

# Moving away from food banks – social supermarkets as an innovation offering consumer choice & potential dietary diversity

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## INTRODUCTION

- Food insecurity is the inability to access or afford sufficient quantities of healthy food to meet requirements <sup>(1)</sup>.
- Food banks offer short-term crisis support, but have been experienced as stigmatising <sup>(2)</sup>
- In addition, their nutritional adequacy has been questioned <sup>(3)</sup> <sup>(4)</sup>
- Social supermarkets (SSM) offer limited choice in a retail-like environment, at low cost & offer social support to members <sup>(5)</sup>

## OBJECTIVES

To explore users experiences & perspectives & nutritional implications at 2 SSM in Sussex

## RESULTS

Table I: The value of the social supermarket for participants by location. Data are expressed as numbers (%).

<i>Choosing the foods I eat rather than being given no choice matters to me</i>				<i>p<sup>1</sup></i>
	<b>Strongly agree</b>	<b>Neither agree nor disagree</b>	<b>Disagree &amp; strongly disagree</b>	p=0.89
SSM1 (n=71)	67 (94.4)	2 (2.8)	2 (2.8)	
SSM2 (n=40)	35 (87.5)	4 (10.0)	1 (2.5)	
<i>The social supermarket has helped me reduce food waste</i>				
	<b>Strongly agree &amp; agree</b>	<b>Neither agree nor disagree</b>	<b>Disagree &amp; strongly disagree</b>	p=0.96
SSM1 (n=71)	52 (73.2)	16 (22.5)	3 (4.2)	
SSM2 (n=40)	33 (82.5)	6 (15.0)	1 (2.5)	
<i>Social elements of the social supermarket are important to me</i>				
	<b>Strongly agree &amp; agree</b>	<b>Neither agree nor disagree</b>	<b>Disagree &amp; strongly disagree</b>	p=0.90
SSM1 (n=37) <sup>2</sup>	25 (67.6)	6 (16.2)	6 (16.2)	
SSM2 (n=40)	31 (77.5)	7 (17.5)	2 (5.0)	

<sup>1</sup>Chi-square test; <sup>2</sup>Question not asked in first visit to SSM1

## METHODS

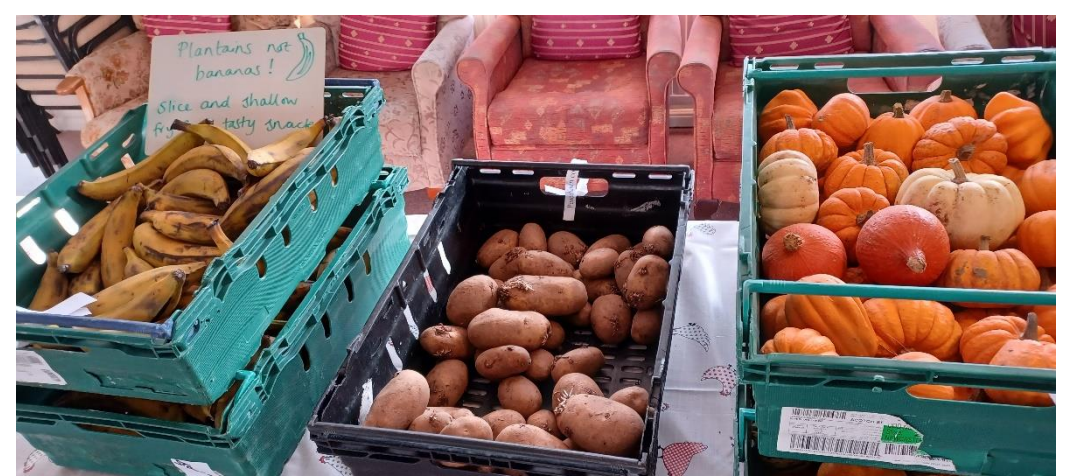
- Data were collected using bespoke questionnaires (n=111) administered face-to-face to adults at 2 SSM, & optional telephone interviews (n=25)
- Data comprised demographics & quantitative data related to SSM use & views about healthy eating using a series of statements with which participants rated their level of agreement with a 5-point Likert rating scale
- Qualitative data included open-ended questionnaire questions & interviews
- Effects of demographics on responses was tested using Kruskal-Wallis tests with posthoc Dunn's & Bonferroni correction. Differences in responses by venue were tested using chi square tests.
- Basic thematic analysis of qualitative data was carried out.

Table II: Aspects of healthy eating for participants, by location. Data are expressed as numbers (%).

<i>Preparing healthy meals is too expensive for me</i>				<i>p<sup>1</sup></i>
	<b>Strongly agree &amp; agree</b>	<b>Neither agree nor disagree</b>	<b>Disagree &amp; strongly disagree</b>	p=0.77
SSM1 (n=71)	43 (60.6)	8 (11.3)	20 (28.2)	
SSM2 (n=40)	25 (62.5)	9 (22.5)	6 (15.0)	
<i>Healthy eating is not a priority for me at the moment</i>				
	<b>Strongly agree &amp; agree</b>	<b>Neither agree nor disagree</b>	<b>Disagree &amp; strongly disagree</b>	p=0.06
SSM1 (n=71)	8 (11.3)	13 (18.3)	50 (70.4)	
SSM2 (n=40)	10 (25.0)	4 (10.0)	26 (65.0)	
<i>If I knew how, I could prepare healthier meals</i>				
	<b>Strongly agree &amp; agree</b>	<b>Neither agree nor disagree</b>	<b>Disagree &amp; strongly disagree</b>	p=0.90
SSM1 (n=71)	11 (15.5)	14 (19.7)	46 (64.8)	
SSM2 (n=40)	6 (15.0)	5 (12.5)	29 (72.5)	
<i>Time is a barrier to me preparing healthier meals</i>				
	<b>Strongly agree &amp; agree</b>	<b>Neither agree nor disagree</b>	<b>Disagree &amp; strongly disagree</b>	p=0.05
SSM1 (n=71)	13 (18.3)	4 (5.6)	54 (76.1)	
SSM2 (n=40)	14 (35.0)	4 (10.0)	22 (55.0)	
<i>I am not sure if the meals I eat are healthy</i>				
	<b>Strongly agree &amp; agree</b>	<b>Neither agree nor disagree</b>	<b>Disagree &amp; strongly disagree</b>	p=0.22
SSM1 (n=71)	7 (9.9)	12 (16.9)	52 (73.2)	
SSM2 (n=40)	10 (25.0)	4 (10.0)	26 (65.0)	

## CONCLUSION

- No demographic differences between SSM1 & SSM2; most were female, white & 46.8% had disability
- Healthy eating important to users; time & cost were barriers (significantly more for young and female members)
- SSM used for most to complement other purchases, not as sole support
- SSM valued for food choice (improved nutritional intake & reduced food waste) & pay-as-you-feel (increased dignity)
- SSM offer more sustainable & diverse option for nutritional support



## REFERENCES

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