## 6.5 Direct Food Provision Models

This section is based on a detailed review of 10 studies identified as most relevant from the wider evidence review. Foodbanks are alluded to here but are the subject of a chapter of their own.

**Definition**

* Direct food provision plays an important part within the wider ‘food support landscape.’ A satisfactory definition is hard to come by, but a key feature of this model is that it is ‘commensal’ that is supplying food to people who the provider does not have a family or close link with.[[1]](#endnote-1) This type of service can be delivered in people’s homes, but this is not a universal feature.
* The COVID-19 pandemic accelerated the growth of this type of support, at a time when gathering together was not possible. In all four countries, national schemes were established to support people who were shielding and unable to access food. Many councils also began providing their own local government food parcels.
* There was variability in the levels of support and how this support was provided across the four UK nations but third sector involvement in direct food aid was a commonality.
* The model also diversified to include, for example, ‘pub meals on wheels’ or ‘school dinners on wheels’[[2]](#endnote-2). However, this followed the austerity period when ‘meals on wheels’ type provision reduced significantly.
* Direct food can also be offered as part of a ‘hot meals PLUS wrap around support ' approach, which might include welfare checks, and complementary social care services and Council-run services

Certain segments of the population are more likely to require direct food provision.

*“Older adults, disabled adults, and those with mental and physical health problems can require meals on wheels services. Not all within these groups do however, nor at all times. Key factors include whether or not a person is able to leave their house regularly, whether they can easily use the internet and online ordering systems, and whether they are able to prepare and cook meals.”*

During COVID, those classified as clinically vulnerable (so are at high risk of severe illness from coronavirus) were eligible.[[3]](#endnote-3)

**Models**

This report section considers two models:

* Food parcels / food boxes (these can also be a feature of ‘Free Food’ models e.g., distributed at food banks though in COVID a mixed methods approach was in evidence – paid for and free (emergency) parcels).
* Meals on wheels provision (can be paid-for, subsidised or free-of-charge typically linked to addressing malnutrition, or the risk of malnutrition, amongst older people[[4]](#endnote-4)).

**Evidence**

**Food vulnerability during COVID-19. Local responses to household food insecurity across the UK during COVID-19 (September 2020 – September 2021) An analysis of experiences from 14 local areas from around the UK and recommendations for future policy and practice**

* Generally, across the third sector organisations the types of food provision were food parcels for collection, food parcels for home delivery, takeaway hot meals, and home delivery of hot meals. To provide these services existing food aid providers made a significant number of adaptations including changes to the means of distribution, parcel contents and referral routes. Organisations which, before the pandemic, provided community meals, community lunches and community cooking groups also changed significantly due to the restrictions imposed by lockdown. Many reoriented their services in 2020 and began to provide hot meals for takeaway, home deliveries of hot meals, food parcels (collect and delivered) and virtual cookery and other support sessions.

**Food vulnerability during COVID-19 End of project summary of key findings (2022)**

* *Mapping and monitoring national responses – Sept 2020 – Summer 2021*. As the pandemic developed over September 2020 to summer/spring 2021, researchers continued to see interventions put in place to respond to concerns about food access. On the whole, these shifted to delivery at the local level and away from direct food provision. There were decisive shifts in guidance towards cash-based interventions in Scotland, as evidenced in their Financial Insecurity Fund guidance.

**The nutritional quality of food parcels…: a mixed-method systematic review[[5]](#endnote-5) (2022 )**

* Whether food parcels meet national nutritional requirements for nutrients and food groups is inconsistent. However, food parcels typically exceed energy, carbohydrate, sugar, and salt recommendations, yet are often insufficient in fruit, vegetables and various micronutrients, including vitamin D, calcium and iron. An intervention aiming to improve food parcel nutrition increased fruit and vegetable variety.

**A survey of food banks operating independently of The Trussell Trust food bank network. (December 2019)**

* Although it is evident that there are a large number of independent organisations and charities distributing food parcels, little is known about when or why they were established, how they operate, and whom they serve p23 The findings highlight the particular groups in need of support (namely, people who are unemployed, who have disabilities, and/or single parents) are especially significant, as they are consistent with many other existing pieces of research identifying the urgent need for effective policy responses to secure the adequate incomes for these groups.
* There is, however, increasing recognition of a much larger landscape of food parcel distribution through independent food banks not affiliated with The Trussell Trust. Early works (see snowballs) by researchers in England, Wales and Scotland found that in some places where no Trussell Trust food banks existed, there were well-established independent food banks operating. In other places, both Trussell Trust and independent food banks were operating. More recent work by Sabine Goodwin on behalf of the Independent Food Aid Network has mapped over 800 food parcel distribution projects or food banks (for ease, referred to as food banks going forward) operating outside of The Trussell Trust's food bank network

**Releasing social value from surplus food. Evaluation Final Report (February 2020)**

* The report describes these effects resulting from FareShare's support: from financial savings to social profit (impacts on the community organisations); saving time and resources to enable a greater focus on project delivery (for the community organisations)
* For the charities in this study, the food service and the benefits associated would be scaled back or disappear entirely if the charities did not have access to low-cost food in the quantities, qualities and varieties that they currently receive through surplus redistribution = the network means they can continue “repairing social connections through the diverse and often multiple food-based activities that they offer.”

**Visiting Nurse Association. Meals on Wheels Analysis. Final Findings (2017)**

* This US study estimated value of a meal is AT LEAST $8.87, resulting in a 48% ROI\* on the meal investment and has the potential to lower healthcare costs by 7% annually for the conditions modelled. The level of detail we were able to model for different conditions will allow VNA to target discussions with different stakeholders with specific areas of interest Of the estimated overall $2,218 in health care savings achieved through the MOWs program the top contributors accounting for the cost savings were : Cardiovascular conditions accounting for 21%, Dementia accounting for 25%, Home health and SNF utilization accounting for 48%. Loneliness had a 25% reduction in prevalence, the largest out of the measure categories.

**Meals on wheels for the 21st century. A report exploring meals on wheels services in London before, during and after Covid-19. Sustain (July 2020)**

This report finds that meals on wheels services are one important aspect of a comprehensive adult social care system which facilitates health, independence, connectedness and wellbeing. Research on provision in London revealed complex reasons why they are needed as well as

multiple benefits that this service brings. However, the study concluded “community responses that emerged … will struggle to continue without funding and support.”

The report contests that there are viable mixed models exist for making the service affordable for local authorities, especially where this involves social enterprise and integration with social services.[[6]](#endnote-6)

This form of direct food provision is essential for those who are least able to prepare or cook meals for themselves. This type of support also forms a preventative service that alleviates stress from the adult social care and healthcare system: Regular visits from delivery staff generate ‘social, relational and psychological value.’

*“A meals on wheels service, delivered well, treats recipients with respect and dignity, offers choice and control over several aspects of the service, and supports and nourishes recipients.”*

'Economies of scale' that make these services financially viable can be difficult within a single borough or if strict eligibility criteria are applied. Working in partnership across borough boundaries should provide opportunities to find workable economies of scale; depending on how these are assessed.

**Outcomes**

The outcomes described below are drawn predominantly from the following sources:

1. A survey of food banks operating independently of The Trussell Trust food bank network. December 2019
2. ‘Comparing local responses to household food insecurity during COVID-19 across the UK (March – August 2020)
3. Food vulnerability during COVID-19 End of project summary of key findings (2022)
4. Herefordshire Case Study, Mapping local responses: March to August 2020',
5. Meals on wheels for the 21st century. A report exploring meals on wheels services in London before, during and after Covid-19. Sustain. July 2020. The author is Morven Oliver-Larkin, who coordinates Sustain's London Food Poverty Campaign encouraging sustainable approaches to improving household food security, particularly where these address root causes.
6. More than Just Food: Food Insecurity and Resilient Place Making through Community Self-Organising, Published: 23 May 2019
7. Releasing social value from surplus food Evaluation Final Report FareShare-British Red Cross. Impact of British Red Cross funding on FareShare to tackle Loneliness and Isolation. February 2020
8. Shaping more resilient and just food systems: lessons from the COVID-19 pandemic. 2021
9. The nutritional quality of food parcels provided by food banks and the effectiveness of food banks at reducing food insecurity in developed countries: a mixed-method systematic review. 2022
10. Visiting Nurse Association. Meals on Wheels Analysis. Final Findings (2017

The evidence reviewed identified a range of outcomes, with commonality observed with those reported for targeted food support in particular. Owing to its typically older clientele, direct food support can be seen to have a more direct link to preventative / mitigation outcomes. As an example, delivering food to a person who has just left hospital may help reduce the likelihood of re-admission. Regular visits to bring food may also mean falls etc are discovered sooner, which in turn will probably reduce hospital stays.

Other outcomes include:

* Improved dietary intake, but not quality of diet (emergency food parcels)
* Social connectedness
* Increased social value (food has ‘commensal qualities’)\*
* Reduced food insecurity
* Increased engagement by local authorities on poverty, food and related issues
* Increased partnership working across districts / boroughs
* Saving time and better resource deployment for charities
* Employment opportunities for volunteers

For statutory services:

* Earlier identification of issues / health problems
* Delayed need for care
* Reduced hospital stays.

*“Meals on wheels can provide a lifeline to people struggling to feed themselves in their own homes[[7]](#endnote-7).”*

**Examples**



Please see Sustain’s dedicated website section and resources aimed at anyone seeking to support and enhance meals on wheels provision

[Supporting and enhancing meals on wheels provision - YouTube](https://www.youtube.com/watch?v=xAku5OZVjZc)

During the height of the pandemic demand for meals on wheels services increased. Examples:

* The meals on wheels service run by [HILS in Hertfordshire](https://hertsindependentliving.org/news-media/hils-response-to-covid-19/) were receiving around 100 new referrals per day since social distancing measures were first introduced.
* In Southwark, London, [Age UK’s shopping service Food2You](https://www.ageuk.org.uk/lewishamandsouthwark/services/food2you/), which delivers shopping to older adults, reported referrals to have "gone through the roof".
* In Camden and Haringey, the [London Independent Living Service](https://www.lils.org.uk/) (LILS), which provides a ‘more than meals’ service including a welfare check and nutritional screening, has had a 30% increase in demand.

Many established meals on wheels services were expanding their reach during Covid-19. There were also a wide range of services which have emerged during the pandemic, involving many different organisations from the public, private and community sector. Further examples:

* [School caterers put their meals on wheels](https://www.sustainweb.org/publications/school_caterers_put_their_meals_on_wheels/?section=), Sustain (includes case studies from Brighton Enfield, Lancaster & Morecombe and Washingborough)
* [Webinar recording: School caterers put their meals on wheels](http://www.anymeeting.com/721-391-513/EA51DD88814C3D), Sustain, May 2020
* [The Bevy Community Pub meals on wheels](https://www.thebevy.co.uk/), Brighton
* [Crop Drop meals preparation](http://www.cropdrop.co.uk/blog/2020/04/covid-19-meal-project-wolves-lane), Haringey, London
* [Food and Friendship Luncheon Club](https://www.facebook.com/hoveluncheonclub/videos/287565132268347/) meals delivery (short film), Hove
* [Made in Hackney's advice on setting up a food service during Covid-19](https://madeinhackney.org/services/set-up-food-service)
* [NR5, Society Alice and TLC meals delivery,](https://www.lumi.org.uk/covid-19/SearchForm/?Categories%5B77%5D=77&Organisation=&Location=&Sort=most-recent&ItemsPerPage=48&ViewMode=grid) Norwich
* [FoodWorks meals subscription](https://thefoodworks.org/market/subscription-meal/), Sheffield

**Tackling rural food insecurity in Herefordshire.**

The pandemic raised the profile of poverty in Herefordshire, which could lead to more engagement from the Council with the issue. This worked example from Hereford illustrates which aspects of direct food support were continued post pandemic and which were not.

Good practice

* Focus on healthy local food/importance of food
* Early identification of resources and where to get them
* The ability to pull community together, lead and own what is needed locally.
* Growing your own
* Stronger community feel
* Ability to adapt
* Community support in rural areas
* "Family focus"
* Use of surplus food
* Healthy food education projects
* Connecting producers with those who need food locally.
* Closer working between LAs and food supporting organisations, understanding needs better.

Not good practice

* National food box
* Bringing food into the county
* Judgement on why people are asking for help
* Duplication of services.

**Food Train (Scotland)**

Food Train is a registered charity, voluntary organisation and social enterprise. Since 1995 Food Train has been making daily life easier for **older people, providing vital services to those who are no longer able to manage independently, through age, ill health, frailty or disability**. Food Train makes hundreds of grocery deliveries every week, ensuring those most in need have access to fresh groceries. Teams of dedicated local volunteers across the regions also go that extra mile by helping with household jobs, delivering books through our library service and providing much needed friendly social contact and meals through our Meal Makers and befriending services.

Following 15 years of successfully supporting older people throughout Dumfries and Galloway, in 2010, Food Train embarked on an ambitious project to make its services available to older people in other parts of Scotland. With support from the Scottish Government, Community Food and Health Scotland and the relevant health and social care partnerships, Food Train services are now available in many more areas.

In order to fulfil their vision for all older people in Scotland, Food Train endeavours, in partnership with public and independent sector partners, to continue growing and expanding their services and support for older people to enable them to eat well, live well and age well at home.

Food Train’s ‘Connects’ shopping service connects each of their customers with a volunteer living nearby willing to support them with the weekly task of shopping. Their volunteers collect shopping lists weekly on an agreed suitable day, do the shopping and deliver to their customer’s home using their own transport or on foot. To access this service there is a £1 membership charge renewed annually and a £5 per shopping delivery charge to allow Food Train to cover its administration and volunteer expenses costs. Food Train deals with all payments, therefore no money should change hands between volunteer and customer.

**Learning**

**Sustainability, enablers and barriers**

Their vulnerability to funding cuts has increased interest in models that appear to be more sustainable.

*“Sustain is especially interested in these models, and the part they could play in reducing household food insecurity for people who need support with food, welfare checks and social connections to overcome isolation.”*[[8]](#endnote-8)

The quote above exemplifies another funding in the literature, that the value of direct food provision should be judged using a wider ser of criteria than cost of delivery alone.

*‘Meals on wheels commissioners and service managers should not feel that they have to do things at the lowest cost possible… Commissioners should take account of longer-term timespans, other public budgets, and a broad span of metrics for evaluating best practice including for example sustainability, wellbeing, dignity, quality, employment and supported employment.’[[9]](#endnote-9)*

Achieving economies of scale for this type of model is still harder in rural areas like North Yorkshire, where they compound the ‘rural premium’ (extra costs of living / delivering services / transport / limited access to limited food choice) referenced along with the lack of co-ordinated response (Hereford).

Meals on wheels can be paid-for, subsidised or free-of-charge. Viable models are judged to exist for making the service affordable for government and local authorities, especially where this involves social enterprise and integration with social services. See:

[Something to be proud of: Taking an enterprising approach to meals on wheels](https://www.sustainweb.org/resources/files/reports/Something_to_be_proud_of_Simon_Shaw_FINAL.pdf) (2020)

[Meals on wheels good practice case studies](https://www.sustainweb.org/publications/meals_on_wheels_good_practice_case_studies/?section=) (Sustain and partners, 2018)

**Other enablers**

* Locating support as part of wider partnerships – for example, adult social care and hospitals charge teams, bring in a greater focus on food
* Mutual aid approaches can mitigate stigma: “Where emphasis is on people doing this for one another, and reciprocity, the stigma associated with receiving food aid is somewhat mitigated.”
* Providing choice for individual preferences is essential for mitigating food insecurity
* Set up training and shared learning sessions to help newer services to professionalise and establish sustainable, robust models and structures
* Strategically, a cross-cutting finding from this review is that tackling food insecurity and food poverty requires robust partnership plans which should include funding, policy and other support.

**Challenges**

Reliance on food that would otherwise be surplus can detract from the quality of the meals and is not considered reliable in the long-term. This has potentially damaging long-term consequences in that it further entrenches an unjust food system.

A more structural issue calls into question the need for additional support of this kind for the vast majority of service users.

*“Some older adults could access a similar, commercially available online shopping service, if supermarkets adapted their model slightly… Older adults should be able to choose between using an online shopping service, if they are able to, and a tailored shopping service if these better suits their need.”[[10]](#endnote-10)*

**The case for direct food typologies?**

As part of an emergency response, direct food provision played an important role in the pandemic response. Expanding or creating a direct food infrastructure under difficult conditions highlighted the role VCSEs play supporting people at local level.

The plethora of responses lacked coordination and oversight / control were not possible.

Once emergency restrictions en-masse are removed, the case for such interventions at scale is less apparent, rather they may form part of other food typologies where circumstances demand and volunteer labour is available.

Meals on Wheels services are distinct, serving well-defined populations and supported by evidence on the value of providing nutritional meals and having regular contact. The economics of delivering such services are problematic if viewed only from the perspective of those delivering the service.

One US study identified a 46% return on investment when the benefits to users and the healthcare systems are modelled.[[11]](#endnote-11) There is a strong social and moral argument for including meals on wheels services as part of the ‘prevent’ toolkit advocated by Public Health.

**Questions arising**

1. How is the nutritional quality of food parcels achieved / managed?
2. Should national or local government direct food insecurity interventions?[[12]](#endnote-12)
3. What is provision of meals on wheels in York and North Yorkshire? And if deemed insufficient, how is the case for investment best made to incorporate this as part of adult social care and / or public health in a pursuit of mitigating malnutrition in older people?
1. From ‘A commensal is an organism that uses food supplied in the internal or the external environment of the host, without establishing a close association with the host, for instance by feeding on its tissues.’ [↑](#endnote-ref-1)
2. Source: <https://www.sustainweb.org/foodpoverty/meals_on_wheels/> [↑](#endnote-ref-2)
3. https://www.stroud.gov.uk/community-health-and-wellbeing/coronavirus-update/extra-support-services/clinically-extremely-vulnerable/definition-of-clinically-extremely-vulnerable-groups [↑](#endnote-ref-3)
4. [Supporting and enhancing meals on wheels provision | Sustain (sustainweb.org)](https://www.sustainweb.org/foodpoverty/meals_on_wheels/#:~:text=Valuable%20activities%20include%20meals%20on%20wheels%2C%20lunch%20clubs,struggling%20to%20feed%20themselves%20in%20their%20own%20homes.) [↑](#endnote-ref-4)
5. Based on a review of 21 studies and meta studies. [↑](#endnote-ref-5)
6. Meals on wheels can be paid-for, subsidised or free-of-charge. [↑](#endnote-ref-6)
7. [ibid](https://www.sustainweb.org/foodpoverty/meals_on_wheels/#:~:text=Valuable%20activities%20include%20meals%20on%20wheels%2C%20lunch%20clubs,struggling%20to%20feed%20themselves%20in%20their%20own%20homes.) [↑](#endnote-ref-7)
8. See Shaw, S. (2020) "Something to be proud of: Taking an enterprising approach to meals on wheels.” [↑](#endnote-ref-8)
9. Meals on wheels for the 21st century. A report exploring meals on wheels services in London before, during and after Covid-19. Sustain. July 2020 [↑](#endnote-ref-9)
10. Meals on wheels for the 21st century. A report exploring meals on wheels services in London before, during and after Covid-19. Sustain. July 2020. [↑](#endnote-ref-10)
11. The estimated value of a meal is AT LEAST $8.87, resulting in a 48% ROI on the meal investment and has the potential to lower healthcare costs by 7% annually for the conditions modelled. Based on the assumption of a $6/meal cost. Conditions modelled included: stroke, heart attack, congestive heart failure with and without hospitalization, coronary heart disease , angina, and hypertension.’ Visiting Nurse Association. Meals on Wheels Analysis. Final Findings (2017) https://www.vnatexas.org/impact/Meals-on-Wheels-Analysis-2017.pdf [↑](#endnote-ref-11)
12. From: Food vulnerability during COVID-19 End of project summary of key findings (2022) [↑](#endnote-ref-12)