



# Food for All:

## Lessons from two community demonstration projects

### A FOOD SECURITY PROGRAM

#### Are you confident everyone in your local area can choose to eat well?

It's an important question because there is a fair chance that sections of your community do not always have access to enough food or choices for healthy eating.

Those most at risk of not eating nutritious food include: people with low or no income; and those who live in poor quality or insecure housing. Often those groups who are most affected are Aboriginal and Torres Strait Islanders, refugees, single parents, the chronically ill and disabled, people living in remote or isolated areas, and young unemployed people.

In this document we provide two examples – the Braystone Project and the Café Meals Program – where local action created lasting solutions. Both projects were selected from several strategies implemented in two community demonstration projects with grants from VicHealth and the Victorian Department of Human Services in 2001.

The information in this document is compiled from a range of sources, in particular the one year follow-up evaluation conducted by RMIT. It's designed to get you thinking about possible activity to create more access to food for healthy eating. It shows that local sustainable action is needed to reduce the barriers that make it difficult for people to have access to food for healthy eating. Incorporating food security into the Municipal Public Health Plan may be a place to start.

#### A definition of food security

*Food security is regarded as the state in which all persons obtain nutritionally adequate, culturally acceptable, safe foods regularly through non-emergency resources. Food security broadens the traditional conception of hunger, embracing a systemic view of the causes of hunger and poor nutrition within a community while identifying the changes necessary to prevent their occurrence. (Adapted from the Community Food Security Coalition 1995.)*

#### Case study 1:

##### The Braystone Project

Provides a shop and delivery service for fresh fruit and vegetables in the western suburbs of Melbourne.

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#### Case study 2:

##### Café Meals Project

Subsidised meals at a reduced price are available from participating cafes to homeless people or people at risk of homelessness in the City of Yarra.

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# Case Study One

## The Braystone Fruit and Vegetable Shop and Delivery Service, WestNet Incorporated

### Food insecurity in Maribyrnong

#### *Characteristics of City of Maribyrnong:*

- High levels of public housing.
- Highest unemployment rate in Melbourne.
- Around 45 per cent of households earn less than \$26,000 per year (compared to 31 per cent of households in the Melbourne Statistical Division).
- Limited private and public transport to food shops.
- Limited local fruit and vegetable shops.
- Lack of culturally appropriate food in an area where almost half the population is born overseas. (Braybrook and Maidstone.)

The Braystone Project is operated by WestNet, an organisation located in Braybrook that provides a range of pre-vocational training opportunities for people with intellectual disabilities.

Clients working in the shopfront and market stalls improved both life and employment skills, leading to higher levels of confidence and self-esteem. The Braystone Project provided more opportunities for social interaction and WestNet clients were able to contribute to the community leading to increased community understanding and acceptance of people with an intellectual disability.

### How the project works

The Braystone Project provides a shop and delivery service for fresh fruit and vegetables. It was identified as necessary because there are a lack of local shops selling fresh food and WestNet considered the project to be a good opportunity to provide vocational training to its clients that contributed in a very real and measurable way to the needs of the local community.

Fruit and vegetables are purchased from a wholesale supplier. An independent consultant provided essential advice to WestNet free of charge.

**Shop** – the shop is located on site at WestNet in Braybrook.

**Mobile market stall** – fruit and vegetables are taken by van, and stalls are set up at Footscray North Primary School, a high-rise public housing estate in Williamstown, and public housing in Gordon Street, Footscray.

**Deliveries** – regular deliveries of fresh fruit and vegetables are made to a local school, a local café and to meet individual orders from holders of Health Care and pension cards.

**Events** – fruit is prepared and made available at ‘one-off’ local events, such as health promotion days and forums.

*‘There is an absence of local shops selling fresh food – particularly fruits and vegetables – and no outlets at all of this kind in the suburbs of Braybrook and Maidstone.’*

(Stakeholder, Maribyrnong)



## Resources

### Funding

- \$26,000 was allocated to WestNet from the Maribyrnong City Council. This was spent on infrastructure including shop set-up, building the cool-room, and purchasing scales and a cash register. Some further cost was also covered by WestNet, including carpentry work, lifting equipment and installation of a sink.
- WestNet estimates that it will provide about 50% of the budgeted operation of the Braystone Project for the period 2003-2005 with the other 50 per cent coming from the produce sales (evaluation report reference) *50% = approximately \$50,000–70,000.*
- WestNet provides continuing 'in-kind' support, including a bus to serve as the mobile market, together with registration, insurance, maintenance and fuel costs. The cost of overheads for the shop, including property rental and utilities, are also covered by WestNet.
- The project is included in WestNet's three-year strategic plan and WestNet will continue program funding through 2005.

### Staffing

- WestNet provides 1.4 full time staff, six occasional volunteers.
- Between five and seven WestNet clients work at any one time in the shop; approximately 22–24 clients involved in total (representing around 20 per cent of WestNet's clients).

## Roles

### Maribyrnong City Council

- Ran a forum in partnership with community organisations to identify issues.
- Advocated around food access.
- Helped develop the concept and support within council for an integrated approach.
- Managed and distributed VicHealth/ DHS funding.
- Facilitated necessary permits for approvals.
- Facilitated food access into council policies and Municipal Public Health Plan.

### WestNet

- Implemented the project.
- Managed logistical issues.
- Provided timetable of staff support for clients staffing the shop.
- Collected data for evaluation.
- Integrated project to core organisation activities.

### Other support

- The Regional Health Promotion Officer from the Western Region of the Department of Human Services promoted 'food security' as a common concern in regional, local reference groups and planning processes and linked WestNet to supportive organisations and individuals.
- The Western Regional Health Centre provided ongoing support to the Braystone Project, for example through promotions, purchase of produce, linking WestNet to local schools and to

community development workers, and assisting with developing marketing materials. WestNet also benefited greatly from the support of many individuals, organisations and community groups including schools, social workers, local businesses, church groups and emergency food relief providers.

## What makes the project sustainable?

- Viable markets were identified.
- Organisations involved were committed to embedding food access into current policy and strategy.
- A further incorporation of WestNet into the network of community and health organisations in their area.
- Strong advocacy from council and other partners.
- Embedded food insecurity into local plans such as the Municipal Public Health Plan.
- WestNet made the program part of its core business and allocated appropriate budget.
- Measurable benefits.
- Established a firm policy for the project, a business plan and ongoing monitoring and review processes by employing people with necessary skill mix.
- Embedded into policy and core business of community organisations.
- A carefully selected project officer with relevant skills and commitment.

## Achievements

### Outcomes for:

#### Customers/community

- Improved access to affordable, nutritious and culturally appropriate meals by making food available where people live.
- Relief from isolation and improved integration into the community particularly for residents of the high-rise flats.
- Access to food available through emergency relief (excess food from the Braystone Project is distributed to a food relief program in Sunshine).
- Increased awareness of healthy eating among some residents in the high-rise flats and primary and secondary students.
- Potential long-term public health outcomes, through improved diet.
- The Project encouraged interaction among local residents at the Gordon Street flats and Floyd Lodge with the mobile van delivering fruit and vegetables twice weekly. The market stall provides a focus for social activity and interaction.

#### WestNet clients

- Building on their literacy, numeracy, money handling, communication and computer skills.
- Improving health by raising their awareness of healthy eating and hygiene.
- Promoting acceptance of people with an intellectual disability in the community.
- Increasing their confidence in social interaction, which has the potential to support increased feelings of self worth as a valued and contributing member of the community. (CIRCLE, p. 29)

#### Food for thought

*“At Williamstown, the social worker for older residents on the estate began using the Braystone market stall visit for a regular ‘Tuesday Luncheon’ that is attended by around 20 to 30 people. The luncheon provides a forum to share and discuss ideas about cooking and recipes and creates a friendly atmosphere in which workers can encourage residents to positively address their problems.”*

(CIRCLE pp. 33-34)

#### The WestNet organisation

- Improved understanding of the processes and importance of community inclusion for their clients.
- Encourages WestNet to undertake more community programs.
- Encourages WestNet and its clients and their families to be part of the wider community, not having just a disability focus.
- Strengthens links between WestNet and other agencies, such as VicHealth, local government, local business, health services and aged care services, which is important for the ongoing development of the organisation.
- Focuses WestNet on services ‘that we can do well’.
- Enables WestNet to address the Victorian Disability Service Standards, in particular the standard that: ‘Each client has the opportunity to develop and maintain skills and to participate in activities that enable him or her to achieve valued roles in the community’.

*Read about the one year follow-up and evaluation of the Braystone Fruit and Vegetable Shop and Delivery Service at: [www.vichealth.vic.gov.au/foodforall](http://www.vichealth.vic.gov.au/foodforall)*

*‘The great thing about the Braystone Project is that it has positive outcomes for everyone involved.’*

(David Walton, Executive Director, WestNet)



# Case Study Two

## The Subsidised Café Meals Program

### Food insecurity in the City of Yarra

- High levels of public housing.
- Yarra has the largest proportion of public housing renters in Victoria, with around 9,000 people or 15 per cent of the population living in public housing.
- Thirty-four per cent of the population lives alone (a major indicator of food insecurity risk).
- Many people live in temporary housing, such as apartments, public housing, rooming and boarding houses with inadequate food storage or cooking facilities.



### How the program works

The Café Meals Program targets people who are homeless or at risk of homelessness and, therefore, lack both access and opportunities to prepare food for healthy eating.

The program provides social dining opportunities in participating cafes that are affordable, easy to access and acceptable to homeless people.

People are referred to the program by outreach support workers, dietitians, community nurses and other support workers. The worker may advise individuals of the program or the client may approach the worker after seeing an advertisement. Clients are placed on a waiting list that is prioritised according to assessed need.

Once in the program, clients are given a membership card that entitles them to access one subsidised meal per day from any of the four participating cafes. The clients present their membership cards at the café and pay \$2 towards a meal valued up to \$8.80. The café staff keep records on forms provided by the program of the dates meals are purchased, who purchases the meal (the client's membership number) and the cost of the meal. This information is provided to the program worker and the café is paid for the subsidised portion of the cost through Home and Community Care Flexible Service Response funding.

Membership cards are valid for six months and clients are then re-assessed.

### Eligibility

According to program documentation, a person is eligible for the program if they:

- are homeless or at risk of becoming homeless;
- find it difficult to prepare their own meals; and
- have no other prepared meal options that are appropriate for them in the community (CIRCLE p. 34).

The Café Meals Program is auspiced and implemented by North Yarra Community Health Inc (NYCH) in partnership with the City of Yarra. NYCH is a community health service that provides a range of health, aged care and mental health services as well as counselling and case work, youth, outreach and needle exchange services to people in the inner city suburbs of Carlton, Collingwood, Abbotsford, Clifton Hill and Fitzroy.

### Food for thought

The program, say stakeholders, provided:

*“reliable access to food; a socially acceptable option which, additionally, enables the possibility of ‘dignified eating’; ‘normalising’ eating; encouraging clients to ‘get out of their rooms and into the community, talking to people and socialising again’.* (CIRCLE p. 34).

## Resources

### Funding

- Established as part of the food insecurity demonstration program funded by VicHealth and the Department of Human Services. Initial funding assisted NYCH in meeting the costs of employing a part-time program coordinator to engage the community, develop partnerships and implement the pilot. There was \$95,000 invested over 18 months.
- The Café Meals Program currently receives \$39,000 per annum recurrent funding from the HACC program (released to NYCH through a service agreement with the City of Yarra). The City of Yarra continues to fund ten memberships from the original pilot.

### Staff/organisations

- Initially a part-time program coordinator was employed to get the project up and running.
- The program is now coordinated by a dietitian from NYCH who is allocated to the program 0.1 EFT.
- Approximately 20 community workers are involved in assessment and referral.
- Four cafes are currently involved in the program.

*There was a general consensus that the most complicated part of the development phase was finding appropriate café proprietors.*

## Roles

### North Yarra Community Service

- Measured extent of need.
- Established the viability of the project.
- Managed funding.
- Ran workshops to increase understanding of food access issues.
- Prepared clear and essential documentation such as referral and assessment forms.
- Identified opportunities to communicate the progress of the project to the community.
- Created and nurtured partnerships.
- Implemented and evaluated the projects.

### City of Yarra

- Provided legitimacy.
- Contributed funding through Home and Community Care Program and council funding.
- Close involvement of council staff with a councillor chairing the steering committee.

### Measurable benefits reported

Since the Café Meals Program began, 120 people have been registered as clients. Currently there are 60 clients using the program and another 45 on the waiting list. (Café Meals Committee Meeting 24 June 2004.)

## What makes the program sustainable?

**The program** meets the needs of participants including clients, members of community organisations, businesses and governments.

**Presence of** advocates and local champions.

**The existence of** established local networks and partnerships such as Primary Care Partnerships.

### Good choice of cafés and support of referring workers

The referring workers and café proprietors have supported the program through participation in the Café Meals Committee meetings and received quarterly reports.

### Strong program management, coordination and support

- Strong leadership provided by the part-time project coordinator (CIRCLE p. 44). The project coordinator is now allocated a half day a week for the ongoing monitoring, coordination and project management. Responsibilities include keeping records and statistics on program use, managing the waiting list, providing ongoing support to referral workers and café proprietors, reporting to funding bodies and the project steering committee (CIRCLE p. 44).

## What makes the program sustainable?

### Documented processes, standardized forms and professional information

- The Café Meals promotional brochure, which provides information about the program in a basic language to prospective clients.
- The Referral Form, which includes instructions to assist referral workers. Encourages dialogue with clients regarding their needs.
- The Evaluation Form, which is ideally completed within one month of a client commencing the program and every six months thereafter.
- The Client Rights and Responsibilities Sheet, which provides clients with an outline of membership entitlements and expectations.



## Achievements

### Outcomes for:

#### Clients

##### *More frequent meals*

When clients were first referred to the program, around 75 per cent reported that they ate once a day or less. This was reduced to 42 per cent reporting that they ate once a day or less.

##### *Focus on food and eating*

Program provided a way for referring workers and clients to start to think and talk about the issues in clients' lives that affect their eating habits. Evaluation of the program showed that more clients were cooking for themselves (increased from 10 per cent to 37 per cent) and less were relying on emergency relief (decreased from 42 per cent to 31 per cent). (Doljanin, unpublished.)

##### *Opportunities for social interaction*

Being able to enjoy the social aspect of eating improves a client's interpersonal skills, which are sometimes lost due to their social isolation; makes them feel part of the community by eating where everyone else eats; and improves self-esteem and confidence by providing the choice of a 'dignified eating environment' and positive interaction with café staff.

##### *Economic benefits*

Participants buy a meal they can afford in an area where the price of food is becoming unaffordable. An anticipated indirect benefit is promoting the potential for individuals to find work.

The positive social interaction with café staff and customers can increase client confidence, pride in their appearance, social skills and other competencies that can improve their chances for employment.

#### Referring workers

##### *Build trust with clients and partnerships with other organisations*

Referring workers see it as offering a real, 'tangible and immediate' response for clients. Being able to provide this option to clients helps to build trust and gives them a way to talk about and address the range of issues that impact on an individual's ability to access regular meals.

#### Café proprietors

- Able to make a difference to people's lives through the program.
- Improved understanding of the needs of the target group.
- Raised their profile, through media coverage, as well as their income.

#### Community

Benefits to the wider community are difficult to assess, however, because this program operates in the community, uses community venues and promotes community inclusion, it is hoped that it helps to reduce discrimination against clients by tackling stereotypes about welfare recipients and breaking down barriers between marginalised groups, traders and the broader community.

*Read about the one year follow-up and evaluation of the Subsidised Café Meals Project at:*  
[www.vichealth.vic.gov.au/foodforall](http://www.vichealth.vic.gov.au/foodforall)

## Summary of lessons learned

- Projects were viable if they met the needs of the participants (community, clients, businesses, governments).
- The participants were 'ready' to be involved.
- Projects built on previous projects and programs.
- Existing relevant networks/partnerships were identified and incorporated.
- Identified local advocates and champions across sectors and ensured they had regular updates on the progress of the projects.
- Projects required longer term funding to establish a sound, viable foundation.
- Selected project workers had appropriate community development, negotiation and partnership building skills and knowledge of the relevant sectors.
- Strategies were embedded into policies, programs and plans.
- Regular communication and dissemination of progress to all participants including effective use of media opportunities.
- Provided forums/seminars for improving the capabilities of all participants and interested members of the community.

## What action can you take?

- Review food access in local area.
- Examine the adequacy of the emergency food relief situation and explore longer term systemic solutions.
- Contact relevant organisations within the local area to scope current activity.
- Read in full the one year follow-up and evaluation of both food insecurity demonstration projects available at [www.vichealth.vic.gov.au/foodforall](http://www.vichealth.vic.gov.au/foodforall)



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WestNet, David Walton and Barbara Gillies, interview, June 2004.

The full one year follow-up and evaluation reports are available at: [www.vichealth.vic.gov.au/foodforall](http://www.vichealth.vic.gov.au/foodforall)

*Food for All?* describes issues and strategies around food security. It is available from the VicHealth website at: [www.vichealth.vic.gov.au/foodforall](http://www.vichealth.vic.gov.au/foodforall)