to identify ways to take action to improve food access in our community and engage people who experience food insecurity in realizing their own vision of food security. All research activities were conducted in English and Spanish.

## Multimedia-Elicitation Interview (MEI) Study



For the first research activity, which took place between January 2016 and June 2016, the team conducted [multimedia elicitation interviews \(MEIs\)](#)<sup>18</sup> with 26 people who self-identified as experiencing food insecurity or “having a hard time getting food.” Most interviewees utilized one or more food assistance programs. The research participants included eight people who identified as Latinx, Chicanx, or Hispanic. Four participants identified as homeless or having non-conforming housing (1 additional participant had previously experienced homelessness). Seven participants identified as older adults (age 65+ or living in senior housing). Eleven participants lived with and provided for families (most included children). Three participants identified as men and twenty-three identified as women. Nineteen interviews were conducted in English and seven were conducted in Spanish.

<sup>18</sup>Khan DU, Ananthanarayan S, Siek KA. Exploring everyday health routines of a low socioeconomic population through multimedia elicitations. J Participat Med. 2011 Aug 29; 3:e39.

Research participants were asked to record their experiences accessing food using camera phones. They took photos and recorded videos and audio journals for two weeks. These artifacts were collected according to four specific prompts: 1) record moments when you are in the process of getting food, 2) record things that make it difficult for you to access food, 3) record tools you use to help you get food (for example bikes, computers, money), and 4) record positive experiences you have with food. Afterwards, researchers met with each participant for an individual, semi-structured interview to discuss the media recordings they created. The goal was not to gather information on individual food services or programs, but rather to better understand the experiences around being food insecure and accessing resources in Boulder.



## Participatory Data Analysis Workshops (PDAWs)

From the MEI interview transcriptions, segments were selected to include in a group-based participatory data analysis workshop. Segments were identified according to natural conversation breaks and selected at random in order to reduce bias and provide a representative sample of content from across the interviews. People who self-identified as experiencing food insecurity, many of whom also participated in the MEI study, worked together to group related sections from the interview transcripts into common themes. Participants and researchers then worked to consolidate and label these themes. Many of these themes were barriers, but some were neutral or positive themes like “community and socialization,” “participation,” or “tools.” See [Participatory Data Analysis Workshop Themes](#) for a full list of themes participants identified and [Barriers](#) for an analysis of barriers participants identified.

## Participatory Design Workshops

Following the participatory data analysis workshops, the research team focused on one primary barrier to explore deeper through design workshops. the lack of opportunity to participate, or in other words, to have a hand and voice in improving food access. The design workshops included people who self-identified as food insecure, many of whom participated at other phases of the research project. Participants took part in a series of activities to articulate their ideal visions of what it would look like to participate in improving food access. The workshops were organized around three parts: 1) critiquing the existing system, 2) envisioning an ideal future, and 3) implementing (how we would move towards realizing that ideal future).<sup>19</sup>

<sup>19</sup> Jungk, R., & Müllert, N. (1987). Future Workshops: How to create desirable futures. London: Institute for Social Inventions



The **critiquing phase** was focused around a group brainstorm of experiences people have had with participation and challenges they've encountered.

The **envisioning phase** involved a structured scenario development activity inspired by the instant card technique.<sup>20</sup> In this activity, there were notecards labeled with the name of each food access agency and there were notecards with the different actions people could use in participating such as "engaging in one-on-one conversations" and "writing down their thoughts." There were also blank notecards for research participants to add their own actions, places, goals, etc. Research participants used these notecards to construct scenarios describing their ideal participation experience. The scenarios told a story of who would be involved in the experience, what actions they would take, where the interactions would take place, what tools they would use to complete their actions, and what the goal of the experience would be.

Lastly, in the **implementing phase**, we worked together to prioritize as participants ranked the cards within each category. For example, they ranked all of the different potential actors based on priority for working with them to improve participation opportunities.

The workshops were structured around using notecards to communicate and prioritize ideas for preferred forms of participation. Each note card represented a different person, place, goal, action, or thing related to food access in Boulder. The team then wrote and published a [Participation Framework](#). The Participation Framework explains how organizations can become more participatory in their programs, infrastructure and governance.

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<sup>20</sup> [PDC '08: Proceedings of the Tenth Anniversary Conference on Participatory Design 2008](#). October 2008. pp 162–165

## Analysis

Boulder Food Rescue volunteers, researchers, and staff sought to understand the key themes from the MEI by conducting qualitative data analysis. The analysis revealed that themes in food access, particularly barriers, exist on their own, relate to one another, compound on and amplify one another, and affect someone's experience accessing food as a whole. The team sought to understand the diversity of experiences of food insecurity, the challenges people encounter while accessing food, the strategies people use to increase their access to food, the impact that short-term and persistent food insecurity has on individuals, and to keep people's stories relatively intact. We leveraged the themes identified during the Participatory Data Analysis Workshops as a starting point and basis for our understanding. From there, we built upon and unpacked those themes, aiming to add depth and nuance through the analysis described here.

# Barriers

Barriers are the things that get in the way of food access. “Food access” refers to the complicated process that includes acquiring, transporting, preparing, and eating food. At every step of this process, people encounter barriers.

For people who experience few significant barriers to food access, getting food becomes just another part of the background of life. They can forget how complicated this process actually is. People who experience food insecurity, on the other hand, live and feel how complicated getting food is every day. The barriers to getting food are also complicated, especially for their stacking, amplifying, and synergistic effects. We found that barriers don't exist independently; people often experience multiple barriers. Barriers interact with one other to amplify the negative impact on people's ability to access food, creating a persistent challenge that becomes even greater than the sum of its component parts.

For people who struggle to get food, barriers also become part of the daily routine of getting food. Food access barriers are frustrating, demoralizing, and painful. They are the conditions and component parts of food apartheid<sup>21</sup>, a term that signifies a system so marked by inequity that food insecurity and health outcomes can typically be predicted according to class and race. Inequities in the food landscape lead to a myriad of painful, yet everyday, barriers to food access, part of the everyday banality, indignity, and acrobatics of getting food when food is difficult to get.

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<sup>21</sup> Brones, A. (2018, May 7). Karen Washington: It's Not a Food Desert, It's Food Apartheid. *Guernica*. <https://www.guernicamag.com/karen-washington-its-not-a-food-desert-its-food-apartheid/>

## What Do Barriers Look Like?

### A Hypothetical Situation<sup>22</sup>

Suppose you need to get food for your family, but getting that food is difficult financially. Usually, you can make it work by supplementing your grocery budget with SNAP benefits and going to the food pantry twice per month. However, the benefits aren't much and neither is your income. This month has been tough. Your kid broke his arm this summer and you absolutely need to start making payments on those medical bills this month. You also had a car repair you didn't expect this week, and between rent, those unexpected expenses, and your other bills, there's not much left for anything else.

You know that one way you can supplement your budget is to try to go to another pantry in town, but you've avoided going until now because it's further away than the pantry you normally use and you work when they're open. You'll have to ask to leave work early to go, which feels like a lot to ask right now. Your boss seemed kind of upset when you had to take off when your youngest kid was sick last week, but you decide to just ask if you can leave early for an appointment. It's kind of an emergency. He says it's fine but seems kind of annoyed, which stresses you out.

You get to the food pantry to find out that they only have intake hours in the morning. You suppose they can tell that you're in a rough spot, because they let you take food just that one time without completing the intake process. You get some nonperishable stuff - pasta, pasta sauce, cans of soup. The produce looks like it definitely needs to be eaten today. What can you do with squash and eggplant that your kids will actually eat?

A volunteer walks you through the selections and tells you what food to take and what is healthy. That feels bad for you because you know what is healthy, you just can't afford it. When you leave, the lady at the receiving desk reminds you about their intake hours and she's kind of rude about it. You really hope you don't have to come back here.

You still have a little time before you have to pick up your kids, so you decide to see if there's anywhere else you can try. You search for food pantries on your phone, and discover a new one that's on your way home. You figure you might as well try it out. On the way, your car starts making that noise you just paid to fix, which really stresses you out. When you get there, you realize it's not even a food pantry, just the offices for some other food program you can't use.

You go to pick up your kids from after school and start to make dinner. You really want them to eat a balanced diet, but you're not sure if they'll eat the vegetables you got at the food pantry. At

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<sup>22</sup> This is a hypothetical situation, a composite based on what we heard from people across 26 interviews, and personal experiences across years of collaboration with communities running their own food distribution systems.



least they'll eat the pasta you got today and garlic bread you have in the freezer. Your kids help you make the pasta and set the table. It's important to you that you all eat together.

It's been a rough day getting food and trying to make it work. There are some things that stick with you emotionally. You're pretty sure your boss is running out of patience with you. That lady at the food pantry was condescending. You really can't have another unexpected expense. It would be a huge problem if you have to take your car back to the shop or if one of your kids got sick again. You don't know what you're going to do to make things better. You got some food for today, some food for tomorrow, even some food for your pantry, but in the long term, you're in the same position you were earlier today. You're just so tired of doing this.

## Compounding Barriers

The narrative above reflects how barriers compound on one another. Accessing food becomes more frustrating and exhausting with every barrier encountered, but barriers themselves create and reinforce barriers. For example, having a job with low income and little security leads to having to access food in cumbersome, inconvenient, and time-consuming ways that require you to take time away from work which further strains work security and reduces pay. Similarly, because food insecurity is tied to poor health in children<sup>23</sup>, the sick day that can be a huge problem for your income and job security increases as a possibility.

## Identifying the Barriers

The barriers in this report were identified by participants during *Phase 2: Participatory Data Analysis Workshops*. Researchers transcribed the twenty-six interviews from *Phase 1: Multimedia Elicited Interviews*. Next, dozens of quotes from interviews related to food access were broken up according to breaks in conversation and randomly selected. As part of the workshop, participants were presented with a brief training in high-level data analysis. Their objective was to separate fragments into groups that they considered thematically similar. Fifty-seven participant-identified themes emerged.

Researchers identified ten high-level barriers to food access, synthesized from the participant-identified themes. In the following sections, we discuss each of these barriers in more detail and unpack the way people experience these barriers. Parentheses in the themes below indicate language that researchers added to contextualize participant-named barriers. This is for the benefit of report readers who don't have all context from the interviews and workshops.

The ten high-level barriers are listed below, and detailed in the following sections:

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<sup>23</sup> Cook JT , Frank DA , Levenson SM , Neault NB , Heeren TC , Black MM , et al. Child food insecurity increases risks posed by household food insecurity to young children's health . *J Nutr* . 2006 ; 136 ( 4 ) : 1073 – 6 . [Crossref](#) , [Medline](#) , [Google Scholar](#)



## A. Economic Insecurity

Economic insecurity is the most prominent food access barrier, and is virtually inseparable from food insecurity. There are certainly other barriers to food access, but most of them can be ameliorated with financial resources. For example, limited physical mobility is a significant barrier to food access, but financial resources can reduce this barrier through access to, for example, food delivery services, in-home assistance, as well as tools and specific foods that accommodate an individual's needs.

Participants identified 10 themes for how economic insecurity relates to food insecurity:

### ECONOMIC INSECURITY THEMES

-  **Without income and I can't qualify for food assistance**
-  **The influence of low prices**  
*(Prices influence what participants buy. Participants often make sacrifices in choice or health to purchase less expensive items.)*
-  **The whirl of work and obtaining food - staying "afloat"**  
*(Being poor and receiving charitable food and government benefits is a tremendous amount of work.)*
-  **Not enough budget to buy enough groceries**
-  **Available funds for food**  
*(Not enough.)*
-  **Money**  
*(Not enough.)*
-  **Nutritional bang for the buck**  
*(Participants conduct a cost benefit analysis - What will provide the most nutritional value for the least price?)*
-  **Comparison shopping**  
*(Participants compare prices and select items that are most affordable. Many participants visit multiple grocery stores to get items at their most affordable price.)*
-  **Pricing**  
*(Cost of food dictates decision-making around food.)*
-  **Paying for lunch at work**  
*(Participants struggle to afford lunch purchased at work. Participants who work in food service feel a gratis "shift meal" and the ability to take home food that would otherwise get thrown away should be included as part of compensation, but often is not.)*

Conversely, other barriers to food access are exacerbated by economic insecurity and other conditions of economic insecurity are exacerbated by the nature of getting food when food is difficult to get. For example, if food is difficult to get because a person can't afford it, it is also unlikely that that person enjoys schedule flexibility, often a condition of economic privilege and security. Schedule flexibility would be helpful for a person who uses food pantries, most of which have significantly limited hours compared to a grocery store. Similarly, people who have a difficult time affording the cost of food also face transportation barriers. For example, when a person is struggling to afford food, they will often have to forego vehicle repairs or buying fuel. Some people rely on other options like the bus or bike to transport food, but both of these options take more time or schedule flexibility that people experiencing economic insecurity are less likely to have. These options also require a high degree of physical mobility. One participant in Phase 1 of this study reported getting injured trying to transport food using public transportation with already limited mobility because the bus started moving before they sat down. They knew this form of transportation wasn't ideal for them, but it was the that was financially accessible. The injury they sustained made it more difficult to physically access food, and meant more medical costs, which made it more difficult to access food. More information on transportation and food access is available in [Transportation and Mobility Barriers](#) section.

It is notable that for many people experiencing food insecurity, food is considered a relatively flexible expense that can be reduced in order to put more money towards other basic needs that are more inflexible. In essence, you have to pay all of your rent every month to have housing and you have to pay your entire phone bill to have a phone, but you can buy less food or less expensive food and still eat, albeit not well or regularly. Essentially, research participants routinely make the same choice as millions of Americans who regularly have to choose between buying food and paying for rent or other basic needs.<sup>24</sup> Some people accomplish this by purchasing food that is less expensive, less nutrient rich, and less desirable to them. Some people accomplish this by using charitable food services even though a grocery store is a better fit for their diets, schedules, lives, and physical and mental health. People accomplish this by skipping meals or sacrificing their own food for other members of their family, usually children. People prioritize buying food and forego other necessities, like receiving medical care. People delay paying some bills while they pay others. Many people use some combination of all of these, and still other tactics. Such restrictions have enormous physical and emotional health costs over time.

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<sup>24</sup> Fottrell, Q. (2018, September 23) *40% of Americans Struggle to Pay for at Least One Basic Need Like Food or Rent*. Market Watch. <https://www.marketwatch.com/story/40-of-americans-struggle-to-pay-for-one-basic-need-like-food-housing-or-health-care-2018-08-28>



“There are days that we don't really have anything in the house and need to shop and you know, we don't have money for it. So I will just leave the house without eating anything. And I can't do that. I will feed my daughter because she eats whatever she wants to. Whereas for me, I need fruit or something and if we don't have that, we don't have enough money or we just haven't bought it yet because we have to wait until payday or something, I just don't eat. And I can't do that, it is bad for my stomach.”

“[It was] hard [not having food]. Stressful. Really stressful. Yeah. There is no storage in my life ... I mean, I was in my apartment for a few days with absolutely no food. So, um, there's no back-up, there's never any extra money for back-up. There's not even enough money for normal days.”



## B. Emotional Barriers

Emotional barriers are essentially what feels bad about using charitable food and government benefit programs. When we think of emotional barriers, it is useful to consider 1) shame -- internalized painful feelings associated with guilt or disgrace, and 2) stigma -- externally imposed reproach, usually when a person does not fully embody social expectations, norms, or ideals. Internal shame surrounding food access is largely an internalization of external stigma.

Participants identified the emotional experience of accessing charitable food resources and government food benefits:

### EMOTIONAL EXPERIENCE THEMES

-  **Overcoming the feeling of need - guilt trip<sup>25</sup>**
-  **It's depressing to go to food pantries**
-  **Desperation**  
*(Not having reliable access to food causes feelings of deperation.)*
-  **Social Pressures - demoralized, privilege**  
*(Participants noted feeling demoralized by the experince of having to access charitable food resources. Some participants noted feelings of shame specifically around having to access charitable resources in spite of privileges they hold, like being white or able-bodied.)*
-  **Food pantries response to the situations of some people**  
*(This theme had dual meaning. It encompassed situations in which the agency's policies and practices were inflexible and did not respond to the unique situations of individuals and also situations in which participants felt that social stigma was perpetuated at the agency itself.)*
-  **The perception of food pantries**  
*(There is a negative societal perception of using food pantries.)*

Emotional barriers illuminate how different types of barriers amplify, stack on top of one another, and have a synergistic effect. Food insecurity has a causal relationship to anxiety and

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<sup>25</sup> Broadly, this refers to feelings of guilt associated with using charitable food and overcoming those feelings, at least enough to use the resource. Many participants described a similar emotional coping trajectory that looks something like the following paraphrased summary- "I need this resource. It feels bad to use, so I put those feelings to the side or get over them, because I need the resource. Still, it feels bad to use." People don't want to feel guilt or shame, however they will often bookend a description of their experience with those emotions, while negation of these emotions becomes a coping strategy. This may be a reflection of our society, in which, at least for people who experience poverty or food insecurity, emotions become a privilege, while food is the material, important concern. Full and earnest engagement with emotion is one of many things not afforded to all people in our food and economic systems.

depression, and people who struggle with mental health issues are more likely to experience food insecurity.<sup>26</sup> When getting food is difficult, food access comes at enormous time and emotional expense, making both self-care and self-esteem more challenging. People need nourishing food that is desirable and familiar in order to feel healthy and well in their minds as well as their bodies. As certainly as the mind and body are connected to one another, both mental and physical health are informed and impacted by the food we eat, the process of getting that food, and the emotional experience associated with that process.

“I appreciate the food I get from [the pantry]. And hopefully, my job is good and I won't have to go back. Not because they aren't nice people, but because for me, it is dignity. This sucks, it's not worth that.”

“It just felt really, really bad being at that place and the whole application process and, it's like, it feels very humiliating.”

“It's good for people to have these services, it helps. Honestly, if it wasn't because of it I wouldn't have absolutely anything to eat...nothing at all.”

“And the other thing I'll say is that, I mean...I feel like we have it pretty amazing. I mean I complain, but you know. It's awesome. I've seen some other food pantries and what you get is all that TEFAP (The Emergency Food Assistance Program) and that shitty stuff and we get, we've got a frickin' organic section. You know? So I can't complain.”

“So it's a fight everyday. No matter what it is. They always assume you don't know what you're talking about, you're mentally incapacitated and that's why you're homeless. Well sorry but I'm extremely bright, I've worked all of my life in very difficult technical jobs and there's nothing wrong with my mind. Never has been.”

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<sup>26</sup> Gundersen, Craig and Zillak, James. (November, 2015). *Food Insecurity and Health Outcomes*. Health Affairs. <https://www.healthaffairs.org/doi/10.1377/hlthaff.2015.0645>

“Well I know when I just go to the store and just pay money and buy anything I want – I feel free. I have control. But when I go to the food pantries and some well-intentioned person is escorting me around and looking at everything I choose and directing me, you know, on ... you know things that are there and making comments about what I’m choosing and you know, questioning things and you know, even though the person is trying to be friendly, but it doesn’t feel like freedom. It feels like someone’s trying to control me. Ya know? I like the feeling of having money and having power to just choose and no comments, no judgment, no opinions from anyone. And um, and like, giving up that freedom and being at the mercy of the person who’s assigned to me feels bad. It doesn’t feel like dignity, it feels like there’s a judgment there. I judge myself harshly enough, I don’t need it from someone that’s supposedly trying to help me. It doesn’t feel like help. I mean, it is, physically it is, emotionally it's not.”











“Right. It's like, it's extremely painful, it's like, it's like I failed, like I failed to overcome my life challenges to the point where I can't even provide myself with food. And that's like a really painful thing to admit to myself and other people. And like, I don't like thinking about it all the time because it is so upsetting to me that it, you know, it prevents me from doing the things I can do as far as getting myself out of this situation. You keep beating yourself up and it's just hard to function. I don't like thinking about it. I try not to focus on it every minute of every waking hour. But every time I show up at a [food pantry], I'm forced to think about it.”

Other types of barriers are often experienced as emotional barriers even if they are logistical or practical in nature. As a simple example, the process of filling out a lengthy application, collecting documents, and finding out that you don't qualify or only minimally qualify for a benefit typically inspires feelings of frustration and anxiety. In addition, that frustration and anxiety may deter you from applying for other similar programs in the future. Another example of this is described and expanded upon in the following section.

## C. Food Quality, Quantity, and Variety Limitations

People using charitable food agencies typically experience barriers around the quantity and quality of food available. Specifically, there is not enough of a particular kind of food available or it might only be available in quality that is not desirable. Participants identified that the quantities, quality, and types of food available through the charitable system do not allow them to meet their dietary needs:

### FOOD QUALITY, QUANTITY & VARIETY THEMES

-  **Poor quality**  
*(food)*
-  **Food condition**  
*(is poor or below standards)*
-  **Too large quantities**  
*(of the same product)*
-  **Variety of foods - boom or bust - seasonal**  
*(Sometimes there is quite a lot of good food available. Sometimes there is very little. Sometimes there is a lot of only one particular thing. Availability varies by season.)*
-  **Products and selection and quality**  
*(is limited)*
-  **Can only take what's donated - must be flexible**  
*(and the options are limiting)*
-  **They don't have enough groceries in the [food pantries]**
-  **Lack of sufficient quantities of specific products**

Providing high quality perishable food is an immense practical and logistical challenge for agencies, especially those that use recovered food to provide fresh food to program users. Direct-to-people distribution can mitigate this issue to some degree, but the quality control task is still a considerable one, and still sometimes fails. Agencies don't intend to cause emotional harm, but this set of barriers is also experienced emotionally for program users. Specifically, if nutritious or culturally appropriate foods are unavailable or only available in poor quality, it feels demeaning for program users.

“I’d like somebody to stand in front of the shelves of food and pick out what they would feed their own family. If they wouldn’t feed it to their children, why would they give it to me to eat?”



This acts as an emotional barrier. It reinforces social stigma and internalized shame, and amplifies other barriers. If people internalize the message that they are less deserving of nutritious and high-quality food because they can’t afford it, it negatively impacts self-esteem, self care, and mental health. Because it feels demeaning, it becomes more difficult for people to overcome the myriad of other food access barriers. Participants share that if they have an experience that feels demeaning, they are not only unlikely to use that program again, they are less likely to use other programs in the future.

“I did not go last year. ... I didn't go to any other places. I tried to stretch more our money. So to go and get groceries I needed to take it from my rent's budget. But no, I didn't get help from any other places.”

An even more complex component of this emotional barrier is that people are hesitant to offer critical feedback to a program because they are thankful for what they get, need access to it, and . Many people noted feeling bad about their feelings when they felt food did not meet their needs, as well as not wanting to come across as picky, ungrateful, or unappreciative.

It can be difficult to obtain certain food items in particular quantities, or to find a variety of foods using the charitable food system. This is true for certain food groups. Participants identified that meat, dairy, specialty items such as low sugar or gluten free items, and produce were occasionally or routinely difficult to find, depending on the resource they use. Additionally, people who learned to cook in countries other than the U.S. or who cook meals not typically found in the Standard American Diet find it difficult to find food that is familiar to them.

“They don't have a lot of like - the fresh vegetables are all like, just on the verge of going bad, so if they have fresh vegetables, you have to like, process these vegetables that day. ... So, more produce and vegetables.”

“I've gotten chicken that's off when I get it. Sometimes the beef is off a little bit. And I'll cook it up and I'll eat it, but I don't want to do that too many times and fortunately the meat is still pretty good at these places. Sometimes the produce is really beat up, but other times it's pretty good. It's just kind of up and down. And sometimes there really isn't much.”

It is worth noting that the logistical challenges agencies experience providing people with fresh and culturally appropriate food are rooted in the charitable system and its complicated relationship with our economic system. Most services aren't designed to provide fresh food to people on a large scale, but in some critical ways, our economic system is failing to meet the basic needs of the majority of Americans.<sup>27</sup> Most services aren't designed to feed people long term, but poverty is a systemic condition.<sup>28</sup> Most agencies aren't situated to confront root causes of or systemic issues surrounding food insecurity, but our economic system, racism, and classism are the primary drivers of food insecurity and poor health,<sup>29</sup> and create the conditions in which people do not have access to healthy, fresh, nutritionally-dense, affirming food.

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<sup>27</sup>Lagasse, J. (2019, Nov 25) *More than half of Americans have avoided medical care due to cost*. Healthcare Finance News. <https://www.healthcarefinancenews.com/news/more-half-americans-have-avoided-medical-care-due-cost>

<sup>28</sup> Shirvell, B. (2019, October 29). *Should Emergency Food Be the Long-Term Solution to Hunger?* Hunter College NYC Food Policy Center. <https://www.nycfoodpolicy.org/should-emergency-food-be-the-long-term-solution-to-hunger/>

<sup>29</sup> Drummond, D. (2017, June 14) *The Stress of Systemic Poverty is Killing Us*. Pacific Standard. <https://psmag.com/news/the-stress-of-systemic-poverty-is-killing-us>



## D. Schedule and Time Barriers

Accessing food through the charitable system takes significantly more time than accessing food through a grocery store. Finding the time to procure and prepare food that we want to eat, can afford, and keeps us healthy can be challenging for almost anybody. Most people are busy, and survival under poverty is time-consuming and labor intensive. When getting food is difficult, procuring food is a time-intensive and stressful component of an already busy schedule.

Participants identified how the time, waiting, and restrictive schedules make it difficult for them to access food:

### SCHEDULE & TIME THEMES



#### **Times and waiting**

*(There is a great deal of waiting when using charitable food. Participants noted time spent waiting for transportation services or to physically reach services, time waiting for other service users to finish using a service, time to fill out applications, time to complete intake appointments, time to gather documentation, time to research services.)*



#### **Timing / circumstance**

*(In addition to time requirements described above, there is an added element of unpredictability and lack of resources that affect time. For example, traveling by bus to access and transport food is time consuming, and adds compounding layers of difficulty. For example, what if you miss an intake appointment or pantry hours because you miss a bus? What if it rains after you have your food and you're waiting for a transfer?)*



#### **Schedules - bus, food pantries, school, work**

*(Limited access hours of food pantries must be coordinated against busy life schedules.)*



#### **Schedule problems at the food pantry**

*(Refers to limited access hours, difficulty using the service when it is too busy, or problems scheduling intake appointments.)*



#### **Not having accessible, flexible personal schedule to go to [the food pantry]**



#### **That in [the food pantry] there are day requirements**

*(This refers to limitations on how often user can visit, limitations on hours, and that services are typically closed on weekends.)*

Time creates pressure and stress, as well as functional limits for getting food when getting food is difficult. Waiting times to sign up for or to restore services that have been suspended or interrupted can span weeks or even months. The time required to get to and from services can be quite lengthy depending on the type of transportation available. There are time limitations around operating hours for services. The waiting time to get food once a person has arrived at the service can be drawn out.

Food security is inseparable from economic security, and less economic access also means it takes more time to meet the basic needs. These pressures and stresses stack upon and amplify one another when people have a difficult time accessing food. What follows are just a few examples of what this looks like -

1. Low wages mean that people have to work more, have less available time, and simply cannot work enough to compensate for low wages paid by employers. In Boulder, CO and nationwide, the minimum wage is significantly less than a living wage. There are huge gaps between federal poverty guidelines often used to determine food assistance and a living wage. For example, a single person must make less than \$16,237 annually for SNAP<sup>30</sup> while an individual living in Boulder, CO should make \$45,517 to maintain a “modest yet adequate standard of living”.<sup>31</sup>
2. The economic insecurity associated with food insecurity typically means a less flexible schedule than is available to people who have access to higher incomes, and thus more reliable access to food. Meanwhile, charitable services have more limited hours than grocery stores and require more time to use. People often noted that accessing services required huge time investments. It also typically takes more visits for them to get the food they need. Many people we spoke with use more than one charitable service for food and use the grocery store to get the things they cannot access through these services. Most people who experience food insecurity spend a lot of time piecing together supplemental resources in order to get what they need for the least cost.
3. Other barriers such as “red tape” (filling out applications and frequently providing proof of eligibility”) and transporting food by more economical means (bike, bus, walking, ride share services for seniors and people with limited mobility) take additional time.



“Because where I work I have [certain] hours, it's hard to find a place where I can go after work or on the weekends. So I know some of the pantries here, they have some great stuff sometimes when I have the opportunity to go when I don't work a full day, but it's not very often.”

<sup>30</sup> “Welcome to Benefits.gov.” *Colorado Food Assistance Program*, Benefits.gov, [www.benefits.gov/benefit/1580](http://www.benefits.gov/benefit/1580).

<sup>31</sup> Economic Policy Institute - Family Budget Calculator. (n.d.). Retrieved February 21, 2020, from <https://www.epi.org/resources/budget/>

“ Yeah, well at home, when it was just me and my husband and my daughter, well sometimes him and I would try to go [to the pantry] together but it was hard because of work schedules and stuff. ”

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Researcher

What would you say are your barriers to getting food?

Participant

Time is the biggest one. Because I'm expected, which now I've ameliorated that, but prior to two weeks ago, I was expected to work 40 plus hours a week in the lab, in addition to taking classes. And anything I – it came down to, I had about 2 hours a day that wasn't dedicated to either sleep or something at campus. So that's not a lot of time to be social or do laundry, you know?

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## E. Nutrition and Diet

When getting food is difficult, the inability to get food negatively impacts people's physical health. Because of food quality and quantity barriers mentioned above, and because low wages and benefits don't go very far, accessing a nutritious diet is particularly difficult in the charitable system. Participants identify how accessing nutritional foods and accommodating a specific diet is difficult through the charitable system:

### NUTRITION & DIET THEMES



#### **Limited/restricted diet**

*(is difficult to accommodate using charitable food)*



#### **Need for specific food at [the food pantry]**

*(to accommodate dietary restrictions and choices)*



#### **Trying to feed nutritional foods to your family**

*(can be challenging using charitable food resources)*

A diet without adequate nutrition isn't good for anybody, and it has particularly negative health impacts for people living in poverty who are more likely to experience health problems such as diabetes, high blood pressure, and a myriad of other health issues.<sup>32</sup> People living in poverty also have inequitable access to physical exercise opportunities, and live with the constant stress associated with food, economic, and housing insecurity.<sup>33</sup> Living in or having lived in poverty is one of the single greatest determiners of both obesity and diabetes.<sup>34</sup> Additionally, chronic diseases like diabetes are more difficult to manage for low income people who may not have access to medical care, services, or supplies required to monitor and manage the disease.

Many people work to manage health problems by following diets prescribed by health care providers or diets that people know keep them healthier. This is challenging with limited incomes, limited benefits, and using the charitable food system. Because of the barriers described in the [Food Quality, Quantity, and Variety Limitations](#) section, it can be difficult to find items to accommodate a particular diet. This includes items low in sugar or free of certain types of

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<sup>32</sup> Stuff JE , Casey PH , Szeto KL , Gossett JM , Robbins JM , Simpson PM , et al. Household food insecurity is associated with adult health status . J Nutr . 2004 ; 134 ( 9 ) : 2330 – 5 . Crossref, Medline, Google Scholar

<sup>33</sup> Drummond, D. (2017, June 14). *The Stress of Systemic Poverty is Killing Us*. Pacific Standard. <https://psmag.com/news/the-stress-of-systemic-poverty-is-killing-us>

<sup>34</sup> Seligman HK , Bindman AB , Vittinghoff E , Kanaya AM , Kushel MB . Food insecurity is associated with diabetes mellitus: results from the National Health Examination and Nutritional Examination Survey (NHANES) 1999–2002 . J Gen Intern Med. 2007; 22 (7): 1018–23 . Crossref, Medline , Google Scholar

ingredients, but also items that people following certain diets may require in greater volumes, like fresh fruit and vegetables.

This creates a cycle in which it is more difficult to stay healthy without adequate access to food, and it is more difficult to access food if your health is poor. Health care and nutritious food are two necessities and basic rights that people without adequate incomes must treat as negotiable expenses.<sup>35</sup> This forces people to decide between buying adequate and appropriate food or getting medical care. It may also mean foregoing or compromising both necessities to pay for other essentials, such as housing.<sup>36</sup> According to participants with severe health problems or mobility issues, not having access to an adequate diet can mean the difference between being healthy enough to perform self care tasks like getting food independently, and not being able to do those things.



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<sup>35</sup> Negotiable expenses, in this report, are basic needs expenses that people cut costs around in order to purchase another basic need. For example, people buy less food or buy less nutritious food to decrease food expenses in order to pay for other basic needs.

<sup>36</sup>Lagasse, J. (2019, Nov 25) *More than half of Americans have avoided medical care due to cost*. Healthcare Finance News. <https://www.healthcarefinancenews.com/news/more-half-americans-have-avoided-medical-care-due-cost>

## F. Transportation and Mobility Barriers

In addition to the barriers surrounding the affordability of food, or barriers that specifically surround services for people who find it difficult to afford food, many participants identify barriers around transporting food. Participants identified what makes it difficult to transport food:

### TRANSPORTATION & MOBILITY THEMES



#### **Transportation - bringing food home**

*(is a challenge)*



#### **Strategies to pick up food**

*(with limited transportation or mobility barriers)*



#### **Personal transportation problems**

*(while accessing food)*



#### **Not having personal transportation to go to [the food pantry]**



#### **Transportation issues**

*(problems with transportation while accessing food)*



#### **Challenges of getting food home**



#### **Transportation issues - cars / repair / lack of fuel**



#### **The process of physically getting to the store**

*(is a challenge)*



#### **Need for physical assistance**

*(to carry and transport groceries is currently going unmet)*

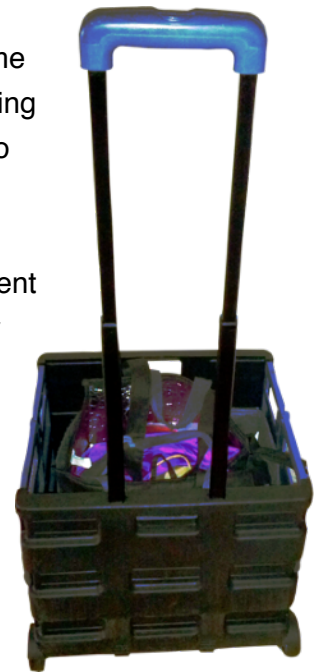
Lack of backup and redundancy is a common theme in food access. For example, in terms of kitchen tools, suppose your can opener broke. If you have another can opener, that is a redundancy. If you could easily access the same item with a pull-top lid, it's a backup. In transportation, imagine if you went out to your car one morning to go to work, and your car didn't start. Systems of backup and redundancy are the other methods and tools you would employ to get to work. For example, you might have another car in your household or a carshare membership. You might be able to arrange a ride with a friend, family member or coworker, or you might use a ride share app. You might be able to take the bus, ride your bike, scooter, skateboard, walk, or employ some combination of those. These are all redundancies and backup plans. When food is difficult to get, systems of backup and redundancy are also likely less numerous, less reliable, and harder to come by. Additionally, personal modes of transportation



are more likely to fail because quality components, as well as regular maintenance and repair, are more difficult to come by.

Transportation barriers are amplified if a person has limited physical mobility. While it takes some level of physical mobility to get groceries from the store to home on one's own in any case, it requires a greater level of physical mobility to transport groceries on the bus, on foot, or on a bicycle.

“It's a difficult process because I have mobility problems. For me to go out to get [food] is a huge deal. You know, um I'm dragging this little shopping cart behind me that's going to be stacked to capacity so it's heavier than I can lift up onto the bus and these drivers don't voluntarily kneel the bus for you. They don't use the ramp automatically for you. I've got a cane with all of that equipment and they still don't respond directly unless I specifically ask. Okay so, now I've got the people who are waiting behind me to get on the bus mad, because, 'She needs the ramp. Why does she need the ramp, she's walking?' Well yeah, I'm walking because I'm a stubborn person and I can force my way through it. They don't realize that.”



There are services that do help people who experience limited physical mobility, like ride share services for seniors and people living with mobility limitations. Research participants expressed a great deal of appreciation for these services, although the services came with their own barriers like reduced independence and schedule freedom.


“Public transportation is a bear. It completely changes your life if you can't ride a bicycle or whatever, you're dependent on others and public transportation and it slows you way down, way down. It's not very convenient. The schedules. No flexibility. And the effort goes up and more of your time and more of your energy if you're waiting for public transportation.”



## G. Information Barriers

There is an incredible amount to learn about the charitable food system and government benefit programs for those who use them. It's not only important to know where to access resources. There are idiosyncrasies to learn, like when to access resources, who will be allowed to access them, and how to access them for maximum benefit. Participants identified how information challenges impact their food access:

### INFORMATION THEMES

-  **Lack of information about food resources available**
-  **Lack of knowledge about food quality**
-  **Don't know how to cook the vegetables they give me at [the food pantry]**
-  **Store comments / education**  
*(Employees or stores are not well trained on SNAP or WIC or how to interact with people who use it)*
-  **Limitations with WIC or food stamps and how grocery stores work with the recipients**  
*(Similar to previous)*
-  **Didn't know where to go for food**  
*(when first experiencing food insecurity or seeking out resources)*

Participants identified two categories of information barriers related to lack of information about the charitable food system and governmental food benefits:

- 1) a lack of easily available information for people using those food systems, and
- 2) a lack of information for others they interact with while using the system, particularly grocery store employees when using SNAP or WIC

Participants identified information barriers about food and knowing where to get it, especially when they are new to the area or new to the charitable system.

“Once you have found out about the system and get started with it, it's fine. It's the initial finding out about it [that's difficult].”

People use a variety of methods to access and master this information, including the internet and word of mouth through neighbors, friends, communities, and other services.

Across the group of participants, most people knew how to cook and enjoyed cooking, but some people have had to learn how to cook the specific foods available to them through the charitable system because the foods weren't familiar to them. This was particularly true for people who learned to cook in cultures and countries outside of white American culture or outside of the United States. Because foods aren't available in quantities, types, or quality that one might find at a grocery store, a number of participants reported learning and employing a number of resourceful food processing or cooking tactics.

A number of people brought up how grocery store employees are unfamiliar with or are misinformed about WIC and SNAP, how to process payments, and what the rules are for such programs. For some participants this sometimes means embarrassing or demeaning trips to the grocery store, or coming home without a particular food item you need. Participants identified employees calling for assistance from other staff in very public ways or operating under inaccurate information about what kind of food they could take. Obviously, this lack of information creates a negative emotional experience for users of programs like SNAP and WIC, which otherwise aid budgets and offer participants more choice in the food they purchase.

It's important to note that information barriers occur because the information or resources available to people is inaccessible, incomplete, inaccurate, or lacks cultural relevance. It's rarely the case that people need more education in order to have a better diet. Typically, people need more resources, better access to resources. Usually, people simply need more income.

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Participant

“There’s like this cookbook out there. It’s something like written especially for people on food stamps and it’s like – how to survive on only like ... whatever the amount was, it was kind of like – whatever they said it was like \$16 a day or something on food stamps – it’s like, ‘yeah right.’ Try \$16 a month. Yeah, write a cookbook for that.”

Researcher

“Did you look through it?”

Participant

“Yeah, yeah it was like – wow if I could buy all those ingredients I’d be fine, but get real.”

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“I think one of the things that made me really excited about making the food videos [for this project] is always using some of the food that I got in the [food pantry], was, this would be very useful and helpful for a lot of people who just have predisposed thoughts as to how people spend their food stamps. Because I know, I’ve seen at [the food pantry] they’ve got these classes going on where they’ll teach you nutrition and cooking and whatever and I think that’s wonderful to offer to the community, but at the same time I got this notion from that flyer that poor people don’t know how to cook or poor people don’t know how to shop for food or spend money and yeah...that happens, but at the same time, um, doing this really allowed me to put another perspective out there that, hey, no one taught me how to cook, but I do have a mind and I am creative and I can do anything with food. I’m not unintelligently inept shopping with my food stamps or preparing meals. So it really made me feel good to be able to do this to get another perspective out there because I know there’s a general assumption going around about poor people and food, so I wanted to really make a difference in that.”



## H. Red Tape Barriers

This group of barriers was simple to name, because participants used the same phrase in 75% of self-identified themes - “red tape.” Red tape barriers include applications, program and benefit use restrictions, and poverty-proving requirements for using services. Participants identified how they must excessively and repeatedly apply for services and document their need for food:

### RED TAPE THEMES

-  **Red tape - complications for benefits**  
*(Income, residency, other requirements and proof of meeting those requirements make it difficult to access benefits.)*
-  **Getting started - application confusing**
-  **Nonprofit agency and government red tape snafu**  
*(Paperwork and requirements routinely keep users from using benefits, or make benefits more challenging, stressful, or time-consuming to access.)*
-  **Government program red tape**  
*(Income, residency, other requirements and proof of meeting those requirements make it difficult to access benefits.)*
-  **The whirl of work and obtaining food - staying "afloat"**  
*(Being poor and receiving charitable food and government food benefits is a tremendous amount of work.)*

All barriers make it more difficult for people to access food. In terms of the charitable food system and government benefits, red tape barriers sometimes are imposed by the services people use and certainly, agencies are also beholden to requirements put in place by external agencies (this is the case with programs like TEFAP<sup>37</sup>, for example). These restrictions and requirements are often put in place because of practical concerns or external pressures, but nonetheless communicate lack of trust, amplify emotional barriers, and ultimately make it more difficult for people to get food.

“[One food pantry] asks more questions [than another food pantry]. They are a little bit more like dealing with Uncle Sam. They ask for more personal information and you may qualify or you don’t qualify.”

<sup>37</sup> US Department of Agriculture. (2020, January 6). TEFAP Fact Sheet. USDA Food and Nutrition. <https://www.fns.usda.gov/tefap/tefap-fact-sheet>

“Kind of frustrating, I mean, I think if you need help, you shouldn't have to prove so much, you know? Like I have to give them my bank statement, I have to give them my car registration, I have to give them everything. It is like they need to know your life. I mean, I understand the income part, but why do they need your cars? Like, what does that have to do with food shopping? You know, so, I mean, especially because I know a lot of homeless people apply for it, what do they do? They don't have all of that information. So I mean I think they should change their system a little bit.”

To determine if a service is worth it, people will do a cost-benefit analysis: “Is this service worth the work, time, physical and emotional energy of the application process?” Many services don’t pass this analysis. For SNAP in particular, people (and seniors in particular) identified getting very small amounts of assistance (as little as \$16 per month) for the amount of work, time, and energy the application required. These low amounts are the result of income adjustments and federal poverty guidelines which are, as discussed in the [Economic Insecurity](#) section, completely inadequate for people to purchase sufficient food and other necessities.

“They have it online on the PEAK (Program Eligibility and Application Kit) website, but I just went to their office to do it because I don't have internet at home and it is hard on my cell phone to do it because it is a small screen and you have to scroll, but it is pretty easy to apply if you are just reapplying and you have all your stuff recent, then I think it is easier. Or if you go and it has been a long time, you have to fill everything, give them all of your information and everything. But I think food stamps is helpful for a lot of people. I think it is kind of unfair that they need my husband's information when I am not applying for him. “

“And then if you mess up, and you give them [inaccurate] information, you have to back-pay them. That happened to my friend. She is working and then she gave them information and she forgot to tell them something, and now she is back-paying. So you have to be very careful, you have to give them the correct information and everything they ask for. If not, you get penalized.”

This cost-benefit analysis looms large for immigrants who do not hold full citizenship and particularly large for undocumented people whose citizen children are eligible for benefits. Immigrants, and particularly undocumented people, face their own unique barriers while trying to access benefits and the charitable food system.



## I. Discrimination and Language Barriers

Food insecurity is largely a story of inequitable food access. Generally, when the conversation about food focuses on the people the food system fails, we begin talking about how the food system is broken. However, inequitable food access is situated inside a larger system of inequity and any barrier people experience is symptomatic of a larger system of inequity. The food system isn't broken, it's functioning the way it's intended to inside of a larger system of inequity.<sup>38</sup>

For some participants, these symptoms manifest as language barriers or discrimination in the systems they use to access food. Participants identified these barriers:

Three themes listed in “Discrimination and Language Barriers” are also listed in other themes. This is because the barriers are difficult to classify because they are intersecting and overlapping, and sometimes implicit in the context or subtext of a conversation. For example, a barrier that is based in discrimination is almost certainly also has an emotional component. Similarly, discrimination runs all the more rampant when misinformation or lack of information is present.

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<sup>38</sup> Washington, Karen. Opening Session, Closing the Hunger Gap, Raleigh, NC. September 4, 2019.



# DISCRIMINATION & LANGUAGE THEMES



## Language barriers

*(Challenging or incomplete communication in primary language or primary language wasn't accommodated at all.)*



## Discrimination and preferences

*(Participants felt they were subject to discrimination or other users got preferential treatment while using charitable services.)*



## [Food pantries] in response to the situations of some people

*(This theme had dual meaning. It encompassed situations in which policies and practices were inflexible and did not respond to the unique situations of individuals. It also included situations in which participants felt that social stigma was perpetuated at the service itself. This theme is listed in "Emotional Barriers". It included incidents in which participants mentioned or alluded to discrimination.)*



## The perception of [the food pantries]

*(Similar to previous. "Food pantries" in response to the situations of some people, these themes included situations in which participants felt that social stigma was perpetuated by the agency itself and included incidents in which participants mentioned or alluded to discrimination. It also included situations in which there was a negative societal impression of charitable food services outside of the service itself.)*



## Limitations of WIC or food stamps and how grocery stores work with recipients

*(Included incidents in which participants mentioned or alluded to suspect discrimination.)*

Extending Karen Washington's idea of food apartheid, all food access barriers are influenced by classism and racism in a systemic sense.<sup>39</sup> Inseparably cooked into barriers is bias and discrimination. The idea that people -

- aren't making the right decisions for themselves or their families.
- should work harder, and would have fewer problems if they did.
- do not deserve certain foods, comforts, or conveniences.
- do not want to or can't contribute or give feedback.

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<sup>39</sup> In other locales, food access is more considerably influenced by geographical proximity to food. This doesn't really make a significant appearance in this study that takes place in grocery-saturated Boulder, CO. The vast majority of Boulder residents live near a grocery store. However, distance from a grocery store does impact the food access of some residents. Upon the writing of this report, the furthest distance from a residence to a grocery store within Boulder City limits is in far northeast Boulder. In addition, this neighborhood is separated from most food resources by a major highway and limited public transit options.

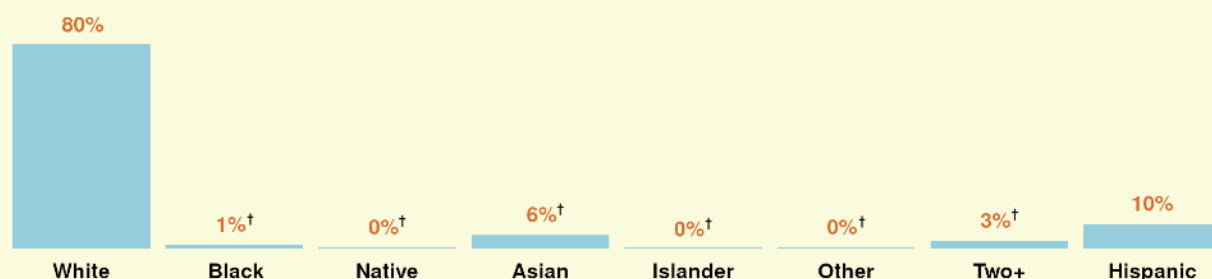


- don't care to or can't show because they have too many barriers to do so. (It's true that barriers make everything more difficult, but people show up and participate despite barriers all the time.)
- need to prove they need a service, especially repeatedly.
- require education (ex: don't know how to eat a "healthy" diet or know how to cook.)
- are all informed by bias, and shape the charitable food system and government benefit programs. Classism and racism inform red tape and paperwork required to qualify for services, amplify emotional barriers for those who try to use services, and create the conditions for inadequate diets and inequitable opportunity for physical activity.

Latinx residents, who make up 10% of the Boulder population, experience bias according to racism, English-only or English-dominant materials and services, and their perceived or actual immigration status. In a larger political climate hostile to immigrants, refugees, and undocumented residents, accessing food assistance is particularly hard. Users have well-founded concerns about using the charitable system out of fear of their information being accessible to the Department of Homeland Security (DHS) and Immigration and Customs Enforcement (ICE). Specifically, some participants fear deportation or being barred from obtaining immigration documents or citizenship in the future in accordance with public charge rulings and guidance.<sup>40</sup> These concerns have only intensified since we began writing this report, as anti-immigrant legislation has gotten more extreme.<sup>41</sup> Participants reported, along with these fears, a lack of clarity about where their information gets stored and who can access it. For example, a person who doesn't hold citizenship or other immigration documents (but contributes to the community, the workforce, and pays taxes which support such social supports) might be eligible for a service like SNAP through a citizen child, but they may choose not to use that resource because they have a fear about their information being shared or traced in a way that could lead to deportation or that could otherwise negatively impact the citizenship of someone in the family in the future.

Other nonwhite groups certainly experience racism in Boulder and its food systems, but the pervasive systemic racism resulting in low populations of nonwhite people in Boulder made those groups difficult to meaningfully include in research, which is one limitation of our study.

### Race & Ethnicity



\*Hispanic includes respondents of any race. Other categories are non-Hispanic; ACS 2018 5-year data

†Margin of error is at least 10% of the total value. Take care with this statistic.

“My experiences were not so good. The people who worked there - didn't like us, but I needed food. I had to deal with it, whatever the employees did. Even worse because they have the same ethnicity and they mistreated you. ... I did not go last year. ... I didn't go to any other places. I tried to stretch more our money. So to go and get groceries I needed to take it from my rent's budget. But no, I didn't get help from any other places.”

We do know conclusively, however, that race is a determining factor in food access, food insecurity, preventable and chronic disease, and income stability. In fact, according to the Colorado Health Institute, Hispanic or Latinx Coloradans in urban areas are roughly twice as likely to experience food insecurity than their white counterparts, and Black Coloradans in urban areas experience food insecurity at three times the rate of their white counterparts.<sup>43</sup>

It is important to keep in mind that barriers are symptoms of larger inequities and unjust systems, and that our food system is an integral part of a larger economic and social system that is historically, presently, and intentionally built on power and wealth consolidation, particularly according to race.<sup>44</sup> Barriers can be mitigated by agencies, individual efforts, legislation, and community and financial support, but they will only be meaningfully and permanently changed by large scale systemic change, change that fundamentally changes how the system functions.

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42 U.S. Census Bureau (2018). American Community Survey 1-year estimates. Retrieved from Census Reporter Profile page for Boulder, CO <http://censusreporter.org/profiles/16000US0807850-boulder-co/>

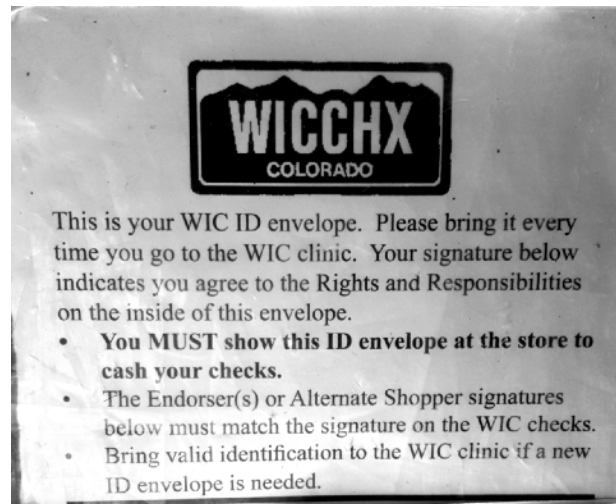
43 Char Gilbert, Julia. 2020, June 16). “An Uneven Burden: Food Insecurity in Colorado. Colorado Health Institute. <https://www.coloradohealthinstitute.org/research/uneven-burden-food-insecurity-colorado>

44 Newkirk II, Vann R., (2019, Sept 29) The Great Land Robbery: The shameful story of how 1 million black families have been ripped from their farms.” *The Atlantic*. <https://www.theatlantic.com/magazine/archive/2019/09/this-land-was-our-land/594742/>

## J. Participation

Participants identified “the lack of opportunity to have a voice and hand in improving food access.” Within this theme, participants addressed not being allowed to volunteer for the programs they use. They also expressed feeling powerless to influence and shape food systems. Though people conveyed gratitude for available resources, they also felt that their needs are not effectively understood or addressed by organizations or programs.

“Well, I know when I just go to the store and just pay money and buy anything I want - I feel free. I have control. But when I go to the [food pantry] and some well-intentioned person is escorting me around and looking at everything I choose and directing me, you know, on the things that are there and making comments about what I’m choosing and you know, questioning things and you know, even though the person is trying to be friendly, it doesn’t feel like freedom. It feels like someone’s trying to control me. Ya know? I like the feeling of having money and having power to just choose and no comments, no judgement, no opinions from anyone.”



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Researcher

“And is that the same at some of the places, places or resources you use for food? Do you feel like you have a voice in any way?”

Participant

“Oh absolutely not. No. There’s nothing you can suggest at any of them. It is the way it is and if you don’t like it, don’t come.”

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Research participants also expressed appreciation for the opportunity to participate in the research project -

“ Yeah, I mean nobody’s ever asked me about my experience with this kind of stuff before. It’s actually kind of cathartic.”

“ It really made me feel good to be able to do this to get another perspective out there because I know there’s a general assumption going around about poor people and food, so I wanted to really make a difference in that.”

Research participants identified being motivated by “giving back” and identified “not wanting to be a ‘taker.’” They also identified an interest in opportunities to meet and interact with other people, and to use food as a tool to build community. Overall, people who use programs are motivated to contribute because they want to improve programs and use the expertise they have gained from navigating food assistance systems to improve food access in their communities.

# Physical Health

We all live in a broader context of food apartheid, where the food system functions as a tool to consolidate power and wealth, particularly along lines of race, class, and geography. Poverty and its worst symptoms are largely linked according to race, class, and geographical lines.<sup>45</sup> Indicators of poor physical health result from inadequate food and diets that result from inequitable access to food. These include obesity, diabetes, and a variety of preventable diseases.<sup>46</sup>

## What People Experience

The everyday challenges and individual feats required to access fresh, healthy, desirable and culturally appropriate food degrade the physical and mental wellbeing of the people who struggle with inequitable food access. It can be difficult for people to meet their dietary needs using charitable food resources and governmental food benefits. People may feel limited in terms of variety of food by type (e.g. produce, grains, dairy, meat), foods that accommodate individual dietary restrictions, allergies, and needs (e.g. low sugar, dairy-free, gluten-free), and culturally appropriate foods.

While food banks, pantries, and food rescue agencies provide food, the offerings do not always provide a high degree of food choice or offer choices that help everyone feel healthy and well. Government benefit programs like SNAP allow users to purchase food with more freedom and choice in a grocery store (the most desired location for participants to obtain food), but often in dollar amounts that don't meet the needs of individuals and families, even as a supplemental resource. Fresh produce and other specific items can be limited at charitable food providers like food banks and food pantries, restricting people's personal choices and their ability to apply their own knowledge about what makes them feel healthy and well. Particularly for community members who might face additional diet-related health concerns, we often heard that the foods available at food banks and food pantries don't match their dietary needs. Being unable to accommodate dietary needs compounds medical issues and medical bills, which in turn creates a cyclical effect around being unable to access diet-appropriate food and experiencing the health effects of not being able to access that food.

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<sup>45</sup> Brones, Ana. (2018). Karen Washington: It's Not a Food Desert, It's Food Apartheid. Guernica Magazine. <https://www.guernicamag.com/karen-washington-its-not-a-food-desert-its-food-apartheid/>

<sup>46</sup> Gundersen, Craig and Zillak, James. (November, 2015). *Food Insecurity and Health Outcomes*. Health Affairs. <https://www.healthaffairs.org/doi/10.1377/hlthaff.2015.0645>

## What This Experience Looks and Feels Like

To more clearly demonstrate the complex linkages between food assistance, diet, health, and the ongoing economic challenges of affording a basic quality of life, we turn to Connie<sup>47</sup> and the story she shared with us about her experiences accessing food while trying to meet a doctor-prescribed diet.

Connie has been using food pantries for about 6 months. Up until that point, she primarily bought food from grocery stores and had been following a very specific, doctor-prescribed meal plan for over 15 years. This plan consists of mostly fresh and raw fruits and vegetables to manage a chronic illness. She's always had to budget carefully and refrain from more expensive items, especially to maintain the doctor-prescribed raw and vegan diet. Fresh produce is expensive, especially as the central feature of a person's diet. As a result of aging and living with a disability, she has become less able to work and has found it increasingly difficult to afford the cost of living and the cost of food. For the past several years, she's been running out of money for food the last week or two of every month.

She decided to visit a food pantry. Due to her dietary restrictions and what she knew of food pantries, she supposed it would be unlikely to meet her dietary needs there. But, she called to ask about their eligibility criteria anyway. Providing all of the documentation the woman on the phone told her she would need seemed really daunting and she wasn't sure if she would qualify. She anticipated that going to the food pantry would feel humiliating for her - she already felt that way - and she was fairly certain she wouldn't be able to get the food that she needed. She strongly believes that what she eats makes a difference in her health. When she went on the doctor-prescribed diet, her health improved immensely. She knew that it would be incredibly difficult for her to feel hungry, go into a food pantry, and be confronted with food offerings that would make her feel bad in her body.

She decided that she would apply for food stamps, but there was so much documentation that she needed to provide, and filling out the application was really confusing. She heard that the application might also help her with paying her medical bills, which was good because she has a lot of them. Unfortunately, the application did not help her with the \$3,000 she owes on medical bills. It didn't matter that she had \$3,000 worth of medical bills to pay in 3 months. They only counted the bills she makes monthly payments of more than \$35 per month on. It didn't matter that she was paying \$10 per month on numerous bills. It took over a week to complete the application and when she finally did, she qualified for \$16 per month of SNAP benefits.

Anyway, she continued to go to the grocery store to purchase food like this for many years - budgeting and purchasing carefully according to the doctor-prescribed diet, and inevitably running out of money for food at the end of the month.

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<sup>47</sup> Pseudonym

Then, she went through some major life changes where she didn't have enough money for food after she paid her rent and basic bills. It just got really, really bad where she knew she had to go to a food pantry even though she didn't want to. She researched food pantries online and decided to go to one. It was close to her home and their application process seemed the easiest. She was able to get food that day, but she was only able to get the amount of produce she needed for about one day on her doctor-prescribed diet. It did feel humiliating to go. She had to talk to numerous people during the intake process. She had to tell each of them that she was there to get food, and they each asked her so many questions.

She also went through the process to access other food pantries and banks in the area, and she visits each of these as often as she can. She can go to one pantry weekly and one twice per month, but this won't get her enough produce, so she has to relent and take things that are outside of her doctor-prescribed diet. She tries to take things that she figures are the least bad for her, things like brown rice, potatoes, canned vegetables, but when she can't follow her diet, she doesn't feel as well. After eating raw foods for over 15 years, she can't digest cooked foods very well and her stomach hurts. She can mostly accommodate the vegan part of the diet, but it doesn't change the fact that she needs to eat foods that aren't right for her health. She can't sleep as well. Everything is more difficult. Her body hurts and she has to lay down a lot. It's always hard to get around with her disability and things take her more time, but now she's in more pain more often. It makes it difficult to do everyday tasks like going to the pantry to get food, and her medical bills are still compounding.

## Conclusion

Connie's story is only one of many linking food insecurity and food access to physical health. In her story, we see her weighing the pros and cons of accessing resources and how that will contribute to her chronic condition.

Connie doesn't have to feel this way about accessing food and managing her physical health. As a community, we can change the needs that Connie and others face on a daily basis, and change the way food access is provided to ensure her needs are met.

For a list of recommendations that you can consider, whether you are a member of the general public, engaged in policy, a funder or governmental agency, or a direct service agency, please see the [Recommendations](#) section.





# Emotional Wellbeing

Emotional wellbeing is important for everyone, and we all experience ups and downs in our daily life. For those who are food insecure, these lows can be more pronounced, as food insecurity is known to cause stress and negative mental health outcomes such as anxiety and depression.<sup>48</sup> This can affect people's self-esteem, ability to cope with difficult situations, and to take care of themselves. At the same time, people who are already struggling with mental health may be at higher risk of food insecurity. These effects can compound on each other and make people's life experience more difficult. Emotional wellbeing is an important piece of the food access conversation. Individuals need to feel well in order to seek out the resources that will help them bring more food to the table and engage in life's other everyday tasks.

## What People Experience

For many people, there are several ways that emotional wellbeing is directly related to food access, including access to quality foods; trauma, shame, or stigma surrounding food access and food insecurity; and relationships surrounding food.

## Lack of Access to Good Quality Foods and Its Impact on Emotional Wellbeing

Not being able to access the quality or type of food that you like, food that is culturally relevant, or food that fits your diet can be frustrating and wear on you emotionally. This feeling of lack of dignity, exemplified in the excerpt below, was echoed multiple times by participants.

“Well, part of the reason is that the produce at [the food pantry] is in such poor condition. It already needed to be eaten last week when you get it so there's no way that it's gonna last a week. And also the quantity – it's almost like an afterthought, the produce [I mean]. It's like maybe, if you're lucky, maybe you'll walk out with one thing, one type of vegetable or fruit that is normal – meaning close to what you can buy at a supermarket, but the majority of it is so old. It's almost ... and that's what I thought about when you asked me about dignity. Would the people that work there that have all these rotten old, wrinkled up vegetables – would they eat them themselves at their home? I don't think they would. It's kind of like – why do you think we want to eat that? Are we that worthless that you think we want to eat rotten food?”

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<sup>48</sup> Bruening, M., Dinour, L., & Chavez, J. (2017). Food insecurity and emotional health in the USA: A systematic narrative review of longitudinal research. *Public Health Nutrition*, 20(17), 3200-3208. doi: 10.1017/S1368980017002221

## **Trauma, Shame, or Stigma Surrounding Food Access and Being Food Insecure**

Trauma is a deeply distressing or disturbing experience that in this context, may have happened while accessing food. Shame is a feeling of humiliation or distress, and in this context, can often arise from accessing food while experiencing food insecurity. Social stigma, in the context of food insecurity, is the disapproval of, or discrimination against, a person based on their socioeconomic status. It is linked to a dominant American notion that if you work hard, you deserve, can afford, and will be able to access good food and other basic needs. However, as we know from Boulder's food insecure residents who participated in this research, there are many barriers to accessing food. Being food insecurity is squarely a result of systemic failings, not personal failings. However, because of the prevailing negative stigma associated with hunger and poverty in America, many individuals express feeling shame and stigma when they receive food assistance.

All of these experiences, exemplified by the quotes that follow, contribute to and build towards negative emotional wellbeing.

## Shame Around Food Access

“I am afraid someone will say something to me. And then, that person is always shouting. Once, I mistakenly opened the wrong fridge and she shouted, ‘Hey no, let me see what you grabbed!’ and she checked in my cart and I felt weird.”

“It’s interesting living in Boulder where so many privileged people have no idea that people around them are struggling. Like people I work with have no idea I go to [the food pantry], and I guess there’s a certain amount of shame with it, but I learned not to let that get me because I really appreciate what I’m able to do when I come here. The [food pantry] really saves me. It saves me every single week, really, I come every week. So, we’re here.”

## Stigma Around Food Access

“It’s like, it’s extremely painful, it’s like I failed, like I failed to overcome my life challenges to the point where I can’t even provide myself with food. And that’s a really painful thing to admit to myself and other people. And I don’t like thinking about it all the time because it is so upsetting to me that, you know, it prevents me from doing the things I can do as far as getting myself out of this situation. You keep beating yourself up and it’s just hard to function. I don’t like thinking about it. I try not to focus on it every minute of every waking hour. But every time I show up at [the food pantry], I’m forced to think about it.”

“Well, I know when I just go to the store and just pay money and buy anything I want - I feel free. I have control. But when I go to [the food pantry] and some well-intentioned person is escorting me around and looking at everything I choose and directing me, you know, on the things that are there and making comments about what I’m choosing and you know, questioning things and you know, even though the person is trying to be friendly, it doesn’t feel like freedom. It feels like someone’s trying to control me. Ya know? I like the feeling of having money and having power to just choose and no comments, no judgement, no opinions from anyone.”

## Relationships and Their Impact on Emotional Wellbeing

Many participants talked about their experiences accessing food and the relationships they had with staff, volunteers, and other people seeking out food. These were nuanced and clearly impacted their emotional wellbeing.

One person discussed how difficult it is to build relationships with pantry staff and volunteers, because of the endless amount of recommendations and tips they try to give out. This makes them uncomfortable, since they'd prefer to make their own choices and are aware of nutrition information. This affects how they feel each time they go in:

“The people at the [food pantry], they are very, very nice. You can tell they're not like social worker type people or people who are working for the county. They're very, like they're trying to be nice. So I hate to say anything bad about them, like um, you know you can tell their intentions are good, it's just, you know, it's like when they try to give you tips about healthy things to eat and “Would you be interested in this? It's organic.” It's kind of like, I've been studying nutrition for so many years. You people are clueless – please! You would never get that at a supermarket. People might look at your basket and think to themselves, ‘Why do you have all that garbage in it?’ But they would never comment on what you're choosing or ... yeah. So that's not a big deal, that's just ignorance, it's not like, but it feels uncomfortable. It feels like just because I'm in this situation and I don't have enough money for food and just because you happen to have food that you're giving me doesn't mean that you know all about nutrition and what I should be eating.”

At the same time, other participants talked about the supportive relationships they have related to accessing food - particularly if they know others in their building or neighbors who use the same services. For example, one person talked about how they carpool together when they can and get to catch up socially -

“She's a [pantry] person and sometimes we've actually gone together like, ‘hey wanna go to the [pantry]?’ ‘Yeah, let's go.’ And we'll drive over there and it'll be like a social thing for us.”

Similarly, especially for folks who have been visiting the same services for years, they start to get to know the staff and benefit from that -

“So, I mean, I’ve been going to [the pantry] for years... So the volunteers there all know me, they set things aside for me sometimes. I got a nice pair of Birkenstocks because one of the girl’s daughters had given them up and she sort of put them out when she knew I was coming through. [A staff member] always saves Luna bars for us because he knows the girls like the chocolate chip Luna bars.”

Over and over, we heard individuals express a similar trajectory of feeling. This trajectory of feeling begins with appreciation for the resource and a responsibility to optimize that resource, then moves to shame or the desire to acquire food according to their preferred means (often, going to a store or producing their own food), and then circles back to appreciation for the resource. To summarize, this looks like, “I need and appreciate this resource. It feels humiliating for me to use. I wish I didn’t have to use it, but for now, I have to use it, so I appreciate it.”

“I want the food, I take real good care of it. I eat it. I prepared it really special, I’m grateful. I’m embarrassed I had to access this frankly. It’s the first time and I hope I never have to do it again. But I’m grateful that it’s been there and it’s kept me healthy.”

“I’m still a little embarrassed, you know what I’m saying. I’m relying on something and that is what other people did. People who were really... you sort of knew these places existed for people, but you didn’t... I’ve never accessed one in my life. I never had the need, and now I have, so I use it with care, and as soon as I start work I will be buying my own food. So I’m grateful it’s there, I really am.”

## Conclusion

While many aspects of emotional wellbeing have deep systemic roots, we believe charitable food agencies, politicians, policy makers, and the general public have roles to play in making accessible food feel more positive, affirming and empowering.

For a list of recommendations that you can consider, please see the [Recommendations](#) section.

# Invisible Work

To overcome food access challenges and barriers, people do a lot of creative, invisible, and emotionally intensive work to access food.

## What Is Meant by Invisible Work?

In our society, when we think about work, we often think about paid work. However, much of the things we do in life to survive and thrive include work that is not paid. This includes things like taking care of children or elders, preparing food for ourselves and families, emotionally tending to ourselves and other people, and making sure we are healthy and mentally well. In this section, we want to introduce the term 'invisible work' to describe all of the work that goes into managing life that is unpaid, under-appreciated, and/or never fully accounted for. This concept is particularly relevant when thinking about those who are food insecure and seeking charitable food assistance to make ends meet.

Stereotypical expectations about food insecure individuals may assume they visit a food pantry once to stock up for the week. While individuals may, sometimes, be able to get what they need at a pantry, typically they are cobbling together different resources, including groceries from several pantries, to make a plan for feeding their families. This is an example of invisible work, and it is demanding both emotionally and physically for those struggling with food insecurity.

There is also the mental preoccupation that comes from being food insecure, which is emotional labor in itself. Not only do these individuals struggle with the [emotional toll of seeking food](#), but there are multiple steps where energy is expended throughout. There are numerous resources that people work across including food pantries, financial resource programs, grocery stores, community meals,, etc. With this concept, we focus exclusively on the work around using food pantries as an extended example.

## What Does That Invisible Work Look Like?

Frequently, people who experience food insecurity are doing invisible work beyond the task of getting themselves to the food pantry and back to stock their fridges and pantries with a few items. The scenario below will illustrate some of these examples - from research and planning to the logistics of visiting food pantries to the realities of creating meals from limited options.

## What Invisible Work Do People Experiencing Food Insecurity Do?

**They research** - using all available outlets and resources available to them - which food pantries are nearby, what their hours are, and calling to ensure that they truly are open and have food that meets their needs.

“Boulder County Food Services. I would recognize the page if I saw it. What happens on that page? Food Assistance [listings]. I called this number [that was listed], they told me to call another number, and I guess they said, ‘Oh yeah, go to this website here.’ Which I did, then I called that number there. That is the main number. It was a hassle, actually, it took me... it wasn't easy. I started here. That is the place I started. ‘Oh no, you want to talk to these people here.’ So after about a page and a half of that, I did get the right one. So here, this is the right page.”

“If I'm remembering correctly, three of the visits were to [food pantry] and you can only go to one of them, you can only go once a week, so I try to be there once a week, to see if there's anything I can get. And so in two weeks, I would go to that place two times and another one, let's see. Another one – I went to another [food pantry] and they gave me an emergency box of food and they said you can come back next week and you can choose your food. Do you know what I mean? It's kind of like – if it was up to me I would just go to the store and buy as much as I can so I don't have to go back again. But because I'm at the mercy of their rules.”

**They plan** around work, school, and family obligations to make time in their week to get food. They have to consider their own schedule and plans along with those of the resources they may visit. They are juggling the different hours, locations, and limitations of these resources. This may repeat itself based on how many different food resources they need to access.

“[This pantry] closes at 4:30PM. And I try to go there on Thursdays because they close at 6PM. I mostly go there on Thursdays. I finish my shift, pick up my son's daughter because I take care of her in the evenings, and together we go.”

“It takes time. I have to plan it, it takes time. If I was working a little more, I might find it a little more difficult to get up there.”



**They coordinate the logistics** of transportation, whether it be by car, bike, bus, foot, or ride service. Lack of income or physical mobility limitations make this particularly difficult.

“Yeah, the locations are inconvenient. Um and it's often assumed that there's some sort of transportation – bus doesn't get it. Even when you go out there on a bus, I mean, it's really hard to get a lot of these pantries.”

“Working all the way in Denver and then coming back here. And then the other thing is that my car has been giving me problems. It stopped on me 3 times last week and yesterday I was having issues with it, so I was able to take it to the mechanic and it looks like they're gonna have to go behind and do something, so transportation is another big issue.”

**They perform the cost/benefit analysis** of using particular resources and **arrive** to be overwhelmed with a number of personal questions, forms to fill out, and information needed about why they truly deserve to receive food at no financial cost. Then, they wait until a volunteer calls their name in front of everyone else waiting to use the service.

“**Your Reporting Responsibilities** *(SSA & most/all Benefits Programs For People w/D)*

Your SSI payments may change if your situation changes. You are required to report any changes that may affect your SSI no later than 10 days after the month the change takes place. Please call 1-800-772-1213 or contact your local Social Security office to report any of the following changes:

- You start or stop work, or your wages increase or decrease;
- Your bank account balance goes over \$2,000;
- You move;
- Anyone moves into or out of your household;
- Someone in your household dies;
- You marry, separate, or divorce (including same-sex marriage);
- You are under age 18 and a parent who lives with you marries, separates, or divorces;
- Income or resources change for you or members of your household;
- Your medical condition improves;
- You are under age 22 and you stop or start attending school regularly;
- You leave the United States and expect to be gone for a full calendar month or for 30 consecutive days;
- Your immigration status changes;

cannot handle another application process.”

“It just got really, really bad in November where I knew I had to go to a [food pantry] even though I didn’t really want to. So at that time I researched online the [food pantry] in the Boulder area and I decided to go to [one of the pantries] because it’s closer to drive to and their application process seemed a lot easier. Some of the other places, they just, you have to give them so much information. And I just gone through applying for food stamps and that took a week online to answer all their financial questions. A week!”



“I’m an outsider and it almost feels like, what are you doing here? Why are you here, to take up the food that so obviously you don’t need. I mean, that’s the feeling that, like, but it doesn’t matter what I look like, we don’t know each other’s story.”

“That’s one thing about being poor. It’s like a full time job just navigating the system, really. Talked to people that like, want to describe their experience, applying for public assistance, have the childcare assistance program or food stamps, the applications are huge, and you have to prove all of your income. The one thing with public assistance is my income fluctuates a lot, and did more so last year, one of the reasons is that I every once in a while get a child support payment, and if my ex husband is on child support, I all of the sudden get booted for every single thing I apply for because of that income for one month and then the next month he doesn’t pay me so I have to reapply for everything and that takes a certain amount of time.”



“Yes, at the pantry isn't like once you get there you can walk in, you must wait until your turn is up. Just like this last Thursday experience. I signed in and another lady arrived at the same time. We both have the same name, I think, I am not sure. So, the gentleman calls me up and I am ready with my shopping cart about to get my food. Then the secretary tells me I am not up and I should go back to the lobby because I was after the lady. I told her it wasn't my fault, it was the gentleman's fault because he called me in. Yes, she said, you have to go back for the other person to come in. In total, it's about 2 hours [to get food] since there's a waiting time.”

**They engage** with and try to be kind to volunteers, holding back their frustration even when being lectured about healthy food choices or limits of what they can pick up at a specific pantry.

“It's just, you know, it's like when they try to give you tips about healthy things to eat and ‘would you be interested in this? It's organic.’ It's kind of like, I've been studying nutrition for so many years. You people are clueless – please! You would never get that at a supermarket. People might look at your basket and think to themselves, why do you have all that garbage in it. But they would never comment on what you're choosing or ... yeah. So that's not a big deal, that's just ignorance, it's not like, but it feels uncomfortable. It feels like just because I'm in this situation and I don't have enough money for food and just because you happen to have food that you're giving me doesn't mean that you know all about nutrition and what I should be eating.”

**They work to maintain that calm** when they realize that there are few options that fit their needs, and again when their basket is scrutinized by a volunteer who may remind them, for example, “Only two boxes of pasta per week,” even though those two boxes will only feed their family one night.

“Yeah, because it doesn't feel like a lot of choice. I notice a lot of them give you lots of breads and I don't eat bread that much. I eat it, but not as much. And they give you lots of sweet bread, so that is hard. Or a lot of canned stuff that you don't even like and you end up giving it back away or putting it in the trash, so it's hard.”

“I am a little bit picky though about the stuff that I take. They have a lot of food that to me, is not food. Like Ramen, I am not going to feed my kids Ramen. I'd rather be hungry than to feed them food that is toxic and I guess that's just my...I don't know if that's me being... I would much rather feed them less than feed them crap.”

**They transport** their food selections and plan how they will make that food last until the next time they get paid, receive more benefits, or can visit another pantry, which means they're transporting a lot with them.

“Think about carrying on foot an entire box of chili, of cans of chili. Six, eight, ten cans of chili. You know? Or, or a variety of other, you know, box of a variety of other canned goods. And mostly, and that's understandable, canned goods last longer.”

“They do a lot more fresh food. Um, but even that, you know? Uh, a 10 pound bag of potatoes is no joke to haul on your shoulder.”

**They strategize** to provide wholesome meals for their family in the short and long term.

“I just got done shopping and I am heading home. My car is packed full of food and the other half of this is um, I'm running out of time, I need to go to work and my car is full, floor to ceiling. You know in the next week and a half. I have two teenagers at home and they eat a lot. But it feels good to just fill up the fridge. The only thing is now I have to go to work and I've got some perishable items and sometimes I take them with me to work and put them in the fridge at work and sometimes I go home and try to shuffle them all in the house but there is a lot of organizing that has to happen and some of the food is like on the verge of going bad or needs to be dealt with right away, so sometimes I'll set up a cooler and sometimes, there's like, you'll get like a bushel of something, and you have to like, process it or something, it's just like a processing of the [food pantry] items that has to happen.”

“I have some bread that I throw in the freezer because otherwise it will, it starts to get moldy in about 24-48 hours, because by the time it gets to [the pantry], it's already... they know, it's about a day or 2 from breaking out in mold, they know it. So what I do is when I do get bread, I slice it up, if it's not already sliced, and I slice it with a knife on that piece of wood and I put it back in the bag and put it in the freezer.”

“You get a lot of random stuff. They don't have a lot of like, the fresh vegetables are all like, just on the verge of going bad, so if they have fresh vegetables, you have to like, process these vegetables that day, like, so, if you didn't work or something or had granny at home who could pickle, you could really put stuff up for the winter but if you don't have all day... I mean really, I go to the [food pantry], then you get this giant mound of food, then you have to wrap your mind around it, like what stuff can I store, which stuff do I have to make, like tonight, and then I'll cook a bunch of meals and I'll either put them in the freezer or I'll put them in the fridge because that's what you have to do to make use of all this food that's like, already expired.”

**They prepare dinner and get creative with food.** They remove any parts of the vegetables that have gone limp or soft, taking extra time and extra work to use what they can.

“I'll get like, look at all these amazing yogurts, oh, they expired a month ago. It's yogurt, man. Yogurt is a food that sits around, I mean a month might be pushing it. But it's still good if it doesn't smell bad. I'll still probably eat it. I'll still feed it to my kids if it, you know, nobody's ever gotten sick in my family from eating [food pantry] food. You know?”

“Like when I get down to absolutely nothing, that's when I get most savory and creative. It's really not a bad thing because well, it's just how I've lived, and I know what to avoid.”





**They strategize** how to feed their families while paying for other necessities.

“I make too much money to qualify for food stamps but not really enough money to pay for everything, like mortgage, water, trash, phone (laughs) food, clothes, and I’m alone with 3 kids, 2 boys so they go through a lot of clothes, so I only pretty much shop at thrift stores, but every once in a while, I want to buy my kids a new pair of shoes and like if they (laughs) it’s funny to even think that would be hard to do, but it’s almost impossible and if I did not have the [food pantry], I wouldn’t be able to buy them things like that so they could have some decent clothes to wear to school and not get made fun of. It’s interesting living in Boulder where so many privileged people have no idea that people around them are struggling. Like people I work with have no idea I go to the [food pantry], and I guess there’s a certain amount of shame with it but I’ve learned not to let that get me because I really appreciate what I’m able to do when I come here. The [food pantry] really saves me. It saves me every single week, really, I come every week. So, we’re here.”



“I tried to stretch our money. So to go and get groceries, I needed to take it from my rent’s budget.”

## Conclusion

This understanding of invisible work by those who are food insecure is useful to provide further insight into how people are seeking out resources. For more on the invisible work required to access food, reference [Ingenuity and Leveraging Community](#).

While many aspects of invisible work are deeply ingrained in society, we believe charitable food agencies, politicians, and the general public have roles to play in making accessible food feel more positive, affirming and empowering.

For a list of recommendations that you can consider, please see the [Recommendations](#) section.

# Ingenuity and Leveraging Community

## What Is Meant by Ingenuity in Food Access?

It's often true that limitations force ingenuity, and this is often the case for getting and preparing food. People come up with a variety of creative and resourceful methods to access and prepare food when getting food is difficult. An important part of this work is leveraging community, in order to access resources.

This is not to suggest that people can reasonably be expected to outwit, outsmart, or otherwise escape poverty or food insecurity with their own ingenuity, creativity, or resourcefulness. Poverty is a systemic condition. Ingenuity is the business of making these systemic conditions workable and livable, a skill painstakingly gained from navigating from day to day and meal to meal.

## What Does That Look Like?

Ingenuity in food access happens when a person comes up against a barrier and they figure out how to overcome it. This happens in the ways that people collaborate, create systems of backup and redundancy, find and use tools unconventionally, and maximize limited time and financial resources.

For example, one research participant told us about how they opened a can without a can opener. Another participant told us about how they managed to drain pasta noodles without colanders or lids to pots. A participant with limited food storage options told us about how they ate regularly when pantries were closed. A number of participants talked about couponing or going grocery shopping on days when they knew food would be discounted. A number of participants told us how they managed responsibilities and time commitments like full time work, transportation, the care of family members, and still managed to get food from food banks or pantries that are mostly open from 8am-4:30pm. All of these require ingenuity.

A number of participants talked to us about how they use multiple charitable food services and limited budgets to create a balanced diet for themselves and their family.

“I go um, Wednesday mornings, which is today, probably when you guys leave, if this doesn't take too long, I will go to [the food pantry] and then, Thursday afternoons I pick up the girls after school and we head over to [another food pantry] and I, that's my schedule.”



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Participant

“And I do go to [another food pantry] too. Mmmhm. Not me, but my husband goes, depending on his day off. Like he is off on Thursday and Thursday, like half day off they give him from 2 to 6:30, sometimes they give him from 10 to 2 pm and between that half day period, if he is working, if he’s working from 10, he tries to go and get the food and then go to work.”

Researcher

“And do you, is there a reason you use both of them?”

Participant

“I mean, I try to stock up food, that’s it....They’ve always got different things. If I get something at [one food pantry] like milk and then potatoes, I go [to another food pantry] and then see, I’ll just get the grains. I do not take all the things that I take from there. It’s a waste, it’s going to be a waste. So I try to adjust to what I take. I tell my husband, I bought this and this is at home, make sure [to get] something different.”

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**People use their resources strategically** and optimize for value.

Participant

“You know, I shop the sales so I know King Soopers has such and such on sale and I’ll get one item there and Whole Foods has such and such so I’ll get my one item there.”

Researcher

“And how do you find out about what’s on sale?”

Participant

“Well the internet for both of them. It's easy.”

Researcher

“Do you look up their ads online?”

Participant

“Yeah, they both have websites.”

Researcher

“What does that look like? Do you check every week or what is that process like for you in terms of looking that information up?”

Participant

“It's kind of like, whenever I think I’m gonna be stopping there.

I mean, it's because of my disability I can’t go out of the apartment every day. You know, so I usually try to coordinate it if I’m going to go to the [food pantry], then I’ll try to stop at the store after that on the way home so that I don’t have to go out another day. Or if I have an appointment – you know I’m dressed – then I’ll stop at the store after the appointment to see if I can get something I may need.”



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Researcher

“Is it pretty abnormal for you to eat out?”

Participant

“Yes, but sometimes I do. Larkburger does an adults buy, kids eat free on Mondays. So we will go to Larkburger on Mondays sometimes and I'll really try to charm the person behind the counter – smile and be very nice. Hoping that they will just charge for me and let the two kids eat for free. Or I'll try to get someone to come who will pay for their meal so that both kids get free. Because it's only one child per parent. So sometimes that works, sometimes that doesn't.”

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“It really takes a lot of planning. You can't be lazy about it. You can't just come home and order take-out. So I would plan ahead to make sure I knew I was going to be eating at home the next three nights. Or at least have lunch and two dinners and something or some combination of that. But, yeah, it always took a lot of planning to make sure it wasn't going to go to waste. That's the worst thing, having the meal prepared and then not eating it.”

“I guess that's been a key – learning, looking up online how to use herbs, so then I can make food that maybe is a little more plain or less expensive taste better because I can buy, spend 2 bucks on herbs and really dress it up. But I know it's not inherent how to use those. Like how do you use tarragon? I looked it up, it's great in eggs. So I use that in scrambled eggs. So that's been very helpful about feeling like I'm not missing out.”

**They optimize** for convenience and time -

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Researcher

“How often do you kind of fill in what you get from [the food pantry] with other places?  
Like what does that look like?”

Participant

“Pretty often. Well I get 400 dollars in food stamps and, you know, I ... what I get at the [food pantry] is, like, I’m a single mom, I don’t have a husband to cook for and I want to do meals for my kids, but I mean on Tuesdays and Thursdays I have school in the morning and then I work after. And my hands hurt and I’m tired. So when I go to [the food pantry], the things I look for are those pre-made items. Right? And so, you know, Sprouts does like shells and cheese or, you know, things that are pre-made. And then I just heat them up and serve them for dinner. When I run out of those things or when I’m feeling kind of indulgent I generally go to Sprouts. It’s at the end of the road.”

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**They advocate** for themselves -

“I had to fight with those people [at the grocery store about WIC limitations] like, ‘What’s going on, why cannot I buy [this item] because you guys are out?’ They said they said that this kind of bread or something like that. Oh that was for the milk, 2 percent milk. If the store brand 2 percent is out, you have to honor it with any other milk, that’s what the system is. That’s what the WIC nutritionist told me. Walmart [honors] that. But for [this store], ‘We are [this store], and what others are doing, we cannot do.’ she said. You are not doing good customer service. I was really fighting with that. I was so frustrated, I would never go there again. I had 8 dollars of fruits and veggies checks. I used to get food stamps at that time and she said I cannot get bananas in fruits and veggies. Why can I not get bananas? You have to get specific. ‘No that is not true, you are not trained well.’ 8 dollars of fruits and veggies, I can get anything. Any fruits, any veggies except cilantro. Cilantro, they don’t allow you because that’s not considered the fruits and veggies. I know the system, I want to talk to your manager. I didn’t really want that guy to wait for me while fighting. I was soooo frustrated to a point that I would just bust. So I argued with them. I bought that banana. I said, ‘I’m gonna pay the difference from my food stamp card’ – the difference was about 80 cents or something, and I said I would do that with my food stamp card. What she ended up doing is like, she charged me a whole 8 dollars and 80 cents on my food stamp card and she didn’t ... ohhhh that was the most frustrating time. Since then I just hate to go there. My husband said another time, he went to do the WIC shopping and they treat you so badly as if you get free money, as if you, when you have a WIC check they treat you terribly. No matter what you guys think about shopping at Walmart, I don’t care. [They, at least, know how to process WIC and SNAP].”



## They get creative with equipment -

“Okay, lack of equipment, one is – I was on this raw diet for so long that I gave away most of my pots and pans so I don’t have much to cook with. I have one medium sized, two quart saucepan and it’s hard to cook much quantity in that. And it’s also hard to, if I’m getting cooked foods from the [food pantry]. If I cook one thing, it’s hard to have enough time on the same day to wash it and cook another thing. So for example, recently when I went to the [food pantry], I decided I would settle on getting potatoes to make up – supposedly for my body type, my height and things like that – I need 1200 calories a day to maintain my metabolism, so I’m not getting 1200 calories a day in raw produce. I figured I would compensate by potatoes. And then also, I save all my vegetable scraps like the tops of carrots and stuff like that and I boil broth because I can’t really afford tea bags. But it’s something to drink. Well, anyway. So I have this one medium size saucepan so I’ll be cooking my potatoes every day in the saucepan and then I won’t have time to wash it and simmer broth for hours.”

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Participant

“And that’s what I had to cook it with.”

Researcher

“There’s the can opener, so tools you But if you all those

Participant

“Yeah and knife that

That’s what I used to cut the

Researcher

“And how did you do that?”

Participant

“You know what, I actually cheated because I had my paring knife, so I used the paring knife. I’ve done it that way before.”

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here’s the need right? don’t have tools ...”

that’s actually a butter has a little bit of teeth. sausage.”



**They stock up and**

**plan ahead -**

Participant

“So then also, quite random, like end up with. So with what you get,

Researcher

“Have you found put together because you handle that?”



with the [food pantry], it's you end up with what you you have to just make do you know?”

that challenging to kind of meals or plan ahead don't know? How do you

Participant

“I mean the thing that are kind of pre-made, pre-cooked meals. I go for that. You know, that's what I try to grab and, you know, I get cans of spaghetti-o's”

is that I just go for things

Researcher

“And how do you plan your meals then? Because you go and the food pantries, they have what they have. You can't plan ahead?”

Participant

“Yeah, no, no, no.”

Researcher

“How do you adapt to that?”

Participant

“Oh how do I adapt? So for example, like rice, we cook every single day. We buy a big bag of rice. We do, I do not want to skip rice. If they have rice, I take it all the time, because rice is the [thing we use the most]. So we make rice and then we make lentil or pea soup or any other kind of soup every single day. The one [lentil] that I buy from and keep it in stock just in case if I'm out of veggies and everything. So that one, dal, we call it dal, then we have to have dal with rice and dal goes with everything. And it depends, it depends on the vegetables I have. If I have got spinach, then I cook spinach as a side. And then if I've got asparagus, then I cook a side of asparagus. I adjust according to seeing. We do not plan ahead, it's very hard.”



“This is, you know, this is Wednesday right? It’s [food pantry] day, so the fridge is pretty empty, there’s old yogurts or leftover milks. My friend brought me this leftover soup. This is all, I mean, this is, there’s a lot of beer, that’s my boyfriend’s. The vegetables that I have, like the lettuce I have now is getting kind of gross. You know? That’s what I made the kids last night. This is gross and old, that’s [food pantry] stuff. Like if I was to clean this out, there actually would be just the wine I had last night, milk, the yogurt’s probably old, this is all just old. This fridge would probably be fairly empty. I did buy this yesterday, so, but if I was to clean this out, which I will do when I do the [food pantry] run today. When I bring the food back, I get rid of all the old stuff. But this would be pretty much an empty fridge except for condiments, beer, and just you know milk and a few things. But it’s [food pantry] day. So if I don’t go to [the food pantry], it’s slim pickings. But, the freezer is very stocked with all kinds of stuff, so I would be able to probably come up with something out of the freezer to feed my kids. Like there’s enough shit in this house I could easily come up with stuff. It’s just the lazy stuff, the like, you know, the stuff that’s – the potato salad is old now because it was at expiration when I got it at the [food pantry] last week, but this kind of stuff is you know. I could come up with something easily enough, but on [food pantry] day, it’s empty. And I can tell, like I – it’s Wednesday. Look, the fridge is empty because Wednesdays and Thursdays are [food pantry] days.”

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Researcher

“Have you missed meals or anything because you didn’t have enough food?”

Participant

“Nooo, no, I try not to do that. I try my best not to do that, just in case, if I’m out of milk really, I buy, I get the one that is in the cardboard. I have it stocked it up. There was a situation where we did not have a solution to go to the market or anywhere to get the food and milk was totally out, this was before my dad and mom came. What should I do? I do not have a way. Then I remember that I have stocked it up and then I open that one for [my daughter]. Even if there is nothing, milk is such an important thing for my daughter that she cannot live without milk.”

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## What is Meant by Leveraging Community?

As we've discussed at length, when getting food is difficult, barriers to food access are plentiful and the process of getting food can be exhausting, painful, and demoralizing. One thing that most people enjoy about getting food, even when getting food is difficult, is enjoying food with other people. This includes acquiring, preparing, and eating food. It also includes leveraging relationships with family, friends, neighbors, and community to make it easier or more enjoyable to access food.

## What Does That Look Like?

Participants reported sharing and preparing food for other people and their families, sharing the resources required to get food, and sharing the work of getting food. One participant talked about how she and a friend go to the food pantry together regularly because it's more fun to go together. One participant's dietary restrictions didn't allow them to drink the milk allotted to them at the pantry, so they would give that milk to a neighbor who will sometimes cook for them. Generally, people find mutually beneficial, relational arrangements that help them, help their family, friends, and neighbors, and generally make them feel good.



## They share and exchange resources -

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Researcher

“And one thing that you mentioned the last time we talked was that sometimes you’ll give um, if you have extra food there’s other people you’ll give it to. What does that look like?”

Participant

“Well, my neighbors across the street have three boys, but they’re the same age as my girls. He’s a stay at home dad and he’s a surfer and he’s really cute and we are friends, and back before all this when I was pregnant and I had, you know, an easy life of being a stay at home pregnant person, he and I would hang out all the time and our kids would play. So my kids go to their house, their kids come over here and they help me. Because I’m a single mom. So they really, really help me. Like, if I have – the kids are out of school and I have class, my kids can go over there. So, they have three boys. And so sometimes when I go to the [food pantry] I’ll, they’ll be like, ‘just take as much as you want.’ Like a case of yogurt or, and I’ll just because it sort of makes me feel good to kind of get this, I’ll grab a case for them and I’ll send it over to them. You know? And that’s sort of my like, a little bit of a thank you for helping me with my kids, here’s an extra gallon of milk. Because milk’s expensive and you know, I know kind of like every week I’m gonna get a gallon of milk from one [food pantry] and a gallon of milk from the other. And sometimes we don’t drink it all and I’ll have a gallon from last week and I get three gallons of milk and I can’t store it all and I’ll send one over to them.”



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“In fact, I survived a year of homelessness because of the homeless. They showed me where to go and how to survive.”

### **They carpool and get food together -**

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Researcher

“Yeah, I was curious that you mentioned that you used to drive with a friend to [the food pantry], and um, do you drive with anyone now, or give rides to other people, has that ever happened?”

Participant

“Yes. Currently I am bringing someone with me. People who also go there.”

Researcher

“Are there people from your neighborhood or how do you connect with those people?”

Participant

“They are relatives and neighbors. We call each other and we agree on going on a certain day.”

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““ She’s a [food pantry] person and sometimes we’ve actually gone together like, ‘hey wanna go to the [food pantry]?’ ‘Yeah, let’s go.’ And we’ll drive over there and it’ll be like a social thing for us.”

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Researcher

“Yeah. Are they people that you know, is it like a group activity, like a social activity, kind off?”

Participant

“Yes, well, most of the people I already know, they are my neighbors and such. So that's why I try to go.”

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### **They watch each others’ kids -**

““ Before that, what I used to do, I have a friend, sometimes once in a while she comes to tell me like, hey do you need some babysitting? I can watch your kids while they’re asleep and while you go get food.”

**They eat together -**

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Researcher

“How important is it for you to share meals as a family? Do you get together around the table or each one of you do your own thing?”

Participant

“Yes. I mean we sit together.”

Researcher

“Is that important for you?”

Participant

“Well, yes. I like to cook my own food. Mmhmm, and eat it.”

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**They teach each other** about food resources and take turns getting food -

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Researcher

“Yeah, how often do you go to [the food pantry]?”

Participant

“I do every week. But – every week. I tell my parents even, I taught my dad how to do that shopping. I just leave a note to the [the food pantry] people so that they would just see what I need. So they help him.”

Researcher

“So, he can go instead of you?”

Participant

“Uh huh, yeah.”

Researcher

“And you also mentioned that sometimes you are the one who goes and other times your husband. He goes to the store and the food pantry?”

Participant

“Yes. Sometimes I work on Sundays. He is off but yeah we go. Sometimes he needs flour tortillas or bread for next week's lunch, then he goes. He goes on Sundays when I am at work. That's the only day he doesn't have to work during the mornings.”

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““And I went to [the food pantry], because someone told me that I should look into [it].”

““I was fortunate to meet a very good friend through the grad program. We started the same program at the same time and she has very similar food preferences to me. Trying to always eat whole fresh foods and not, you know, anything packaged. Low sugar, things like that. So we've actually been able to cook meals together and kind of bond over that and then we'll package the food up and go to our respective places. So that's been nice financially and socially. That's been a more recent development, but quite lovely.”

Even when getting food is difficult, people enjoy food, and especially enjoy food together. For most people, the process of getting food is more enjoyable with friends, family, and neighbors.

## Conclusion

It is important to not confuse how people make do, make the best of a situation, and find joy and enjoyment in food despite difficulties, with actual solutions. It is important to remember that repeatedly having to overcome barriers has a real emotional and physical and emotional impact on the lives and well-being of people.

For a list of recommendations of how you can play a role in supporting individuals experiencing food insecurity, please see the [Recommendations](#) section.





# Recommendations

The following is a set of recommendations based on a reader's proximity to these issues, whether you are a member of the general public or whether you are engaged in policy, philanthropy, governmental agencies, and/or direct service.

The list is not exhaustive or complete. The items on it represent relatively accessible early steps toward increasing food access and food security, and steps that take more comprehensive steps toward a more just food system.

So much work has been done towards these ends, and so much work remains.

## General Public and Communities

If reading this report drives you to action, below are some simple things you can do to begin to increase food security for people in your community. Importantly, communities have been doing their own work supporting one another's basic needs for as long as there have been communities. Building relationships, community, and networks of mutual support with other people in your community increases food security without the involvement of legislators, governments, or nonprofit agencies.

1. **Financially support and volunteer for organizations that implement community-led programs and organizations working towards systems change.** In our research, we found that in organizational models in which staff and volunteers lead and manage programs, program users can feel alienated or that their needs are misunderstood. Community-led programs involve people from a program user's community leading and managing programs, for example, making decisions about the way the program operates, implementing those decisions, receiving and displaying food, welcoming program users, and reaching out to neighbors about issues impacting the wellbeing of the community. People from the broader community can support this community-led work with financial donations or by volunteering in other parts of the program. For example, Boulder Food Rescue couriers volunteer to deliver food while volunteers in the community redistribute it amongst their neighbors.
2. **Financially support and volunteer for organizations working towards systems change.** Organizations that provide food for people are meeting an absolutely critical need. Most participants tied this food to their survival. Though important for survival, these services do little to change the systems that are causing people to need services in the first place. Organizations that do this might advocate for systemic change through legislative policy advocacy, voter engagement, leadership development, community organizing, or still other tactics. For example, in Boulder, EFAA, our local family resource center, has advocated for affordable housing policies locally in addition to providing program users with a number of basic needs assistance services like food and housing cost support.

3. **Vote for policies and public officials that will protect and support the interests and livelihoods of people most impacted by food insecurity, including people with low income, Black and Indigenous people of color, immigrants, seniors, LGBTQ people, people living with disabilities, and the unhoused.** Voting for policies and public officials that support these groups often go beyond voting for measures that are directly related to food or food access. This might look like voting for a living wage ballot initiative in an upcoming election, or voting for a candidate who advocates for reversing public charge guidance that ties immigration privileges with wealth or never having used a public benefit.
4. **Challenge poverty narratives that reinforce shame and stigma.** We found that shame and stigma had a considerable influence on people's experiences while using the charitable food system or governmental food benefits. In fact, these experiences can influence whether people are willing to use services at all. Challenging and changing that narrative, to begin with, means interrupting poverty narratives, racism, or classism when they comes up. For example, you might overhear a family member, co-worker, or acquaintance say something like, "If people worked harder, they wouldn't have to go to the food bank." It is useful to have a few phrases memorized for such occasions, like "I didn't realize you felt that way." or "Hold on, I need to process what you just said."<sup>49</sup> These phrases are also useful for interrupting racism (which we know impacts food access) and were created for that purpose. After simply interrupting the narrative, you may be able to have a substantial conversation about the actual root causes of issues like poverty and food insecurity.
5. **Fight for class and race equity and actively challenge racism and classism.** Food insecurity is inseparably tied to class and race, particularly race. Because these are complex and systemic issues, we have to think beyond food to achieve food justice. In addition to interrupting discriminatory and hurtful comments, it's important to interrupt systemic racism and classism. This might look like [financially supporting any of these groups](#) working towards Black food and land justice, or groups working towards Indigenous food justice like this [one](#) or a mutual aid project like this [one](#). In this moment in history, it might mean participating in a Black Lives Matter action. Communities of color and poor people have been organizing for their own security and wellbeing for centuries. There are numerous ways to support them or to join your community as it works to support its own wellbeing.

## Policy Makers and Influencers

We found that people's access to food is impacted by far more than the programs they use to access food. The access people have to food and other basic needs is the result of our historical and present economic and social systems, and is upheld by legislation and policy. For the same reason, meaningful social change is codified, bolstered, and protected by legislative policy.

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<sup>49</sup> Privilege to Progress. (2020 July 4) *Racism Interrupter*. Retrieved from <https://twitter.com/DarkLiterata/status/1279599843909029888>

Based on our research, we recommend legislative initiatives in line with the following priorities:

1. **Expand SNAP benefit amounts, particularly SNAP minimum benefits.** We found that people who qualify for SNAP often decide not to apply because the amount of SNAP they receive is small relative to the amount of work and level of personal information the application requires. This is particularly true for low-income seniors, many of whom live on small fixed incomes and receive the \$16 per month minimum in SNAP benefits. Raising benefit amounts would make the work and information sharing required to apply more reasonable for people. This also includes advocating for reducing barriers for vendors to offer payment options with SNAP, specifically in direct farm-to-consumer models, like CSAs, or produce stands, people should be able to use SNAP benefits to access local, nutritious, high quality produce-- or something that gets at SNAP availability. Boulder County, for example, has made important steps towards making SNAP more accessible and useful at the local farmer's market through programs like Double Up Food Bucks and Fruit & Veg, which allow participants to double their SNAP amounts at farmer's market vendors and or to access vouchers specifically for fruit and vegetable purchasing.
2. **Bolster basic needs supports and economic protections for low income people and people disproportionately impacted by food insecurity.** People of color, particularly Black and Indigenous people; people living with disabilities or limited mobility; seniors; LGBTQ people, particularly transgender people; and women are disproportionately impacted by food insecurity and economic insecurity. Because food insecurity is tied to income and other basic needs, legislation that raises wages, increases and protects access to food, employment, housing, and healthcare, increases people's food security. For example, current minimum wages are poverty-level wages that do not allow people access to their basic needs. Legislation that raises the minimum wage to an amount that allows people to meet their own basic needs (often called a living wage) would allow more people to attain food security and other basic needs security.
3. **Reverse and correct legislation and policy that excludes or negatively impacts people according to immigration status.** Some participants and many community members in Boulder avoid using public benefits for which they qualify because of fears related to their immigration status. These include concerns about how information gets stored and could be accessed to lead to deportation or limits on future citizenship. Legislators could help by reversing recent public charge rules or guidance that restricts or scares immigrants from using emergency food services and other public benefits. Correcting the harm done by hostile immigration policy, as it relates to food access, might also look like enacting strong legal assurances that the Department of Homeland Security (DHS) and Immigrations and Customs Enforcement (ICE) are not allowed to access anyone's personal information through the basic needs or public services they use.
4. **Supports financial and land-based reparations for groups that have had land or labor forcibly or coercively taken from them.** Policies that allow and encourage race-based land

and wealth consolidation have prevented nonwhite people, particularly Black and Indigenous people, from acquiring land and building wealth. When combined with other racist policies and practices (for example, in housing and employment), this makes achieving the economic security typically required for food security difficult. Reparations mean different things to different people, but the most substantive, actionable conversations take place around legislative items that direct sizable financial resources to correct the wealth gap created by race-based land and wealth consolidation. These are commonly called “reparations” or “remuneration.”

## Foundations and Funders

Foundations and funders have a hand in determining the priorities of the charitable system by determining what types of programming gets funded. For increased food security and a more just food system, we recommend that foundations and funders reserve and allocate funding for the following priorities.

1. **Support community-led and community-initiated work.** For the same reasons we recommend individuals support community-led and community-initiated work, we recommend foundations and funders do the same. Communities have been supporting their own health and well being for as long as there have been communities, and best know how to meet their own needs. As we found in our research, such work has been fueled by ingenuity and community itself, but people cannot be expected to use creativity and resourcefulness to pull themselves out of poverty or food insecurity. These are systemic conditions and the result of historical and present-day resource consolidation. It's way past time for resource holders to meaningfully resource the long established work of community self-support. This is useful the form of financial support comparable to how they currently fund non-profit agencies. This might look like establishing funds that go directly to communities and community-led efforts. It might look like funding nonprofits that are embedded and trusted in communities to provide resources (monetary, material, etc.) and other requested support to communities while those communities determine and implement the use of those resources.
2. **Support systems change and racial justice.** Since poverty is a systemic condition resulting from historical and present-day resource and power consolidation, it is important to focus on systems change in order to meaningfully change poverty and its worst symptoms, which persist and continue to deepen despite decades upon decades of charitable efforts and government interventions. While we are not suggesting that foundations stop funding nonprofits that provide direct or basic needs services, or that nonprofits stop providing basic needs support while there is still a tremendous need, we are suggesting that foundations also fund systems change and racial justice work, and that funders use their resources to direct nonprofits to engage in systems change work alongside basic needs services. This

might look like funding nonprofits specifically to build capacity around systems change work or applying racial justice criteria to funding decisions.

## Government Agencies

Many public health agencies recognize that poverty, racism, and food insecurity result in public health crises. They play an important role in supporting initiatives that help people access food and making those programs more accessible to people. The following are some tactics that public health agencies can begin to use to increase food access for people.

1. **Provide education for retail food agencies around SNAP and WIC.** In our research, we found that people consistently encountered issues with using government food benefits at retail establishments, which can prevent them from getting food, make the process take extra time, and leave them feeling stigmatized and marginalized. Providing education might involve developing a training program, working with food retailers to ensure all staff receive that training, and then conducting regular audits of training and proficiency.
2. **Support programs specifically for people who don't qualify for SNAP or WIC, or for people who get very small amounts of benefits.** Many people who can't afford groceries are ineligible for SNAP. Most commonly, this is because their income is slightly over the qualifying limits or their immigration status doesn't allow them to receive benefits (or to feel secure receiving benefits). Public health agencies can mitigate these shortfalls by providing other similar benefit programs for residents. For example, Boulder County Public Health administers a "Fruit and Veg" program which provides coupons for fruit and vegetable processing.
3. **Partner with organizations that implement community-led programs and organizations, especially those working towards inclusive programming and systems change.** We found that, even though public health agencies play an important role in connecting people to public benefits and other resources, using benefits is often accompanied by stigma, fear, and frustration. These feelings and the experiences that inform them deter people from applying for benefits they qualify for. We found that people, especially those who are unsure of which programs will be safe for them to use, trust other people in their communities for service recommendations. For these reasons, it's useful for public health agencies to partner with groups that are trusted in communities, particularly groups that are community-led.

## Nonprofit Service Providers

A number of participants credited nonprofit service providers with their very survival. Participants expressed gratitude for service providers while also offering some critiques of the services they provide. The following are some recommendations grounded in those critiques.

1. **Build services that are relational, not transactional.** In our research, people identified wanting to contribute to the services they used and not wanting to be “a taker.” People felt frustrated with having limited input or involvement with the programs they use, as well as frustration with the transactional nature of food assistance services. In this context, “transactional” refers to a service focused primarily on a material return (food) and meeting short term goals. It is characterized by maximum output efficiency (feeding the most people or distributing the most food), rigid requirements, rules, and a hierarchical structure of leadership and implementation. It might seem counterintuitive that interactions with case managers or volunteers often exacerbate these frustrations rather than mitigate them, but multiple participants noted that this is the case. In other words, for program users, relationships within a transactional system still feel transactional. In this context, “relational” refers to a service that is focused in relationships and people’s overall well being.
2. **Service providers can move towards more relational services by involving people as contributors to programs as well as users of the program.** They can work to meaningfully include program participants at every level of the organization - volunteers, decision makers, board members, fundraisers, and staff. In addition to helping build authentic relationships based in collaboration, this involvement improves programs because it garners direct involvement from participants who best understand how programs can and should work. For more information on building more relational, participatory systems, read Boulder Food Rescue’s [Participation Framework](#).
3. **Allow people more choice, power, and control in the food systems they use.** Participants consistently expressed frustration at a lack of choice, power, and control in the food systems they use. As alluded in the recommendation above, this extends to lacking meaningful opportunities for involvement and decision-making, but also includes having limited food choices. In addition to building more relational systems and opportunities for participation, service providers can allow people more choice in their food selection. To implement more choice, present direct service food programs like grocery stores, direct more resources to food quality control, implement shared budgeting and food ordering, and eliminate practices in which a volunteer or staff member accompanies a client as they select food.
4. **Enact or revise policies and procedures so they communicate trust.** We found that many policies and practices communicate a lack of trust to program users. These practices might seem necessary to organizations and are often well-intentioned. For example, participants identified frustration with the frequency and extent of verification they had to provide, with being accompanied by a volunteer or staff member while they used a program, with otherwise having their selections monitored and regulated, or with being told to wait to use a program in a specific place when a waiting room wasn’t available (in their car, in a line, not in a line, etc.). Participants associated all of these practices with a lack of trust. Participants identified that these policies led them to feel that the agencies they use don’t necessarily trust them to know what was healthy, to know how to cook, to follow the rules of



the program, to behave appropriately, to “actually” need the program they use, or to be in close proximity to other program users while they wait to use the program. In addition to feeling alienating, these practices make it harder for participants to use the program. In order to mitigate this, programs might eliminate the practice of accompanying or monitoring participants while they use a program, internal verification requirements, and rules or practices that direct a participant’s behavior. This might feel intimidating and overwhelming, but many organizations and programs are revising these practices. For example, Metro Caring in Denver requires no verification and uses guidelines on what to take for a family of a certain size rather than issuing quantity restrictions by food type.

5. **Work to advance equity through systems change work as well as direct service initiatives.** As noted above, nonprofit organizations are providing literally life saving services and many participants credit direct service programs with their survival. However, direct service programs, for the most part, aren’t structured to address the systemic issues creating and perpetuating hunger and food insecurity. As a result, direct service programs aren’t succeeding in mitigating some of the worst symptoms of food insecurity: people are still experiencing some of the worst negative physical and emotional impacts *despite* the availability of direct service and government benefit programs. According to Colorado Blueprint to End Hunger, experiencing even marginal food insecurity has the impact of being 14 years older, “This means that a food insecure 65-year-old will have daily living limitations similar to a 79-year-old.”<sup>50</sup> It shouldn’t be this way and it doesn’t need to be this way. Direct service agencies, in addition to providing basic needs support, should leverage their relationships with the community to organize for systems change, and support them towards more political power and increased personal wellbeing. This might look like organizing communities for a local ballot initiative that the community wants passed, organizing communities to host their own community-level food distribution program, or registering program participants to vote.

## Thank you for your interest in getting involved.

Please share these resources with your local elected officials, organizations you may be a part of, coworkers, friends, and/or family members.

You can contact Boulder Food Rescue for questions about these recommendations or this report by emailing [info@boulderfoodrescue.org](mailto:info@boulderfoodrescue.org).

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<sup>50</sup> Colorado Blueprint to End Hunger. (2018). *Colorado Blueprint to End Hunger: A Five Year Plan*. <https://www.endhungerco.org/the-report>



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# Glossary

**Barriers:** Barriers are what gets in the way of food access or makes food access more difficult. They are complex, overlapping, and tend to amplify one another.

**Charitable food:** Services offering no cost groceries for off-site consumption or free meals prepared for consumption on site at various community-based locations. A brick and mortar location in which people procure no cost groceries from charitable organizations are commonly called **food pantries**. **Meal programs** may be identified in several ways, including as ‘soup kitchens’ or “emergency kitchens.” Food pantries and meal programs frequently obtain food from larger regional organizations known as **food banks**, which are nonprofit organizations that collect and distribute food to hunger-relief charities and act as storage and distribution depots for smaller frontline agencies that provide food directly to people.”<sup>51</sup> Please see [food pantry](#) entry to understand how we used the term in this report.

**Food access:** the complicated process that includes acquiring, transporting, preparing, and eating food. At every step of the food access process, people encounter barriers.

**Food apartheid:** Refers to the human-created system of segregation which consigns some people to food scarcity and other people to food abundance. Food apartheid is a more encompassing term than “food desert” as it highlights that lack of availability of healthy food disproportionately affects communities of color and acknowledges that allocation of and access to food resources is intentional, not accidental or a matter of oversight. According to Karen Washington, who coined the term, “‘Food apartheid’ looks at the whole food system, along with race, geography, faith, and economics.”<sup>52</sup>

**Food insecurity:** the lack of access to nourishing, culturally-appropriate food in sufficient quantity and quality.

**Food pantry:** A brick and mortar location in which people procure no cost groceries from charitable organizations. Some program users and most members of the public use the terms “food pantry” and “food bank” interchangeably. In participant quotes or direct analysis or explanation of a quote, we use the term “food pantry” to reference a charitable service in which program users use a centralized location to procure groceries. We changed participant quotes to say “food pantry” even in cases in which they said “food bank” or identified a particular food bank or food pany in the quote. We did this because 1) food banks often house programs in which

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<sup>51</sup>Waxman, E., Joo, N., & Gonzalez, D. (2019). Who Is Accessing Charitable Food in America?. *Urban Institute*. [https://www.urban.org/sites/default/files/publication/101411/who\\_is\\_accessing\\_charitable\\_food\\_in\\_america\\_final\\_4.pdf](https://www.urban.org/sites/default/files/publication/101411/who_is_accessing_charitable_food_in_america_final_4.pdf)

<sup>52</sup> Brones, A. (2018, May 7). Karen Washington: It’s Not a Food Desert, It’s Food Apartheid. *Guernica*. <https://www.guernicamag.com/karen-washington-its-not-a-food-desert-its-food-apartheid/>

users select actual groceries, and refer to these as “pantries” or “pantry programs” 2) the terms are sometimes used interchangeably and 3) in order to preserve agency anonymity as much as possible as a professional courtesy, especially because the agencies leveraged their relationships in order to recruit participants in order to support the project and to get feedback to improve their services. If we were conducting summative analysis about food banks and food pantries, we used both terms.

**Food rescue:** The practice of gleaning food that would have otherwise gone to waste from restaurants, grocers and other food establishments and distributing it to local agencies and individuals. Also, an agency that procures food solely or primarily from such methods.

**Government benefit program:** Programs like **SNAP** or **WIC** (definitions below) that allow users vouchers or direct debit values towards groceries.

**Invisible work:** all of the work and emotional labor that goes into managing life that is unpaid, and/or never fully accounted for.

**Negotiable expenses:** basic needs expenses that people cut costs around in order to purchase another basic need. For example, people buy less food or buy less nutritious food to decrease food expenses in order to pay for other basic needs like housing.

**Shame:** the feeling of humiliation or distress.

**SNAP (Supplemental Nutrition Assistance Program):** provides benefits to eligible low-income individuals and families via an Electronic Benefits Transfer card. This card can be used like a debit card to purchase eligible food in authorized retail food stores. Learn more: <https://www.benefits.gov/benefit/361>

**Stigma:** the disapproval of, or discrimination against, a person based on social characteristics that distinguish them from other members of a community.

**Standard American Diet (SAD):** modern dietary pattern that is generally characterized by high intakes of refined, processed and packaged foods. It is also typically high in sugar and animal-based foods. Plant-based foods make up a very small portion of the SAD.

**TEFAP (The Emergency Food Assistance Program):** a federal program that helps supplement the diets of low-income Americans, including elderly people, by providing them with emergency food assistance at no cost.<sup>53</sup> It's often accessed through food banks.

**Trauma:** a deeply distressing or disturbing experience.

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<sup>53</sup> US Department of Agriculture. (2020, January 6). TEFAP Fact Sheet. USDA Food and Nutrition. <https://www.fns.usda.gov/tefap/tefap-fact-sheet>

**WIC (Women, Infants and Children):** provides federal grants to states for supplemental foods, health care referrals, and nutrition education for low-income pregnant, breastfeeding, and non-breastfeeding postpartum women, and to infants and children up to age five who are found to be at nutritional risk. Learn more: <https://www.fns.usda.gov/wic>



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