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

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Food insecurity is the inability to access or afford sufficient quantities of healthy food to meet requirements⁽¹⁾. Foodbanks offer short-term support but have been criticised for lack of choice, concerns about nutritional adequacy^(2,3) and they have been experienced as stigmatising^(4,5). Social supermarkets (SSM) offer limited choice including fresh produce at low prices. This work aimed to explore the perspectives of SSM members about healthy eating and their experiences of SSM

Two SSM were evaluated, with ethics approval, using bespoke questionnaires and optional interviews. Questionnaires ranked levels of agreement with statements about healthy eating and the SSM, using Likert rating scales. Frequency and duration of SSM use and demographic information (e.g. age) were collected. Telephone interviews were conducted and audio-recorded using interview guides for consistency. The impact of demographic characteristics on responses was assessed using Kruskal Wallis tests with posthoc Dunn's and Bonferroni correction. Differences between venues were tested using chi square tests. Interviews were transcribed and basic thematic analysis carried out to identify key themes.

In all, 111 questionnaires were completed and 25 interviews held. The majority of respondents were female and white. Over half considered themselves to have a disability, over half were single, separated or widowed while 18% had three or more dependants. The majority viewed healthy eating a priority but income and time were barriers, particularly for younger respondents. Almost two thirds agreed the SSM helped them prepare healthier meals, including trying new healthy foods (e.g. vegetables, freshly prepared salads). Participants valued choosing their foods, and the social elements of the SSM. For most, it supplied only part of the weekly shop. Mainstream, including lower-cost supermarkets, were also used. Significantly more of those with disability used the SSM for at least half of their household food ($p = 0.04$) while twice as many of those without disability used SSM only for the basics. Age and housing status affected respondents need for food support. A greater proportion of younger than older SSM members had accessed other food support; 9.5% of those aged ≥ 65 years compared with 73.3% of those aged 25–34 ($p = 0.002$). Significantly less of those living in privately owned accommodation had used other food support services compared with those in temporary local authority ($p = 0.01$) or rented local authority accommodation ($p = 0.00$; 11.1% vs. 71.4 and 75% respectively).

SSM offer potential for members to choose from a limited range of products including fresh foods, at minimal risk since costs are low. Most SSM members in this study were not entirely reliant on the SSM for their household needs, important since consistent food supply cannot be guaranteed. Nonetheless, they offer innovation within food support systems enhancing nutritional choice and dignity of members, in addition to offering social support.

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