

Our daily bread: the role of soup kitchens in 21st century Adelaide

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ABSTRACT

The purpose of this thesis is to explore and examine the continued existence and evolution of soup kitchens in Australia. Soup kitchens exist as a sub-category of the non-government and not-for-profit emergency food sector. With the rise of neoliberalism the not-for-profit or 'third' sector has taken over many of the roles of traditional government welfare. As a consequence, the third sector has been forced to become more professional in an effort to secure government contracts. Third sector organisations have also shifted their focus towards the provision of longer-term assistance. Allied with this there have been moves towards providing assistance on a conditional basis, requiring active engagement on the part of recipients. Theoretically, soup kitchens do not fit well into contemporary welfare paradigms, as they provide immediate, short-term and unconditional assistance. Consequently, such services therefore appear to be the essence of what could be considered old-fashioned charity.

This thesis explores the modern day soup kitchen from multiple perspectives, incorporating the views of coordinators, staff and volunteers, as well as attendees. The dissertation addresses the overarching research question: *what is the role of soup kitchens in 21st century Australia?* The thesis outlines the operation, place, role and structure of the modern soup kitchen, using South Australia as a model. In doing so, it provides a comprehensive definition of soup kitchens; something traditionally absent

from the literature, with the meaning ascribed to such services taken for granted by those writing on soup kitchens. The scant literature around soup kitchens finds that they:

- are run by charitable, not-for-profit or community-based organisations;
- serve pre-prepared meals (either to be consumed on the premises or to be taken away);
- provide food for free or for a nominal charge; and
- are available to the general public.

Each element of the definition of a soup kitchen distinguishes the services from other forms of charity, including other emergency food services that provide groceries (such as food pantries), or serve pre-prepared meals for a fee (including organisations such as Meals on Wheels). The definition, however, does not capture certain important attributes of soup kitchens. The formulation of a new, and more comprehensive, enunciation of what soup kitchens are, needs to be established in light of the field research. The new conceptualisation of the services more sharply emphasises the social and service linkage aspects of modern soup kitchens.

Over the period of neoliberalisation in Australia, it is clear that soup kitchens have evolved into multi-faceted services, meeting a variety of needs within the community. They have moved away from an initial focus on feeding people to more complex concerns around nutrition; community and social interaction; and as a vehicle for linking attendees with further assistance. Modern soup kitchens offer a safe and easy way for volunteers to help in

the community and interact with people they may otherwise actively avoid. Increasingly, higher demands are being placed on services, both in terms of government bureaucracy and through the (required) professionalisation of the third sector. Soup kitchens nonetheless have been remarkably resilient in the face of bureaucratic change: a testament to their simple, replicable and broadly understood service model.

DECLARATION

I certify that this work contains no material which has been accepted for the award of any other degree or diploma in my name in any university or other tertiary institution and, to the best of my knowledge and belief, contains no material previously published or written by another person, except where due reference has been made in the text. In addition, I certify that no part of this work will, in the future, be used in a submission in my name for any other degree or diploma in any university or other tertiary institution without the prior approval of the University of Adelaide and where applicable, any partner institution responsible for the joint award of this degree.

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31/5/17

Victoria Skinner

Date

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ACRONYMS

ABS	Australian Bureau of Statistics
ACNC	Australian Charities and Not-for-profits Commission
ACOSS	Australian Council of Social Service
ATO	Australian Taxation Office
CBD	Central Business District
COAG	Council of Australian Governments
CRA	Commonwealth Rent Assistance
HELP	Higher Education Loan Program
LGA	Local Government Area
NAHA	National Affordable Housing Agreement
NDIS	National Disability Insurance Scheme
NQF	National Quality Framework
OECD	Organisation for Economic Cooperation and Development
TAFE	Technical and Further Education
VET	Vocational Education and Training

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Chapter 1

Introduction

1.1. Introduction

In April 2016, Ms Stasia Dabrowski, dubbed 'the soup kitchen lady' was honoured on her 90th birthday for her work with a Canberra soup run, which she had been operating since 1979 (Travers, P 2016). Ms Dabrowski is certainly not alone. Every day in Australia people from all walks of life, from pensioners to politicians, prepare and serve food in soup kitchens around the country. It is difficult to estimate the number of soup kitchens nationally, as many of the services retain low profiles, deliberately avoiding listings in service directories, thus making them difficult to identify (Johnsen, Cloke & May 2005). Soup kitchens however, are delivered by a range of organisations, from large corporate entities who are part of major charitable or community organisations, to local churches or groups whose services are spread by word of mouth. Those that exist within churches or other indoor areas may be all but invisible to the general public, while larger or more established soup kitchens are openly advertised.

The first soup kitchen was established in the 1840s in Ireland by French chef Alex Soyer, to provide relief to people during the Irish Famine (Morris, H 1982). The services have an extensive history in the United States, going back to the Great Depression of the 1930s (Poppendieck 1998). Historical data on Australian soup kitchens is difficult to come by, although some larger services in South Australia date back to the 1950s (Hutt Street Centre

2016). Still flourishing today, soup kitchens occupy a unique place within Australia's charitable sector, serving the poor and homeless population since European settlement.

Poverty and homelessness continue to be significant social problems in Australia, reflecting the fallout of a combination of factors, including (but not limited to) deficiencies in the housing system and labour market. Australia's housing is amongst the least affordable in the world (Baker, Mason & Bentley 2015, p. 275; Demographia 2015, p. 2). Unemployment rates are currently high, hitting 6.9 per cent in South Australia in May 2016 (the highest in Australia) (Department of Employment 2016). Such issues inevitably drive people towards some combination of government welfare support and non-government charitable assistance. As a service providing one of the most basic of human needs – food – soup kitchens, their operation, and their use are influenced by shifts in housing markets and financial support. The move away from traditional discourses of poverty towards those focussed on social capital and social exclusion have added a further layer of complexity around how we identify and treat disadvantage (Saunders, Naidoo & Griffiths 2008). This, too, has an impact upon soup kitchens, because as this thesis identifies, such services become potential meeting places for the socially isolated.

In Australia, as in many developed nations, non-government and charitable organisations have largely replaced traditional government welfare services through outsourcing, supported by the neoliberal belief in the superiority of

the market (Considine, Lewis & O'Sullivan 2011; Gilmour & Milligan 2012; Peck 2010). The rise of economic rationalism in Australia has precipitated a rollback in government service provision, with the Commonwealth Government as an overseer of welfare projects, now directly (and increasingly) provided by the non-government sector (van Gramberg & Bassett 2005).

As a more long-standing traditional form of welfare, soup kitchens do not operate as service providers for government. Their role remains to fill gaps in government welfare; a role that they have provided since the early 20th century, in North America and in Australia (Berg 2008; Lindberg et al. 2015; Poppendieck 1998). So where do soup kitchens fit in the modern world? This thesis looks at the role of the soup kitchen in the 21st century. It examines such services from the perspectives of the coordinators, staff and volunteers, and of attendees.

1.2. Context

Soup kitchens are a subset of the emergency food sector, an area of charity characterised by the distribution of food to people who, for a variety of reasons, cannot adequately source it through conventional channels. The emergency food sector is an umbrella term for a diverse grouping of organisations, ranging from those providing low-cost meals such as Meals on Wheels, to those distributing groceries (food banks and food pantries), to soup kitchens, which offer pre-prepared food. Organisations such as Meals on Wheels deliver food to the homes of people who are generally

older, frail, socially isolated or disabled, providing access to food but also social interaction (Winterton, Warburton & Oppenheimer 2013).

Food pantries and food hampers are provided by charitable and non-government organisations and generally consist of uncooked staples such as rice, cereal, bread, pasta and canned goods (Curtis 1997; Reschovsky 1991; Tarasuk & Eakin 2005; Teron & Tarasuk 1999). Food charity may also include intermediary organisations that undertake food rescue, such as Oz Harvest or SecondBite. These organisations source edible food that would otherwise be thrown away by supermarkets, restaurants, or other businesses, and redistribute the food to services such as food pantries and soup kitchens (Booth & Whelan 2014; Butcher, LM et al. 2014; Lindberg et al. 2014; Riches 2002; Warshawsky 2010).

There is limited recent or comprehensive literature on soup kitchens, particularly in Australia. Scholars have historically used broad definitions to differentiate soup kitchens from other forms of emergency food charity, largely defining them as services based on the provision of pre-prepared food rather than groceries (Glasser 1988; Poppendieck 1994, p. 69; Stein 1989). Otherwise, the literature is largely silent on comprehensive definitions of soup kitchens, relying instead on 'common sense' understandings. For this thesis, however, a comprehensive definition is established to bring together the key elements that differentiate modern soup kitchens from other forms of emergency food aid.

It should be noted that 'soup kitchen' as a term is something of a misnomer. It is also not one that is widely used among services in reference to *themselves*. The term has its origins in early services in Ireland in the 19th century and later in the United States, which served only soup to attendees (Berg 2008; Morris, H 1982; Poppendieck 1998). Many modern soup kitchens have their own terminology for their work, with the services studied for this dissertation using terms such as 'meal centre' or 'bistro' to describe themselves. There is, however, no alternative term that has been agreed on by services or scholars. As such, the term 'soup kitchen', while inaccurate and archaic, is currently the most succinct and recognisable term for these services. Accordingly it is used in this thesis.

A comprehensive definition of soup kitchens was developed for this study from a synthesis of the available literature. This definition was then used to locate services in the field. Each element underpinning the definition from the literature is in itself descriptive of the soup kitchen, but also serves to distinguish soup kitchens from other charitable services, particularly emergency food services, and commercial food ventures. That is, a soup kitchen:

- is run by a charitable, not-for-profit or community based organisation;
- serves pre-prepared meals, hot or cold (to be consumed either on the premises, or to be taken away);
- provides food for free or for a nominal charge; and
- makes its food available to the general public.

Soup kitchens operate as third sector organisations, run by community groups, churches or non-government organisations (DiFazio 2006; Glasser 1988). They can be distinguished from one-off events where free food may be provided, or food provision by commercial entities (Allahyari 2000, p. 51), as well as business initiatives like 'suspended coffees' (where customers pay extra to provide coffee for those who are unable to afford it) (Black 2013). Specifying that soup kitchens serve pre-prepared meals distinguishes them from food pantries, where attendees are provided with groceries (Poppendieck 1994). Generally, soup kitchens do not charge a fee for their meals. However, there are some who ask for a small donation, or charge a nominal amount (Mulquin, Siaens & Wodon 2000). Although generally targeted towards people who are rough sleepers and/or experiencing financial disadvantage, soup kitchens do not require the attendee to provide proof of need, identification, or to complete any formal processes for entitlement (Glasser 1988; Lane & Power 2009). Chapter four unpacks the literature around soup kitchens in detail, and includes a discussion of the defining features of services.

In Australia as well as internationally, soup kitchen attendees are recruited frequently in studies of various types of disadvantage, particularly drug and alcohol abuse (Magura et al. 2000; Nwakeze, Magura & Rosenblum 2002; Nwakeze et al. 2003; Rosenblum et al. 2005; Schilling, El-Bassel & Gilbert 1992). Soup kitchens are also studied extensively in relation to the nutritional value of their meals (Eppich & Fernandez 2004; Laven & Brown 1985; Sisson & Lown 2011; Wicks, Trevena & Quine 2006). Despite the

presence of these foci and studies within the literature, there is no comprehensive discussion of who attends soup kitchens and why. Instead, there appears to be an underlying assumption that soup kitchens are frequented only by rough sleepers solely for the purpose of obtaining food. The extant literature on soup kitchens provides limited perspectives on the services. There are a few ethnographic studies on the attendees of soup kitchens, the most notable being by anthropologist Irene Glasser (1988). Other academics have provided sociological and social studies of the emergency food sector generally (Berg 2008; Poppendieck 1998). Such studies provide an incomplete picture of the modern soup kitchen as a service. Besides some broad Australian studies of the emergency food sector (Booth & Whelan 2014; Butcher, LM et al. 2014), the bulk of the literature comes from North America. As a consequence, there are two important gaps in the literature. The first, is with the majority of the studies on soup kitchens coming from the United States, there is little knowledge or understanding of how soup kitchens in Australia operate differently. Second, the age of the most substantive literature – particularly the works of Janet Poppendieck (1994, 1998) and Irene Glasser (1988) – means there is a lack of updated analysis of the place of soup kitchens in an era where the third sector has undergone a significant evolution. With increased moves towards corporatisation, individualisation and conditionality in the third sector (Carey, Braunack-Mayer & Barraket 2009; Shutes & Taylor 2014), the ongoing relevance of an old-fashioned model of charity like soup kitchens remains uncertain.

1.3. Thesis aims

The key research question for this thesis is: *What is the role of soup kitchens in the 21st century?* It is a deliberately broad question that allows the thesis to explore soup kitchens from various angles. Beyond the key question, the thesis explores why and how soup kitchens continue to operate in Australia (particularly South Australia), and whether and how their role in society has changed, and the challenges and barriers to receiving/accessing charitable assistance in the context of the modern soup kitchen environment. In doing this, the thesis takes a holistic and multi-perspective approach, considering soup kitchens from the viewpoints of those who operate them, as well as those who attend. Issues addressed include who operates and maintains today's soup kitchens and why, as well as how they source food and money, and how they target their services. The perspective of attendees is also explored, with this data centred on who uses soup kitchens, as well as how and why they attend. It should be noted here that the key focus of this thesis is the soup kitchen model. Accordingly, the insights and perspectives of service attendees that are presented in this thesis are used to support understandings of, and nuances around, the soup kitchen model, rather than providing a deep exploration of the lived experiences of attendees in a variety of other interesting realms, such as in terms of their experiences of homelessness, social isolation, mental and physical health, among others.

The dissertation provides a snapshot of the place and structure of soup kitchens in Adelaide, and those involved in the services. The thesis identifies the main purposes of the modern soup kitchen, and further

highlights the debates around private versus public provision of welfare, and short-term versus long-term solutions to different types of disadvantage. It situates soup kitchens within the framework of a relatively robust welfare state, contrasting it with the international literature and identifies the impact welfare has on the operation of the modern soup kitchen.

1.4. Overview of the thesis

The dissertation comprises eight chapters, including this introductory chapter, which has set out the key themes within the research, definitions and structure of the thesis. It has also provided a context within which to explore the modern soup kitchen. The remainder of the document comprises three interrelated literature chapters, a methods chapter, two data chapters and a concluding chapter. The focus of each of these is as follows.

Chapter two explores the social, political and economic context of welfare in modern Australia. It traces Australia's social and welfare system from its protectionist, interventionist roots, with high levels of wage regulation and government ownership of infrastructure (Butlin 1964; Castles 1997; Cook, I 1999; Stokes 2004). The chapter then discusses welfare reform, in particular the more recent shifts towards neoliberal governance and the associated rollback of the welfare state (Mendes 2009; O'Neill & Moore 2005; Peck 2010; Woodward 2005). Reform is considered in relation to the rise of mutual obligation and punitive welfare, and the tightening of rules for recipients (Disney 2004; Morris, A & Wilson 2014; Shaver 2002). The

discussion highlights the increasing demands for non-government welfare through charitable organisations (Murphy 2006; van Gramberg & Bassett 2005; Western et al. 2007). This discussion paves the way for further exploration of the third sector in chapter four, including its expansion.

Chapter three explores the complex disadvantages that see people seeking aid from government and/or non-government organisations and in the case of this research, soup kitchens. The chapter discusses the changing discourses around disadvantage in Australia, including the shift from disadvantage being an issue of structural inequality, to the neoliberal rhetoric of risk and personal responsibility (Harris, P 2001). Three specific areas of disadvantage are considered: financial, housing-related and social. Financial disadvantage and poverty are considered in relation to their impact upon an individual's ability to obtain other social and economic goods (King et al. 2012; Saunders et al. 2006). In terms of housing-related disadvantage, housing stress and homelessness are discussed, covering issues of affordability, access and safety (Costa-Font 2008; Demographia 2015; Goodman et al. 2013; McNaughton 2008; Somerville 1992; Wood, Ong & Cigdem 2014). Finally, social isolation and social exclusion are considered as part of the shift in discourse away from economic issues, towards a more complex and multi-faceted consideration of disadvantage (Baum & Palmer 2002; Percy-Smith 2000a; Saunders, Naidoo & Griffiths 2008). The chapter considers the different types of disadvantage that may cause individuals to seek aid from services such as soup kitchens.

Chapter four builds upon and brings together the discussions for the previous two chapters, positioning the non-government not-for-profit 'third sector' as an intermediary between individuals and the government; with the third sector often acting as another arm of the welfare state (Considine, O'Sullivan & Nguyen 2014; DiFazio 2006; Gilmour & Milligan 2012). It traces the evolution of the third sector, including the scope of volunteering and philanthropy in Australia, and the debate around the efficiency of the sector. Corporatisation and individualisation of the third sector is also explored, as well as the rise of conditionality (Shutes & Taylor 2014; Whitworth & Griggs 2013). The chapter then provides an overview of the emergency food sector, noting the unique place occupied in it by soup kitchens, and the third sector generally, as immediacy-focussed, unconditional charity (Glasser 1988; Johnsen, Cloke & May 2005; Poppendieck 1994). The chapter sets out the way in which the third sector and its clients interact, and contrasts soup kitchens with other forms of charitable service provision.

Chapter five outlines the methodological framework for the field research. The chapter sets out the main objectives of the research, and the methods used to obtain data. It explores the use of qualitative analysis as a way to gain personal insight into soup kitchens; garnered from the stories of volunteers, staff, coordinators and attendees (Charmaz 2004; Flick 2006; Sarantakos 1998). It discusses the use of participant observation as a way to contextualise the experiences of those being interviewed, and to understand the interactions between the services and their clients (Babbie 1986; Hartman, J & Hedblom 1979). The chapter further explores the use

of semi-structured interviews as a way to gather in-depth information that is both flexible and controlled (Denscombe 2010; Ryan, Coughlan & Cronin 2009; Sarantakos 1998). It also discusses participant selection, ethical issues, research challenges and limitations.

Chapter six introduces the data from the field research. The chapter specifically looks at the role and workings of soup kitchens from the point of view of service coordinators, staff and volunteers. The discussion establishes the models underpinning the soup kitchens studied, using information gathered via interviews and participation observation. The chapter considers the broad themes of soup kitchen management and organisation, as well as issues around sourcing food and money. Further themes such as religion, safety and service linkage are also explored. The discussion provides an overall picture of how the modern soup kitchen operates, and the challenges faced.

Chapter seven explores the soup kitchens from the point of view of attendees. It looks at how attendees use soup kitchens and why, regarding their own needs and concerns. The discussion explores themes of employment, health, drug use and financial disadvantage, as well as the stigma around using charitable services and the treatment of attendees by soup kitchen staff and volunteers. The data presented emphasise the value of such services to many.

The concluding chapter brings together the key themes and issues from the data to answer the research question. The conclusion revisits the literature on soup kitchens and situates the services within the context of the neoliberal welfare state and the third sector. The chapter elaborates on the soup kitchen model beyond its traditional definition and highlights the hierarchy that maintains this model. Finally, chapter eight addresses the research question by bringing together key themes and issues from the data.

1.5. Conclusion

Soup kitchens are not unique, or even new, to Australia, but the country's robust welfare state, and the focus on long-term solutions to disadvantage in modern charity has seen the services largely ignored academically. This thesis provides the very beginnings of a broad and overdue examination about an unusual, yet still necessary service. With the rise of food rescue in Australia, and the growing concerns over wages, unemployment, poverty, housing affordability and housing market failure, soup kitchens will become ever more important. Accordingly, it is vital to understand how they operate, and the value they have for those who attend them.

Chapter 2

Neoliberalism and the welfare state

2.1. Introduction

To understand how soup kitchens fit within Australian society in the 21st century it is necessary to take a step back and consider the social, political and economic context within which welfare (both government and private) has been provided post-European settlement to people in need of aid. This chapter establishes a platform from which to explore and analyse the interaction between non-government (including not-for-profit and charitable) organisations, governments and welfare recipients in Australia. It traces a brief history of government welfare provision in this country, through the framework of Benthamite utilitarianism and social liberalism in the post-Second World War period and the subsequent shift to neoliberalism that has occurred since the late 1970s. The move towards neoliberalism has facilitated and actively encouraged the rise of the 'third sector', a collection of non-government organisations that do not exist for the purpose of making a profit for members or shareholders, but engage in the provision of goods or services for the benefit of individuals or groups in the community (Carey, Braunack-Mayer & Barraket 2009; Lyons 2001; Lyons & Passey 2006).

The third sector has always played an important role in Australian society, however, the shift to neoliberalism has pushed non-government organisations and charities to the forefront, particularly as traditional government responsibilities are outsourced. This chapter explores the evolution of liberalism in Australia, from the post-war expansion of the

welfare system and its priority of social justice, to the relatively recent focus on market mechanisms and notions of risk and individual behaviour as causes of economic and social inequality.

Australia's formal political system is a hybrid of parliamentary rule in the British Westminster tradition and American federalism, colloquially known as the 'Washminster' system. The country was federated in 1901, bringing together diverse and independent colonies – who were often at odds with one another – and a divided population of ex-convicts and free settlers (Jamrozik 2004). After Federation the nation remained fragmented, unable to shake the legacy of its background, not as a settlement to form a new world, but for the removal of undesirable elements from British society (Cook, I 1999). The combination of settlers and ex-convicts created a two-tier society, with suspicion and discrimination on both sides (Ward 1978). Between the fiercely independent states and the divided peoples, the nation was left struggling to adapt and integrate into a single, cohesive society (Cook, I 1999; Jamrozik 2004). It is a legacy that arguably remains to this day.

The legacy of British imperial rule has had a considerable impact upon the way in which government has evolved in Australia. Between Federation and the First World War, the Australian state was far more interventionist than comparable political systems of the time (Stokes 2004). The state continued to own much of the country's infrastructure, even when older and more developed nations had gone down the road of privatisation (Castles 1985,

p. 15). The Australian nation state was highly protectionist in nature, setting down tariffs to preserve local industry – although this was a contentious issue even at Federation (Hirst 2000). The state also regulated minimum wages, workers' entitlements and working conditions (Castles 1997; Fenna 2015; Wilson, S et al. 2013).

The need for state involvement in economic development over time can be attributed in large part to Australia's relative (colonial) youth and its geographical isolation (Cook, I 1999, p. 159). Further, the ownership of infrastructure and extensive interventionism is a common trait amongst settler societies; economist Noel Butlin (1964, pp. 5-6) referred to this phenomenon as 'colonial socialism'. European settlers brought liberalism to Australia, but with ownership and control vested in the strong rule of the British Empire, the colony was slow to embrace private ownership rather than government control (Argy 2003). Consequently, as Cook (1999, p. 160) identifies, people very quickly 'got used' to being provided with strong government intervention and aid. Australia's legacy of strong intervention was not diminished until the widespread appropriation of neoliberal ideology in the 1980s, and even in the new century interventionist actions to some extent inform the expectations of the public. They are also evident in some aspects of government policy, most notably in times of economic distress, such as during the global financial crisis of 2008 (Rudd 2009). Nevertheless, Australia today combines a strong capitalist economy with a hybrid system of political management that melds its original utilitarian ideals with established neoliberal traits.

2.2. State intervention and the capitalist economy

Capitalism is a social and economic system that is identified as being based on the open purchase and sale of goods, services and wage labour through a market system; though capital is also passed through non-market forms, with some degree of state intervention to allow the system to reproduce itself effectively (Jessop 2002). As Jessop (2002, pp. 12-13) explains, the system is circular and, for the most part, self-replicating:

Workers exchange their capacity to work for a wage and accept capital's right to (attempt to) control their labour-power in the production process and to appropriate any profits (or absorb any losses) that result from its effort to produce goods and services for sale. Workers spend their wages on means of consumption according to the prevailing social norms of consumption and thereby reproduce their labour-power so that it can be sold once more.

The movement of capital takes place through the exploitation of commodities – natural resources, information and most importantly, labour-power (Jessop 2002, 2016; Lippit 2005). Jessop refers to these as 'fictitious' commodities, because of their occurrence outside the capitalist system itself. He notes that the market is incapable of creating these commodities, and therefore must rely on non-commodity social structures and the intervention of the state (Jessop 2002, pp. 15-16). Thus, capitalism contains inherent contradictions. The challenge for the state is how to regulate and overcome them.

Capitalism requires three levels of governance: the market, business institutions and the political system (Scott 2011). The market simply cannot exist on its own. An entirely market-based system would be too prone to market failure, and the system cannot exist in a perpetual, functional state without the intervention of non-economic factors, leaving it largely up to governments to fill these gaps (Jessop 2002). Capitalism 'is a system of governance, and the institutions of capitalism... are ultimately shaped through political processes' (Scott 2011, p. 8). Accordingly, the capitalist market has little choice but to accept state intervention as a necessity. The state is not a function of capitalism; in fact, it is often very much at odds with the capitalist system (Jessop 2002). In practice this creates a delicate balancing act between the movement of capital and the power of the state. The importance of the market is offset by the power of the state and surrounding institutions to regulate its actions (Scott 2011). In a social or even classical liberal state, this is difficult, but manageable. As discussed further in this chapter, however, the shift towards a neoliberal framework comes with the danger of stripping away the necessary non-economic factors that facilitate capital accumulation and keep the system's contradictions in check (Jessop 2002). Neoliberalism in particular is more inclined to tolerate market failures, and the resulting inequalities (Harvey 2009, pp. 67-68).

In Australia, up until the emergence of neoliberalism in the 1980s, government intervention in market processes was routine and extensive (Butlin, Barnard & Pincus 1982). Australia's brand of liberalism saw the

government set minimum wages, protect workers' rights, provide monetary and non-monetary entitlements to disadvantaged people and redistribute wealth through taxation as ways to curb the impact of market failures and benefit those at the lower end of the socio-economic spectrum (Stokes 2004). Such actions also aimed to assist economically, correcting market failures and helping capitalism self-replicate. The rise of neoliberalism has seen a shift away from such systems, leaving the market with more discretion, largely at the expense of the fortunes of people experiencing disadvantage (Spies-Butcher 2014; van Gramberg & Bassett 2005). Such a shift has had an impact on capitalism; but more than that, it has had an effect on non-government institutions and citizens.

2.3. Liberalism and the Australian state

Between the time of Federation and the beginning of the First World War, the Australian state was underpinned by a progressive liberal doctrine that combined collectivism with individualism (Sawer 2003). This particular brand of liberalism moved away from the 'social contract' that defined classical liberal theory, instead embracing socialist and utilitarian concepts of state ethics and community sentiment (Collins 1985; Tregenza 2012). While the central tenets of this new approach to the nation state are generally agreed upon, academics are divided on the nature of the new doctrine. Two broad schools of thought emerged around the role of the state in the period before the First World War. The first view is that the Australian state was founded on utilitarian ideals, rejecting the notion of pre-social and natural human rights in favour of maximisation of the public good; what

Collins refers to as a 'Benthamite' society (1985, p. 148).¹ The second view, which has emerged in the last few decades, is that the newly created nation state was founded on a form of social liberalism, which, while containing some elements of utilitarianism, is more focussed on the development of personal ethics and active citizenship (Tregenza 2012, p. 89). The utilitarian thesis does provide some important insights into many of the ideals of Federation, and in fact is an important part of post-Second World War governance in Australia. Collins admits that Bentham's utilitarianism was not necessarily intended to be the prevailing theory in Australia, but that 'those who prevailed in the colonial political struggles of the nineteenth century were, consciously or unwittingly, bearers of these ideas' (1985, p. 150). The collectivist elements espoused in the social liberalism theory make it a more nuanced account of the operation of the state prior to the First World War.

Both theories of the basis of the Australian state accept that utilitarianism is an important element underpinning the federated country. Australia has no formal Bill of Rights, and the express rights provided for in the Constitution are included, not to enshrine pre-social human rights, but for the purpose of facilitating good governance (Patapan 1996). State ownership of utilities, secular education, formal welfare and protectionism have been key features of the state since Federation. They were also distinctly utilitarian in nature (Collins 1985). There is no doubt that there was a strong utilitarian streak in

¹ English philosopher Jeremy Bentham was responsible for articulating the doctrine of utilitarianism. Bentham believed that justice in society could be achieved by maximising happiness in the majority of the population – the greatest good for the greatest number (Maddox 2005, pp. 24-25).

governance structures in the early years of the Australian state. After the end of the Second World War, utilitarianism was strengthened, with a shift from broad social welfare through wages and protectionism to an expansion of the formal welfare state (Castles 1997). Later theorists, providing more nuanced accounts of the early years of Federation, have espoused a more complex political system with facets not fully explained through utilitarianism alone.

Recent scholarship about the Australian Federation has shifted the focus from utilitarian understandings of Federation, giving way to more refined conceptualisations of early political and ideological beliefs. This shift has led to an exploration of the idealist and 'soft socialist' concepts that contributed to the formation of the early Australian state (Tregenza 2012). Historians and political analysts have also begun to categorise early Australian governance as a form of social liberalism, known otherwise as progressive liberalism (Argy 2003; Hirst 2000; Tregenza 2012). While early theorists spoke about bringing together states for economic and structural reasons, later historians like John Hirst have provided evidence of idealist philosophies underpinning Federation, with founders seeking to bring colonies together for the purpose of 'moral progress' (2000, pp. 13-14).

Australia's brand of social liberalism has long been based on the belief that it is the role of the state to ensure that its citizens are morally and ethically educated and fully engaged in civic life (Rowse 1978). The state therefore had a duty to ensure the removal of barriers to this engagement, in particular

'material insecurity and deprived living conditions' (Tregenza 2012, p. 89). Drawing on understandings from the United Kingdom, social liberals in Australia from the time of Federation espoused that such insecurities are a product of economic and structural forces, rather than the fault of individuals (Sawer 2003). The challenge of reforming destructive economic forces to facilitate personal development was to be borne by the state, thus requiring a large and highly interventionist government (Rowse 1978). The focus of social liberalism is the wellbeing – both material and ethical – of state citizens. As a doctrine this generally involved a rejection of free markets and smaller government, due to their perceived inability to facilitate social wellbeing (Tregenza 2012, p. 88). The adoption of social norms in Australia also meant that rather than creating a strong European style welfare system, the state involved itself in setting wages and ensuring that working people could obtain a desired standard of living (Stokes 2004). Moreover, the need for big government was not as controversial in Australia as was the case in older and more established countries, largely because of the positive experiences of British colonial rule (Castles 1985).

The doctrine of social liberalism brings together the seemingly opposing notions of collective will and individual rights. The collectivist element combines the utilitarian notion of the greatest good for the greatest number, with a 'soft' socialist doctrine of welfare, education and the common good (Rowse 1978, p. 38). The socialist doctrine differs from utilitarianism in that it sees the state as having an inherent moral dimension, rather than simply existing to do what is best for the majority of people (Shaver 2002). It is an

ideology that has gone on to inform communitarian thought, as well as the underlying beliefs of the Australian Labor Party (Catley 2005; Maddox & Battin 1991).

Notably, Australia's social liberal doctrine has also been focussed around individualism, and conceptualised as a form of egalitarianism, with the notion of the equal worth and dignity of all citizens. Within these structures the state has an important role as facilitator of individual rights (Kapferer & Morris 2003, p. 85).

Individualism is a central tenet of all forms of liberalism, from the pre-natural individual human rights of classical liberalism to the hyper-individuality of neoliberal thought. In liberalism, the individual is the basic, and key, unit of society (Hayek 1948; Kymlicka 1989). While classical liberalism and neoliberalism are both strongly individualist, social liberalism tempers this with a focus on community sentiment and utilitarianism, as discussed above. Individualism still has a place though, typified in the Australian egalitarian notions of 'the fair go'. Egalitarianism in Australia focuses on equality of opportunity for all citizens. It is the practical outcome of the social liberalist belief in removing material disadvantage to aid in individual development. Egalitarianism borrows from classical liberal ideals in that everyone should be given the chance to better themselves (Argy 2003). In practice, the Australian concept of 'the fair go' led to initiatives such as the protection of local industries and wage setting, to ensure that all workers

had a liveable wage as well as widespread free education (Collins 1985; Snooks 1975).

In the aftermath of the Second World War, government and community sentiment shifted away from early conceptions of social liberalism with its active development of citizens, towards a more formal, utilitarian system (Castles 1997). The move towards a more rigid and formal welfare state and a retreat from early protectionism signalled a move towards a new type of governance in Australia (Shaver 2002). This movement lasted until the late 1970s, when the rollout of the welfare system gave way to a radically different approach to governance and social policy. What followed was the rollback of the welfare state, a restructuring of government services, and extensive outsourcing. The 1980s thus saw the emergence of a new political doctrine in Australia, that of neoliberalism (Shaver 2002).

2.4. The rise of neoliberalism

Neoliberalism is not a new concept – in fact, its intellectual origins can be traced back as far as the Second World War (Peck 2010). However, neoliberalism entered the mainstream of politics and governance during the 1970s, first in the United States and the United Kingdom, and then Australia and Canada (Beeson & Firth 1998; Peck 2010; Peck & Tickell 2007). Neoliberal-focussed restructuring began in Australia in the 1970s with economists such as Dr H C Coombs, in an attempt to increase efficiency in governance (O'Neill & Moore 2005, p. 25). While Coombs understood the need for government intervention into markets, he saw greater benefits

arising out of management of resources in particular by corporate entities (Cook, I 1999).

Neoliberalism is a particularly aggressive ideology, whose focus on the market, hyper-individualism and a minimalist state makes it a powerful philosophy (Peck & Tickell 2002). It is more than a political ideology – it covers political, social and economic facets of life. It goes beyond the classical liberal conceptions of the minimal state, to restructuring governance in favour of global free trade, flexible labour and outsourcing of government functions to the market (Beeson & Firth 1998; Peck & Tickell 2002). In a similar vein to the hybrid adaptation of social liberalism and utilitarianism in Australia, our version of neoliberalism is not 'pure'. Indeed, as Peck asserts, neoliberalism is not, and cannot, be a pure political system, as it requires other government forms for its survival (Peck 2010, p. 8). It is an inherent tension in the system 'that neoliberals have never been able to live with, or without, the state' (Peck 2010, p. 20).

Tracing a clear path through the development of neoliberalism is difficult. Various, somewhat diverging strands of the ideology have evolved through history from Hayek and the Chicago School of Economics, to Ordoliberalism in pre-Second World War Germany, and the British rebellion against excessive government (Peck 2010). As it is not self-sufficient, neoliberalism does not seek to overtake existing government systems; rather, it seeks to reshape governments in favour of the principles of limited government, open

market and hyper-individualism (Harvey 2009). Peck (2010, p. 20) sums up neoliberalism in this way:

In the most abstract of terms, one can say that neoliberalization refers to a contradictory process of market-like rule, principally negotiated at the boundaries of the state, and occupying the ideological space defined by a (broadly) sympathetic critique of nineteenth-century laissez-faire and deep antipathies to collectivist, planned, and socialized modes of government, especially those associated with Keynesianism and developmentalism.

The contradiction that Peck writes of centres on the relationship between market and non-market forces. As discussed above, capitalism is inherently contradictory in nature, as is its relationship with government. Some measure of state intervention is always needed to correct market failures, meaning that even under neoliberalism the state cannot be abolished completely. Neoliberalism, however, puts extensive faith in market mechanisms and views the democratic state with suspicion, preferring governance by market elites and experts over the rule of elected officials (Harvey 2009). While neoliberalism cannot survive without a government to correct market failures, or to establish market conditions, its nature inherently puts it at odds with the state (Harvey 2009). Therefore, one of the key features of neoliberal government is to deregulate and re-regulate governance mechanisms, within the bounds of a stronger market and the decreased ability of states to interfere in its machinations (Konings 2012).

Neoliberalism is further characterised by a rejection of the Keynesian micro-economic management that had been a defining element of Australian governance starting from the end of the Second World War (Western et al. 2007, p. 402). In contrast to social liberalism's belief in the development of people through removal of material deprivation and the fostering of education and active citizenship, neoliberalism emphasises personal accountability and moral culpability for economic disadvantage (Shaver 2002). Neoliberals also seek the breakdown of traditional trade unions, while encouraging labour flexibility and a focus on employment over welfare dependency (Hartman, Y 2005, p. 60).

Widespread adoption of the neoliberal political doctrine in Australia has had a number of political manifestations. It has involved a shift in power from local levels of government to the national level (the level of the nation state), and further to supranational organisations such as the United Nations and the International Monetary Fund. State and local governments have moved towards direct service delivery, with the Commonwealth Government overseeing, controlling and funding projects, using mechanisms such as tied grants to enforce specific directions for projects (van Gramberg & Bassett 2005). Services have also been outsourced to non-government agencies, with a mixture of for-profit and not-for-profit organisations delivering services under the direction of state governments and the Commonwealth Government (Argent 2005; Peck 2010). Government services have also been downsized or abolished, leaving gaps in service provision that have been filled by not-for-profit or charitable organisations

(Nicholls 2014). In Australia, these changes have often gone under the banner of 'economic rationalism', a term originally coined during the Keating era (1991-1996), when the Commonwealth Government moved towards a less active and more 'managerial' structure (Fairbrother, Svensen & Teicher 1997, pp. 4-5; Stokes 2014, p. 195; Woodward 2005, p. 39).

Downsizing of government involvement at all levels in Australia's welfare services is linked to the social and political conservatism that has emerged in the wake of neoliberalism. Around such conservatism has developed a sense of tolerance for poverty, albeit against the backdrop of an individualist view of the causes of disadvantage (Manning 1998). Mendes has further added to understandings here, describing such changes as neoliberals having 'construct[ed] welfare recipients as fundamentally different from the rest of the community' (2009, p. 105). There is a tendency in the rhetoric of neoliberalism to demonise welfare recipients by questioning their moral culpability for their situation, and to focus on both a 'culture of dependence' and on welfare fraud (Argy 2003, pp. 14-15). This stands in stark contrast to Australia's earlier social liberal focus on the removal of material disadvantage and the structural view of poverty (Shaver 2002).

The shift towards neoliberalism in Australia has seen a focus on individual accountability and (perceived) personal 'failings' as the causes of disadvantage in peoples' lives (Castles 2001, p. 541). There is a strong moral message underpinning the rhetoric, of the deserving and the undeserving, strongly mimicking the British 19th century Poor Law, and the

beliefs of early religious charities in Australia (Mendes 2009, p. 106). Neoliberalism's hyper-individualism tends to deny, or, at worst, outright ignore, the social, political and economic factors that place certain groups of people in disadvantaged circumstances (Harris, P 2001).

The privatisation of many elements of welfare provision as discussed here has a profound effect on the way in which welfare is currently delivered in Australia. It has posed challenges, but also provided opportunities, with private organisations, in particular charities, bringing their own set of skills to welfare provision (van Gramberg & Bassett 2005).

2.5. Welfare in Australia

As discussed previously, the provision of welfare in Australia prior for the end of the First World War was characterised by stability and protection of industries, workers' rights and wages (Woodward 2005). The Depression and the Second World War saw a shift in values away from strong interventionist policies and extensive welfare. Since the end of the Second World War Australia has had what a number of commentators consider a limited, but effective, formal welfare state comprising a narrow system of benefits (in the form of pensions) that are means tested and provided directly to eligible individuals (Gilens 1996, p. 594; Shaver 2002, p. 333). This system is enshrined in the Australian Constitution, which grants the Commonwealth Government the right to provide, at a minimum: welfare to the elderly, through old age pensions; and benefits to parents, widows, students, people with disability and people who are unemployed. The

Constitution also mandates that the Australian Commonwealth Government provide individuals with medical and pharmaceutical benefits (*Australian Constitution Act 1900 (Imp)*, ss. 51 (xxiii) and 51(xxiiiA)).²

Australia's formal welfare system is supplemented by a high level of Commonwealth Government intervention in the market in order to set minimum wages and protect industry, with outcomes other nations achieve through formal welfare (Castles 1997; McDonald & Reisch 2008; Shaver 2001). The formal welfare system in Australia is considered to be one of the most cohesive and coherent systems in the world (Bolderson & Mabbett 1995; Castles 1997). Jessop (2002, p. 55) defines the Australian welfare system as a form of 'Atlantic Fordism', that is:

An accumulation regime based on a virtuous autocentric circle of mass production and mass consumption secured through a distinctive mode of regulation that was discursively, institutionally and practically materialized in the Keynesian welfare national state...

Broadly, the Keynesian welfare nation state is a mass-production, wage based society that values the determination to secure full employment, with a focus on the traditional family as the key unit of society and the primacy of the nation state over local governments (Jessop 2002).

² Section 51(xxiiiA) was added to the Constitution via amendment in 1946 (*Constitutional Alteration (Social Services) Act 1946 (Cth)*).

Esping-Anderson (1990, pp. 26-27) describes three categories of welfare states. The first is the liberal welfare state, characterised by residualised and strict welfare, a focus on the individual and a strong market. The second is the corporatist or conservative welfare state. This type is characterised by a formal class system, a strongly religious influence in government and a focus on the traditional family. The third is the social democratic state, with extensive welfare and redistribution schemes and government intervention in the market. Esping-Anderson describes Australia as archetypically liberal in nature, although in considering specific attributes he also notes a strong socialist influence. He traces this influence back to the strongly interventionist government, established during colonisation, as discussed above.

Castles (1997, p. 28) provides five unique characteristics of the Australian welfare system that sets it apart from other OECD nations: the provision of flat-rate transfer payments; means and asset testing for potential recipients; a lack of specified time for the receipt of benefits; funding through taxation; and payment of benefits at a replacement earnings rate. These characteristics have traditionally stood as a symbol of fairness and equity in the Australian liberal system. As such, the welfare system in Australia very much reflects the time in which it was created.

The formal welfare system expanded considerably during the post Second World War community building era, a time that enjoyed low levels of unemployment, strong economic growth and traditional social and family

structures (Bell 1993) These elements insulated the majority of citizens from the hardships that would otherwise be provided by the welfare system. During this time ‘... welfare states came to represent the ideas of social citizenship in which all members of society were to be assured a minimum standard of well-being and their recognition as of equal worth and dignity’ (Shaver 2002, p. 332).

The 1960s and 1970s saw a rise in demand for income support due to increased unemployment and unfavourable economic conditions (Graycar & Jamrozik 1991). Higher rates of female labour force participation and a shift away from the traditional family unit also changed the needs of welfare recipients (Harris, P 2001). During this time Australia strengthened elements of its welfare state, bringing in universal health care and raising the rates of pensions for people with disability, including people with mental illness, and the unemployed (Castles 1997). The early 1970s saw more progressive social policies leading to an expansion of welfare programmes under then Prime Minister Gough Whitlam; although many of these were rolled back by the Fraser Coalition government only a few years later (Jamrozik 2009). From the late 1970s the government began the process of limiting welfare spending (Graycar & Jamrozik 1991), however there was still an expectation that the government would provide for those unable to support themselves through wages (Shaver 2002).

Australia’s liberal-democratic system of welfare survived largely intact up until the 1980s, at which time the country was opened to the global market

and the Australian dollar floated (Castles 1994). The associated reduction in protectionism and rise of globalisation and neoliberalism changed the social, political and economic landscape, which had a significant impact on the welfare state. Ultimately these changes saw the Keynesian welfare state give way to a neoliberal workfarist state, bringing with it both advantages and challenges for individuals and for the not-for-profit sector.

2.6. From welfare to 'workfare'

Neoliberalism has had a significant impact on the welfare system in Australia. While traditional welfare in Australia was characterised as a socially progressive redistribution system funded by taxation, the 1980s saw a shift towards a market-based system with outsourced services and a focus on active engagement with individuals (Castles 1997; McDonald & Marston 2005). Rather than maintaining an artificial base level of wealth, active welfare aims to encourage upskilling, with the outcome of creating good economic citizens (Shaver 2002). The rise of neoliberalism allowed, or even demanded, a shift in service provision from governments to non-government entities, including for-profit businesses and not-for-profit organisations (Cahill 2013). Jessop cites the shift from 'welfare' to 'workfare' as a movement away from social democratic entitlements of welfare to neoliberal mutual obligation (Jessop 2002).

Workfare is a broad term used (often pejoratively) to describe a myriad of government welfare programmes that enforce mutual obligation or other work-like practices as part of their service (Peck 2001). The main aim of

most workfare systems is to move people off welfare and into employment quickly, and at minimal cost (Peck & Theodore 2001). Models of workfare differ between countries, services and even programmes. One of the advantages of workfare for services and government is its flexibility; there is no one workfare system, so programmes can be tailored to what works best for target clients (Besley & Coate 1992; McDonald & Marston 2005). Extreme versions of workfare can be seen in the United States, where job seekers are contacted daily to ensure that employment seeking or other mandated activities are being undertaken (Handler 2004). In Australia, mandatory job search programmes and training sessions are a fundamental part of Newstart – Australia’s unemployment benefit – particularly for the long-term unemployed (Morris, A & Wilson 2014).

The practice of workfare is a symbol of a fundamental underlying movement in the focus of unemployment and welfare generally. This measure relates to a shift from the post-Second World War ideal of full employment to the notion of ‘employability’, with an emphasis on lifelong learning, constant upskilling and worker flexibility (Jessop 2002). Much of this movement is a consequence of the casualisation of the workforce, with workers forced to adapt to part-time and contractual work, moving the labour force away from the traditional stability of lifelong employment and nine-to-five work (Hancock 2002; Peck & Theodore 2000). In Australia, casual employment is also rapidly replacing full-time work, providing poorer job security and often reduced incomes for employees (Swan 2005). The use of workfare

ideals can also be seen in an increased focus on higher education, work-based further or re-education programmes and re-training (Esposito 2011).

Workfare programmes can help prepare individuals for participation in a new, less stable workforce. This participation is achieved through programmes fostering personal accountability and flexibility, providing opportunities for individuals to increase their skills or to re-train to aid in finding employment (Standing 1990, pp. 680-682). Some argue, however, that workfare is not just about getting individuals back into the labour force. Peck (2001), for example, contends that it is not only the outcome but also the purpose of workfare to push individuals into the bottom of the job market (low-skill, insecure, casual and short-term employment), which results in them returning cyclically to the workfare system. This cyclical return is not necessarily the desired outcome of workfare; rather it is more of a side effect. It is a result of neoliberalism more broadly, rather than one directly caused by workfare schemes. The loss of unskilled labour in Australia due to economic changes – such as the movement of many industries, especially manufacturing, offshore to minimise production costs – and the development of new technologies has eroded options for a segment of the population: largely unskilled and semi-skilled blue collar workers (Disney 2004).

Beyond the practical aspects, the popularity of workfare among both governments and the broader community generally, is based on

assumptions about unemployed people, especially the long-term unemployed. For, as Peck (2001, p. 17, original emphasis) notes:

like it or not, workfare tells a compelling story. It is a story about the failings of the poor and the virtues of hard work; it is a story which emboldens reformers and wrong-foots opponents; it is a story that chimes with parallel concerns for the desirability of flexible labor markets, governmental austerity, and local discretion; it is a story which many *want* to hear.

The key point in Peck's commentary here is the importance of, and focus on, paid employment in neoliberal political frameworks. As another academic has put it: 'Work is necessary for survival. In the contemporary discourse it is also widely associated with the virtues of personal empowerment, independence, social inclusion, and self-realization' (Gilbert, N 2005, p. 13). The focus of neoliberal workfare then becomes getting people into *any* type of work, and *as soon as possible*. Accordingly, the cycle of welfare dependency and short-term work has changed the types of services that people require, and the length of time for which they are needed. This in turn has reshaped the types of services available, as organisations struggle to meet the needs of an increasingly diverse group of people seeking more labour-intensive assistance.

Arguably, workfare in Australia is not as extreme as the United States, but programmes such as 'work for the dole' fall under the workfare banner, as

does the principle of mutual obligation. Since the beginning of the 1990s, welfare has been seen by governments, and by many sections of society, as synonymous with abuse and dependency. The traditional liberal welfare system was dismissed as 'passive', promoting an over-reliance on the state, rather than a willingness to better oneself (Shaver 2002). The move towards mutual obligation policies in Australia has been promoted as an attempt to correct this situation, with the assumption that moving to a more active welfare regime facilitates long-term solutions to hardship and welfare dependency (Cook, K 2012; Morris, A & Wilson 2014; Shaver 2001). Early work for the dole initiatives were introduced by then Prime Minister Paul Keating in 1994, under the mantle of 'reciprocal obligation' and as part of his Working Nation package (Disney 2004, p. 197). While previously opposing this programme, his successor John Howard introduced a similar scheme in 1997 – termed mutual obligation – making work for the dole compulsory for the long-term unemployed and enforcing stricter job search requirements (Disney 2004; Quiggin 2004).

Outsourcing was one of the key changes in the new Howard-led mutual obligation push. The government-run Commonwealth Employment Service was replaced by the Job Network, a loose collection of for-profit and not-for-profit non-government organisations selected through competitive tendering (McDonald & Marston 2005; Quiggin 2004). Several hundred organisations were awarded contracts in Australia, each charged with helping people find employment; the belief was that having a series of organisations rather than one would foster competition and innovation in the

sector, with more informal and individual service provided to clients (Considine 2004; Disney 2004). While some ancillary functions had been outsourced before by government agencies, this was the first time the core business of job searching was wholly contracted out (Considine 2004). Despite the philosophy behind outsourcing, the implementation of the Job Network structure was problematic, with organisations having difficulties predicting client numbers and potential costs, and the loss of some elements of innovation through the competitive tendering process (Disney 2004). Despite the early hiccups, the tendering process continues today.

The expressed purpose of mutual obligation policies in Australia remains one of getting people (back) into 'work habits' in preparation for a return to employment (Morris, A & Wilson 2014; Shaver 2002). Such incentives are focussed generally on people experiencing unemployment, but have been broadened recently to include some groups of people with disability, and people on single parent pensions (Disney 2004; Grahame & Marston 2012). Activities are not limited to job seeking, but may include attending training or assessment courses, involvement in education programmes – for example, universities or vocational educational training – and community or charity work (Department of Human Services 2015b). In extreme cases income management programmes are enforced for certain individuals (Department of Human Services 2015a). Many of these programmes, however, suffer from limitations of funding or manpower, often making mutual obligation more about rhetoric than results (Disney 2004).

Workfare policies have attracted much criticism over time (Dee 2013; Grahame & Marston 2012; Halvorsen 1998; Handler 2004; Peck 2001). A key focus of such criticism is the use of incentives and disincentives, and particularly how these sticks and carrots are not sufficient to provide *all* that is needed for people to gain and maintain steady employment. Support, as well as motivation, is needed. In theory these necessities are provided by the individualised system, but in practice the system is more about moving people between insecure employment and workfare (Peck 2001). The need for suitable employment to be available, for tightly targeting programmes to specific groups in need and for proper infrastructure to support organisations to deliver mutual obligation programmes makes workfare systems only effective for a limited time (Peck & Theodore 2001). Ensuring people have a liveable wage for a minimum standard of living is arguably desirable; something else not provided for with the lower rates of income support offered under Newstart and associated mutual obligation focussed welfare payments (Morris, A & Wilson 2014).

Government enforcement of lower income support limits for recipients of certain welfare payments has been introduced with the express purpose of providing incentives for people to move into paid employment, which, when coupled with mutual obligation rules, exists to push people *through* and *out* of the system as quickly as possible (Peck 2001, p. 12).

A further important consequence of a neoliberalised welfare system is the way such systems distinguish between welfare recipients. One of the

cornerstones of early social liberalism in Australia was empathy towards people who are disadvantaged, coupled with a belief in structural causes of poverty (Argy 2003; Castles 1994). This has always been, to an extent, more evident in rhetoric than in policy. A distinction is regularly made between the 'deserving' poor, who are disadvantaged through no fault of their own, and the 'undeserving' poor, who are seen to have caused their own disadvantage (Wilson, S & Turnbull 2001, p. 388). People on welfare who may be seen to be 'deserving' are people who, through no fault of their own, are in a poor and vulnerable financial and social position. Age Pension recipients and to a lesser extent those who receive a Disability Support Pension tend to be seen as the 'deserving' poor (Mendes 2009; Will 1993). On the other hand, people experiencing unemployment, particularly long-term unemployment, or who are on single parent benefits, are often considered 'undeserving' of extensive help, having seemingly 'chosen' their current situations (Chunn & Gavigan 2004). This comes back to notions of personal responsibility and accountability, and the individualist view of welfare.

Finally, in discussing the shift from welfare to (neoliberal) workfare, it is important to note that the workfare system has affected not only governments and the people in receipt of welfare, but also the third sector – that is, the charitable and not-for-profit organisations that are part of the rollout of outsourced non-government organisations providing previously government-directed functions. The remaining discussion in this chapter now considers the impact of these trends on charity and welfare in Australia.

2.7. Charity and welfare in Australia

At the time of Federation, when the welfare state was still in its infancy (Lyons 2001), disadvantaged Australians were largely dependent on charities for help (Murphy 2006). Such charitable organisations – both religious and secular – tended to be institutional care centres that sought to integrate people back into society through the reformation of their perceived ‘faults’. As Dickey (2003) has noted, religious charities in particular focussed on this form of ‘charity’. Charitable institutions assisted people from a broad range of backgrounds, from unwed mothers to Indigenous Australians, working to ‘reform’ them from whatever behaviours were deemed problematic, and then generally placing them into some form of farming or domestic work (Hilliard 1986).

While there were a few government run institutions (such as the Destitute Asylum in South Australia), most were overseen by Christian churches of various denominations. Non-government, charitable and religious organisations fell outside the formal welfare system entirely, operating independently to help people who were unable to receive assistance from government support. Some early secular charities were provided with government funding, however the religious institutions providing care were generally denied any grants (Dickey 2003; Murphy 2006). The absence of such support for religious institutions reflected the dim view governments took of providing monetary support to religious organisations in the early years after Federation, stemming from concerns that government maintain

a secular administrative focus and avoid the religious domination of the state seen in the United Kingdom (Hirst 2000).

Australia's national government has long had a complicated relationship with religious charitable organisations (see chapter four for further discussion). As a consequence, early religious charities were funded through private and individual philanthropy and by their clients undertaking labour on their behalf – for example, unwed mothers undertaking laundry work in charitable institutions (Hilliard 1986). After the Second World War, the government expanded its formal welfare system for people experiencing various types of disadvantage, as well as pursuing its goal to improve economic and social standards and achieve full (male) employment (Harris, P 2001). Subsequent societal shifts improved living conditions and changed the nature of disadvantage, as well as what was needed and expected from charities. Along with the change in need for the recipients of welfare, the government in the post-Second World War period expanded government service provision. The third sector continued to help people who fell outside the welfare system, as well as those for whom the system was inadequate, to provide all the basic services they needed.

As noted earlier, the rise of neoliberalism has seen three major shifts that have changed the position of charitable organisations: the opening up of the market which precipitated a move away from traditional employment to 'precarious' employment, such as temporary, casual and seasonal work; movement away from government welfare to an outsourced system of

private organisations providing social supports among other assistance measures; and a shift in rhetoric of welfare from entitlement to mutual obligation (Shaver 2002). The rollback of government welfare thus was matched by the rollout of non-government structures to support welfare (van Gramberg & Bassett 2005). As a consequence of the second shift in particular, the private for-profit and not-for-profit sectors have become integral parts of Australia's welfare sector. All of these shifts have impacted upon the way in which the charitable sector operates in Australia, and its relationship with government at all levels. This means that as well as its previous role of providing a further safety net for people who fall through formal welfare channels, the charitable sector now occupies a quasi-governmental role as a provider of formal welfare services (Murphy 2006).

The shift towards outsourcing of welfare services has had other clear social impacts. It accompanied, for example, an increased focus on volunteerism in the community. As part of their move away from providing formal government welfare, the Commonwealth Government began to endorse and encourage greater levels of community engagement with volunteer organisations (van Gramberg & Bassett 2005). The assertion of neoliberal governments generally, and certainly governments in Australia, is that the private sector, particularly the not-for-profit sector, is better equipped and arguably more motivated to provide services to people than government (van Gramberg & Bassett 2005). The faith in the market as a mechanism for organising society is the driver behind such neoliberal assumptions that non-government organisations (especially for-profit organisations) are best

positioned to supply (superior) products and services (Western et al. 2007). Transfer of responsibilities around welfare provision to the third sector – while seemingly somewhat counterintuitive – is closely aligned with neoliberal ideals of ‘big society’ and small government (van Gramberg & Bassett 2005).

As is a common feature of neoliberalism, the rhetoric of volunteerism hides the reality of a shift away from formal government welfare (van Gramberg & Bassett 2005). Rhetoric is a particularly powerful tool in neoliberalism (Harvey 2007). Outsourcing vital functions has impacted upon the government in several ways. The shift from service provider to administrator of outsourced organisations has blurred the lines between the public and private sectors, leading to questions around social norms, ethics and codes of conduct, and how they apply to contracted organisations (Mulgan 2005).

Devolution of responsibilities around welfare to not-for-profit and charitable organisations has also created both opportunities and challenges for individual services and for the sector in general. Outsourcing provides a potential new source of funding for not-for-profit organisations that are otherwise dependent on an unreliable stream of private donations, business sponsorship and philanthropy. This new income stream, however, comes with some challenges for not-for-profit organisations. The use of tied grants – money allocated for specific projects – allows government to attach conditions to the provision of money to organisations. Such conditionality has often been used to quell the political and lobbying actions of the

recipient organisations (van Gramberg & Bassett 2005). Van Gramberg and Bassett (2005) note that this was a particularly widespread practice under the Howard government, to the frustration of many not-for-profit organisations. Lyons and Passey (2006) further commented that while the rise to prominence of tied funding as an attempt to formally prevent government-linked organisations from engaging in political lobbying – particularly at the federal level – was unsuccessful, government is still able to reign in unwanted behaviour by not-for-profit groups.

Further challenges exist for not-for-profit organisations in providing outsourced government services. Key among these is the issue of managing the collection and sharing of information under government contracts. While organisations may have their own procedures for data collection, governments tend to impose further requirements as a condition of receiving grants. This is particularly problematic for organisations where the collection of data is difficult, or where the data collected are relevant to the government, but not to the organisation (van Gramberg & Bassett 2005). With funding often tied to specific benchmarks and outcomes, this information is needed to prove that targets are being met. Palmer (2013, pp. 234-235) asserted that some organisations have expressed difficulty in meeting reporting requirements, often due to the high costs of maintaining transparency and the lack of tailored disclosure requirements for smaller organisations. Issues related to the sharing of information become even more complicated when clients interact with more than one service. The previous organisational structure of welfare saw large government agencies

providing a variety of different services; as such, sharing of information, while not always easy, was achievable. Outsourcing of individual services, competitive tendering for providing services and the corporatisation of not-for-profit organisations has made information sharing close to impossible (Bush 1992).

Different processes between organisations and competition for tenders (and for clients) also means that organisations are reluctant to provide information to one another (Carey, Braunack-Mayer & Barraket 2009). This not only applies in relation to clients, but also to organisational models and innovative programmes. In theory, having many services with different approaches provides opportunity to develop and evolve new and innovative ways of delivering welfare services. In practice, organisations are reluctant to share such innovations and new and potentially revolutionary systems are treated as trade secrets (Bush 1992; Carey, Braunack-Mayer & Barraket 2009).

The competitive nature of tendering to provide assistance to disadvantaged individuals and households has raised other challenges for not-for-profit organisations. Competitive tendering has forced many organisations to professionalise their operations (Carey, Braunack-Mayer & Barraket 2009; Considine 2003). In many ways this trend has emerged as not-for-profit organisations have been required to compete not only with one another but with for-profit businesses, obliging them to mimic the behaviours of the for-profit organisations in order to be acknowledged by government (Hwang &

Powell 2009). This shift in operational structures and practices has clearly burdened many not-for-profit organisations in relation to time and money, however, it also has potential positive elements. Professionalisation has allowed organisations to streamline their operations and create corporate structures that can provide protection to the organisation, as well as facilitating the development of necessary education and training programmes for workers, both paid and unpaid (Hwang & Powell 2009).

It is not just government tendering processes that have influenced the professionalisation of not-for-profit organisations. The neoliberal system has changed the behaviour of the corporate world. Many businesses are now looking to provide sponsorship to not-for-profit organisations but expecting more in terms of organisational professionalism (Maier, Meyer & Steinbereithner 2016; Stewart & Faulk 2014). Competition for funding from businesses and from private philanthropy among not-for-profit organisations has meant that organisations need to stand out, making a professional approach more desirable (Lyons 2001). The need to look more professional, and to operate in a more streamlined and business-like manner has therefore come not only from the influence of government contracts but also through competition with businesses, other not-for-profit organisations, and from the public (Hwang & Powell 2009). The rise in volunteerism in the not-for-profit sector – and burgeoning interest from the corporate sector in supporting not-for-profit organisations – has made it harder for smaller and less professional organisations to survive in a competitive funding regime

(Lyons 2001; Tually et al. 2013). This tension between larger and smaller charities is discussed further in chapter four.

The rhetoric of mutual obligation has also seeped into the not-for-profit sector, particularly as organisations require more from their clients in return for assistance, and as self-reliance is extolled as a desired virtue among those receiving help (Parker & Fopp 2004). Much of this rhetoric and the practices associated with it, such as mutual obligation, has come from government tenders rather than from not-for-profits themselves.

Many not-for-profit organisations actively lobby for changes in welfare and provide advocacy for their clients in relation to issues such as the receipt of welfare payments. These practices have put many charities and not-for-profit organisations in a difficult position, not only as advocates for change on behalf of their clients, but also as providers of mutual obligation services that organisations themselves may not necessarily agree with (Lyons 2001). Even organisations that are not in receipt of government tenders have felt the strain of new approaches to welfare, with some taking on new philosophies and practices in order to attract funding, and others shunning any government aid in order to maintain their principles (Casey & Dalton 2006). The problem occurs too in the interplay between the not-for-profit and for-profit sectors, where business imposes conditions on charitable organisations in return for funding (Lyons 2001). These challenges around the new (neoliberal) order of welfare provision exist for all organisations, and, as will be discussed at length later, even for soup kitchens, which rarely

receive direct funding from any levels of government to fund their operations.

2.8. Soup kitchens and the welfare state

Soup kitchens occupy a unique space in both the third sector and under neoliberal political regimes generally. On the one hand, they align strongly with neoliberal ideals of big society: they are staffed by volunteers, and almost solely funded by business and the community, using rescued or community-donated food to provide private charity to disadvantaged people (Teron & Tarasuk 1999). On the other hand, they are the antithesis of neoliberal charity, providing food to people without seeking anything in return (Johnsen, Cloke & May 2005). Additionally, while many are supported by larger corporatised charities that receive government funding or tenders for other projects, soup kitchens tend to be either small non-corporate entities or are a subset of a larger entity, with funding for ancillary activities, although, in Australia, not for the soup kitchens themselves (Lindberg et al. 2015; McCosker 2016; Sanders 2013; Wicks, Trevena & Quine 2006). In the United States, by contrast, some soup kitchens receive government aid, through grants or provision of surplus food (Berg 2008; Poppendieck 1994; Reschovsky 1991). On the face of it, it appears that soup kitchens alone have not corporatised the way other types of services have. This is not to say though that they have been completely immune to the shift towards neoliberalism.

Arguably the most noticeable change in soup kitchens because of neoliberalism has been an expansion in their services and reach. Smaller soup kitchens that traditionally served single meals once or twice a week have expanded to cover multiple days and to provide multiple meals each day. This trend is clearly related to increased demand for such services. It has seen soup kitchens move away from their traditional role of 'emergency' services to become longer-term assistance measures. Financial stability and accountability of, and within, soup kitchens has become more important as they evolve into larger and more professionalised services (Poppendieck 1998).

Moreover, and as is discussed further in chapter four, soup kitchens are an unusual form of charity that often sit at odds with other charitable services. They also challenge the neoliberal doctrine, even though they are, to an extent, a function of it. Soup kitchens survive in a controversial space. They are in many ways the epitome of 'hand out' welfare; a traditional form of welfare that does not fit well with neoliberal inspired 'hand up' welfare measures. This tension around service provision is not lost on the people who run soup kitchens, as will be discussed in relation to the field research later in this dissertation.

2.9. Conclusion

Australia has seen ideological and practical shifts in the structuring and provision of welfare in the many decades since Federation. The institutions of welfare have evolved through, and alongside, classical liberalism that

defined the post-Second World War era to the rise of neoliberalism in the 1980s through to today. While classical liberalism put the rights and welfare of its citizens first, neoliberalism has seen a retreat from the more positive rights of equality of outcome that have made Australia largely egalitarian, at least in intention if not always in practice. Indeed, the main weapon of neoliberalism is its rhetoric, and while the doctrine has changed the economic and political systems of Australia substantially, its greatest impact has been in social spheres.

There is a direct and inverse relationship between the shift in the formal welfare system in Australia and changes in the size, nature and number of not-for-profit and charitable organisations operating to improve outcomes for disadvantaged Australians. Restructuring of welfare supports and institutions indicates that the not-for-profit sector is expected to, and succeeds in, filling the gaps evident in national welfare structures (Murphy 2006; van Gramberg & Bassett 2005). What isn't clear in this picture, however, is whether the services that not-for-profit organisations are providing are the same as those being stripped from government, or, if they offer important differences that mean service delivery by not-for-profit organisations is more effective and efficient than (past) government sector structures. The discussion of the replacement of services by the not-for-profit sector is a broad one, and outside the scope of this thesis.

Soup kitchens have clearly been affected by the movement of governance from extensive welfare provision to neoliberal rollback. This is the case

despite the lack of funding received by them from government institutions, with all the conditions that such funding imposes. As will be addressed in subsequent chapters, shifts around government welfare provision impact upon the importance of soup kitchens in a number of ways: through the propensity of services to use and attract volunteers; acceptance of the existence of such services; and increased demand for them. To understand why soup kitchens continue to exist, evolve and even flourish in the 21st century, one must consider the social, economic and political conditions that influence poverty, volunteerism and welfare. Building upon this groundwork, the next chapter explores the people who have been negatively affected by the rollback of welfare in the Australian neoliberal political economy. Hypothetically, at least, it is these people who are attending soup kitchens.

Chapter 3

Accommodation, finance and social inclusion

3.1. Introduction

Building on the previous chapter's exploration of government, welfare and neoliberalism, this chapter examines the circumstance of Australians experiencing various types of disadvantage. In line with the key questions asked in the dissertation, this chapter focuses on the factors known and/or assumed to lead to individuals using soup kitchens. Such situations include, but are not limited to: accommodation issues, including homelessness and housing stress (Baker, Mason & Bentley 2015); financial difficulties; and social concerns, such as social exclusion and social isolation.

As explored in the previous chapter, there has been a relatively recent shift in the actions of governments of all levels away from a focus on structural inequalities to notions of individual risk and personal responsibility (Castles 2001; Harris, P 2001; Manning 1998; Mendes 2009; Shaver 2002). The discussion here explores the continued tensions between emphasis on structural and individual factors surrounding inequality and disadvantage, resulting from the rollback of formal government welfare. The chapter brings together the issues of financial, housing and social disadvantage to consider how and why they may result in soup kitchen attendance, and what role soup kitchens play in delivering solutions; a theme also central to later discussions around the field research conducted for this dissertation.

3.2. Accommodation concerns

For the purpose of this thesis, two specific issues around accommodation are addressed: housing stress (problems with housing affordability) (Baker, Mason & Bentley 2015); and homelessness (primary, secondary and tertiary) (Chamberlain & MacKenzie 2008). These issues are strongly associated with questions of inadequate finance and social exclusion, and are believed to contribute to the circumstances that result in people using the services provided by soup kitchens. Issues of housing instability and homelessness are intricately tied to notions of home – an ambiguous and contested concept that has multiple dimensions and meanings (Parsell 2012; Robinson, C 2002). The importance of housing and the notion of home has changed over time, from referring to one's country of origin, to the centrality of the family and personal or individual property (Moore, J 2000, pp. 208-209).

Housing can be both a means to an end, as well as an end in itself (Clapham 2002). Elements of the definition of home include: security of tenure; adequacy of shelter; security; affordability; safety; and accessibility (Robinson, C 2002, p. 32). Home also has a psychological and social element, although some academics have argued that discussions of these are overstated (Moore, J 2000; Somerville 1992). It is also argued that home is not necessarily psychologically positive; home may carry negative connotations and impacts where families are dysfunctional, or experience domestic or family violence (Chamberlain & Johnson 2001; Moore, J 2000; Morley 2000). Further, some feminist scholars argue that home carries

negative associations with the traditional family and patriarchy (Mallett 2004; Watson, S & Austerberry 1986). Non-traditional families may also experience negative conceptions of home (May 2014).

Notably, conceptions of home also differ between cultures, with this particularly evident with regard to Australia's Indigenous peoples. Given that Australia's Aboriginal and Torres Strait Islander population is a highly culturally heterogeneous population, there is no single cultural conception of home among Indigenous Australians. Additionally, Indigenous conceptions of home have been affected by experiences of colonisation, oppression and dispossession (Anderson & Collins 2014; Grant et al. 2016; Neutze 2000; Zufferey & Chung 2015). Moreover, home is not a physical structure in Indigenous cultures; it is a state related to 'country', expressed through connection with land (Habibis et al. 2013; Memmott & Chambers 2010; Memmott, Long & Chambers 2003; Parsell 2010). Cultural norms, such as those around mobility, knowledge sharing and spiritual beliefs and cyclical migration also contribute to understandings around what home means to Indigenous Australians (Anderson & Collins 2014; Habibis 2011; Habibis et al. 2013; Memmott & Chambers 2010).

Home does have a symbolic meaning then – through autonomy and control over one's environment, self-expression, the capacity to reflect our personalities to ourselves and the ability to create a sense of belonging in our community (Baum & Palmer 2002; Clapham 2002; Hill 1991; Neil & Fopp 1992; Saunders 1989). Home can also be a way of escaping from the

wider world, an inner sanctum where we only admit those we wish to engage with (Tomas & Dittmar 1995).

Home may hold a symbolic meaning in particular for those who are living on the streets, or who have been displaced from their homeland (Moore, J 2000). Those sleeping on the streets may see 'their' street, alley or park as home, as they form social attachments to others also sleeping rough (Somerville 1992). This notion has been challenged, however, with some academics arguing that 'home' becomes a more narrow concept to those sleeping rough – simply as a house, rather than as a place of belonging, or as a connection to the community (Parsell 2012). Home, then, is an ambiguous and contested term. It can be a commodity that holds many traps for individuals.

3.2.1. Housing stress

Australia's housing has been identified as among the least affordable in the world (Baker, Mason & Bentley 2015, p. 275; Beer et al. 2016, p. 1544; Demographia 2016, pp. 15-16). It is generally accepted that '[housing] is, for many people, their major expenditure and largest ongoing household cost' (Baker, Mason & Bentley 2015, p. 1). The most accepted and applied measure of housing affordability is the Median Multiple, adopted and implemented by organisations such as the United Nations and the World Bank (Demographia 2016). This indicator is a simple measure of median house prices against annual median income. If median house prices represent 2.0 to 3.0 times the annual median income, they are deemed to

be affordable (Demographia 2016, p. 7). Anything above this amount is considered unaffordable. In 2015, Australia's country-wide Median Multiple was judged extremely unaffordable at 6.4 (Demographia 2016, p. 15), and Sydney was found to be one of the least affordable cities in the world at 9.7 (Demographia 2016, p. 15). Adelaide's Median Multiple was 6.4, extremely unaffordable (Demographia 2016, p. 15). This has been a trend in Australia: 'For the 12th year in a row ... all of Australia's five major metropolitan areas were severely unaffordable' (Demographia 2016, p. 15).

By international standards, housing affordability in Australia is a significant problem and has been for some time. Affordability has a complex relationship with standard of living. While gross incomes may increase, housing affordability, as well as the affordability of other consumer goods impacts upon the overall standard of living and the availability of discretionary income (Demographia 2015). The less discretionary income available – the money left in a household budget after paying for necessities such as housing costs, utility bills and purchasing groceries – the lower the population's standard of living (Demographia 2015, pp. 26-27).

In Australia, housing stress has been identified as a significant problem, particularly as home ownership rates have declined (Beer et al. 2016; Marks & Sedgwick 2008; Wood, Ong & Cigdem 2014; Yates 2008). Housing stress is measured using the 30:40 rule, 'where a household is in housing stress if its housing costs exceed 30 per cent of income and the household is in the bottom 40 per cent of the income distribution' (Rowley, Ong & Haffner 2015,

p. 474). For those above the 40 per cent income distribution, spending in excess of 30 per cent of their income is seen as a choice or trade off made in order to reap the benefits offered by more expensive housing, rather than based on necessity or availability (Baker, Mason & Bentley 2015; Gabriel & Coleman 2011; Rowley, Ong & Haffner 2015; Rowley, Ong & McMurray 2010). Extreme housing stress is defined as housing costs above 50 per cent of household income (Russo 2015, p. 7).

The most advantageous form of tenure in Australia – and the ‘great Australian dream’ (Badcock & Beer 2000) – is owner occupation without a mortgage (outright ownership) (Bruce & Kelly 2013). This form of tenure provides the highest level of housing security and lowest housing costs (Bourassa, Grieg & Troy 1995, p. 83). Home ownership under a mortgage is less stable, but still provides a higher measure of stability than rental housing. One of the main issues for Australians, especially those on lower incomes, is the increasing inability to afford to transition from private rental into home ownership (Berry 2003; Marks & Sedgwick 2008; Yates 2008). This is particularly the case for young Australians seeking to purchase their first home (Brown et al. 2011). The inability of people to afford home ownership has subsequently put pressure on the private rental market (Beer, Kearins & Pieters 2007; Hulse et al. 2015; Robinson, E & Adams 2008).

Traditionally, private rental was largely a transitional tenure for those moving into home ownership (Beer et al. 2011; Beer, Kearins & Pieters

2007). Unlike the experience in some European nations, Australian private rental housing is not owned by large companies, but rather by so-called 'mum and dad investors'; owners of one or two investment properties (Beer 1999; Tually et al. 2015, p. 12). This means that stock is limited, and often expensive, as owners seek to maintain rents at levels to cover mortgages and because their investment decisions are driven by the expectation of sufficient capital gain over time (Berry 2000; Hulse & Burke 2015; Hulse et al. 2012). The Australian rental market also does not offer long-term tenure to tenants, with landlords retaining considerably more rights over dwellings than is the case in many other countries (Hulse & Burke 2015; Hulse et al. 2012). This makes private rental one of the most insecure tenures in Australia (Baker, Bentley & Mason 2013; Beer et al. 2016).

Further pressure has also been placed on the private rental market through the residualisation of the public housing sector (Gilbert, T 2011b; Jacobs et al. 2010). Australia's stock of public housing is declining. Public housing has occupied an important place in the housing market; providing a stock of housing for eligible people, with rents set at a fixed proportion of the tenant's income (Hayward 1996; Jacobs et al. 2010). Research has consistently shown that this form of housing provided strong stability to tenants coupled with low and assured housing costs (Atkinson & Jacobs 2008). However, neoliberal policy, as in many other areas, has seen the public rental sector both downsized and outsourced. Consequently, public rental housing stock has been either sold off or transferred to the management and administration of non-government organisations, which generally have their

own (albeit similar) rules around eligibility, rent-setting and security of tenure (Blessing 2012; Gilmour & Milligan 2012).

Outside the mainstream tenures there are other alternatives, which provide different measures of security to occupiers. Community, strata and cooperative housing provide limited ownership, while caravan parks, boarding houses and other forms of emergency accommodation are generally not considered to be 'homes' in an objective sense (Goodman et al. 2013).

Housing stress, for both mortgage holders and those in private rental, can have significant negative consequences for individuals and households. One's housing situation 'influences health through a variety of psychological mechanisms linked to building type, height above the ground, and housing tenure...' (Costa-Font 2008, p. 480). It is widely believed that affordable housing provides people with better economic, employment and social opportunities (Leventhal & Newman 2010). Conversely, poor and unaffordable housing creates many issues. After housing cost poverty – a lack of income after housing costs are paid – is associated with limited resources for leisure and social interaction, as well as problems of affording medical treatment (Gilbert, T 2015).

Poor housing can lead to poor health, whether through overcrowding, poor physical structure, lack of affordability or stability (Baker et al. 2014; Leventhal & Newman 2010; Solari & Mare 2012; Tunstall et al. 2013).

Notably, unaffordable housing, housing that is of poor condition or the loss of stable and appropriate housing can also impact negatively on an individual's or household's mental health (Bentley, Baker & Mason 2011; Burgard, Seefeldt & Zelner 2012; Robinson, E & Adams 2008; Wells & Harris 2007).

Australian state governments and the Commonwealth Governments have attempted to relieve the pressure of housing stress through approaches such as providing benefits and exemptions to home owners and home purchasers, in order to relieve the cost burdens. Other methods include exemption from certain taxes, the removal of the home from welfare asset tests and negative gearing (Burke, Stone & Ralston 2014; Worthington 2012).³

For first time home owners, the Australian government has a history of providing grants, beginning in 1964, with the Home Savings Grant Scheme (Randolph, Pinnegar & Tice 2013). In 2000 the First Home Owner Grant was introduced (with the previous scheme disbanded in 1993), with an initial grant of \$7,000 available to eligible people (Burke, Stone & Ralston 2014, pp. 18-19). For private renters on lower incomes, the Commonwealth Government provides Commonwealth Rent Assistance (CRA) to help households cover (some) accommodation costs (Berry 2003; Wood & Ong 2011). Despite such schemes, households continue to experience housing

³ 'A rental property is negatively geared if it is purchased with the assistance of borrowed funds and the net rental income, after deducting other expenses, is less than the interest on the borrowings' (Australian Taxation Office 2017).

stress, and many individuals continue to fall into homelessness – the ultimate reflection of housing market failure for an individual.

3.2.2. Homelessness

Internationally and in Australia, there is no single definitive, settled understanding or definition of homelessness. How homelessness is defined is contested, as parameters for defining homelessness reflect different agendas and interests (Breakey & Fischer 1990; Chamberlain 2014; Jacobs, Kemeny & Manzi 1999; Schiff 2003). This section explores the continuum of meanings surrounding homelessness and those who are captured within the definitions. While the soup kitchen population is not made up entirely of people experiencing homelessness (as the findings of this thesis show) the literature on soup kitchens considers homelessness to be the major driver of soup kitchen attendance, and soup kitchens address many of the issues causing, and caused by, homelessness (Biggerstaff, McGrath Morris & Nichols-Casebolt 2002; Bowering, Clancy & Poppendieck 1991; Dachner et al. 2009).

Three major definitions of homelessness are explored here. The first is the narrow definition, which, in essence, confines homelessness to 'rooflessness', or the absence of shelter (Chamberlain & Johnson 2001; Somerville 1992; Zufferey & Chung 2015). The second is the cultural definition (Chamberlain & Johnson 2001; Chamberlain & MacKenzie 2003). This definition informs the legal and statistical definitions of homelessness in Australia. The third is the broadest definition, that of 'rootlessness', that

is far more subjective and psychological in nature than the alternative definitions (McNaughton 2008; Somerville 1992).

The narrowest definition of homelessness focuses solely on 'rooflessness'; the absence of any shelter at all (Chamberlain & Johnson 2001, p. 36). This definition confines homelessness to what is colloquially termed 'rough sleeping'; sleeping in cars, on the streets, in parks, or in other public places. It is a clear and unambiguous definition, and focuses on the most visible and problematic type of homelessness. The definition does not include 'couch surfers' – people staying with friends or family in emergency situations – or people in insecure or inadequate housing (Zufferey & Chung 2015).

At a theoretical level, the narrow definition does not consider these circumstances, which McNaughton (2008) terms 'hidden' homelessness, and fails to recognise the fluid nature of people's journeys through rough sleeping and other forms of temporary accommodation (Clapham 2003, pp. 120-121).

On a more practical level, the definition places the focus of aid for people experiencing homelessness solely on the provision of shelter (Clapham 2003; Zufferey & Chung 2015). Under this definition provision of shelter arguably takes someone out of homelessness, no matter how insecure or short-term such accommodation may be (Somerville 1992). The provision

of short-term or inadequate shelter may lead people back into rough sleeping.

The cultural definition of homelessness, as conceptualised by Chamberlain and MacKenzie (2003) broadens the rooflessness definition of homelessness, so that it includes not only sleeping rough, but couch surfing and living in temporary or emergency accommodation. The definition takes into account the minimum standards of housing, using it as a basis for considering where homelessness begins and ends. The *Supported Accommodation Assistance Act 1994* (Cth) uses the cultural definition, setting down specific criteria for homelessness in Australia. Section 4 of the Act provides that a person is taken to be homeless if they are without 'access to safe and secure housing'. And housing is inadequate where it:

- is likely to cause damage to a person's health;
- poses a threat to the safety of the person;
- fails to provide adequate access to important places;
- lacks the appropriate economic or social supports; or
- is unaffordable.

Similarly, the relatively new definition of homelessness developed and used by the ABS (2012b) provides a narrower conceptualisation of homelessness, which considers a person homeless if they have no alternative accommodation and their current accommodation:

- is an inadequate dwelling; or
- has limited or no tenure; or

- does not provide space for social relations.

The ABS definition takes into account elements of choice, excluding people who 'have the capacity to access other accommodation alternatives that are safe, adequate and provide for social relations' (Australian Bureau of Statistics 2012b, p. 11). Like the *Supported Accommodation Assistance Act*, the ABS definition takes into account issues of tenure and physical attributes of the dwelling, but does not consider other problems such as affordability or access to vital services nearby.

The legal and statistical definitions are practical, and pick up on certain elements of the cultural definition. They set out the types of accommodation that are accepted as 'home' for legal or counting purposes, but do not address the circumstances in which people experiencing homelessness may be living.

The broader cultural definition (Chamberlain & MacKenzie 2003) covers three main situations in which a person may be considered homeless. Primary homelessness aligns with the narrow definition of homelessness, that of rooflessness. This includes people sleeping on the street, or in makeshift accommodation such as tents. Secondary homelessness broadens the definition to include couch surfers and people living temporarily in emergency or supported accommodation (defined here as less than 12 weeks). Tertiary homelessness broadens this even further to

include people who are in rooming or boarding houses for a period of longer than 12 weeks.

Chamberlain and MacKenzie's definition is more comprehensive than other conceptualisations of homelessness, and provides a more practical approach to the different circumstances encountered by people experiencing homelessness. It is useful as an academic and statistical tool, and recognises that people experiencing homelessness are not a homogenous group, but have different circumstances and experiences (Parsell & Parsell 2012). It provides a balance between the more visible forms of homelessness and hidden homelessness.

The cultural definition of homelessness, however, is not without its limitations: many people experiencing homelessness will, over the course of their lives, go between the different levels of homelessness, sometimes on a daily basis. While tertiary homelessness is generally a longer-term phenomenon, people may oscillate between emergency accommodation, couch surfing and sleeping rough quite rapidly. Analysis of patterns of behaviour and accommodation may provide evidence of homelessness in any or all of the three levels. The definition does not quite capture the complexity of the situation of people experiencing homelessness.

The final definition of homelessness, and by far the broadest, conceptualises homelessness as 'rootlessness'. This interpretation covers circumstances from rough sleeping to the cultural definition's different

levels, to people living in situations of family violence and overcrowding (Phibbs & Thompson 2011, p. 8). It also extends to consider the situations of dispossessed peoples, such as Indigenous people, migrants and refugees (Zufferey & Chung 2015). The definition takes into account the myriad of circumstances that can cause a person to feel as if they lack a home, concentrating not only on the objective circumstances of people's lives but also the psychological elements of home. Defining homelessness as rootlessness acknowledges that home is not just a physical structure, and that concentrating on housing alone fails to address underlying social problems such as domestic and family violence, substance abuse and mental health issues (Fingeld-Connett 2010). The inclusion of dispossession broadens the necessary solutions from those focussed around just providing shelter and other material aid to larger questions of sovereignty, dispossession and historical injustice, and all the complexities addressing these issues entail.

Homelessness can be conceptualised in many ways, not all as nuanced or considered as above. While traditional liberalism may look at homelessness as a product of broad structural issues, there is a tendency to see this as something that cannot be controlled by the person experiencing homelessness (Sharam & Hulse 2014). That is, that they are conceptualised as an unwilling 'victim' of the system who has no ability to help themselves is problematic – it fails to take into account personal agency and individual responsibility (McNaughton Nicholls 2009). Likewise, and perhaps more problematically, the rise of neoliberalism has seen a shift

in the way homelessness is perceived. Chapter two of this thesis explored the way in which individual 'failings' and perceived inadequacies are considered by neoliberal philosophies to be the main cause of disadvantage, diverging from traditional social liberal notions of structural causes. In the 1980s, US President Ronald Reagan characterised homelessness as something that was chosen by those experiencing it (Wright, J 1989, p. 46). This sentiment was echoed more recently in Australia, with then Opposition Leader (and later Prime Minister) Tony Abbott asserting that governments did not have control over the 'choice' of people to be homeless (Nader 2010).

The issue of homelessness as a choice is controversial: as Parsell and Parsell (2012) argue, there is a widely held belief in the community that at least some people choose to be homeless, underpinned by assumptions of deviant behaviour and romanticised ideals of a homeless 'lifestyle'. Homelessness as a choice is, however, far more complicated, particularly given that choices made by individuals, not only in relation to homelessness but in general, are constrained by structural factors, personal situations and the capacity to make and enact such choices in the first place. Such background factors influence choice by making decisions meaningful and obtainable. The 'romanticised' view of homelessness, Parsell and Parsell (2012) argue, comes out of scholars' outside observations of the coping strategies of people experiencing homelessness: the formation of homeless communities; the aid provided to one another by people who are homeless; and the way in which people make themselves 'at home' living on the

streets. Conversely, one can look at homelessness as a product of 'deviance' and 'deviant choices', seeing homelessness not so much as a 'chosen' path, but as a consequence of other, unpalatable and anti-social circumstances.

These views of homelessness fail to understand the difficulties surrounding decisions made by people who are experiencing homelessness, particularly those who are sleeping rough. Various factors impinge upon the capacity of an individual to 'choose' to sleep on the streets, including diminished capacity, substance abuse, disability (including impaired decision making), constraints on the ability to afford or maintain housing and the subsequent formation of lowered expectations, and disadvantaged or traumatic backgrounds, particularly in childhood (Parsell & Parsell 2012). The idea of 'chosen' homelessness must thus be considered in the context of whether people are able to make free and fully informed decisions about their living situations.

The Australian Bureau of Statistics (ABS) estimates that on Census night 2011 there were approximately 105,237 people experiencing homelessness, including 6,813 sleeping rough (Australian Bureau of Statistics 2012a). These data are compiled from the Census using the official definition that accords closely to the Chamberlain and MacKenzie (2003) definition; the data do not capture a reality for many Australians, for example, as might be the case, people living in temporary accommodation whilst on holiday or while awaiting building or renovation of permanent

housing (Australian Bureau of Statistics 2012b). As discussed above, no definition is definitive or uncontroversial, and the ABS definition has changed over the years, and has been the subject of intense scholarly debate (Chamberlain 2014; Chamberlain & Johnson 2001; Chamberlain & MacKenzie 2003; Goldie 2004).

As well as definitional issues, there remain concerns around how data on homelessness are collected. In relation to rough sleepers, there are difficulties capturing the population – metaphorically and in a more literal sense – as there is evidence that some members of the rough sleeper population actively avoid being counted on Census night (Chamberlain & MacKenzie 2008). In relation to other types of homelessness – also captured within the Bureau’s definition – there are issues with self-identification of homelessness, for example for people in boarding houses or couch surfing (Chamberlain & Johnson 2001). Generally, non-profit and charitable organisations aiding people experiencing homelessness estimate the size of the homeless population is larger than the official statistics suggest (Gilbert, T 2011a).

Potential causes and triggers of homelessness vary. Childhood traumas such as abuse, family homelessness or a period, or periods, in out-of-home care can cause serious psychological problems leading to homelessness in adulthood (Finfgeld-Connett 2010; Spinney 2010; Spinney, Hulse & Kolar 2010). Children placed in foster care or who are wards of the state are particularly vulnerable to youth and adult homelessness (Fielding, Robinson

& Stone 2016; Malvaso & Delfabbro 2016). Indigenous people, too, are more prone to experiencing homelessness due to disadvantage that is often culturally or racially based (Falzon 2013). Other precursors to homelessness include substance abuse, mental illness or physical disability and long-term unemployment (Fitzpatrick 2005; Sharam & Hulse 2014). Such conditions can severely limit income and housing choices (Baker, Bentley & Mason 2013; Baker et al. 2014). Even for those who may have previously lived in stable and secure housing, or who have average or above-average incomes, significant negative life changes can lead people to a path to homelessness (Beer et al. 2011). Divorce, retrenchment, domestic and family violence and other people's death can all contribute to homelessness for people who may otherwise not appear vulnerable (McNaughton Nicholls 2010; Sharam & Hulse 2014).

The literature around homelessness, while not clear on such things as definitional factors, is clear around the varied consequences of the situation. The consequences of homelessness vary across individuals and population groups. Negative consequences are clearest and most severe for people sleeping rough; an increased exposure to violence, drug and alcohol addiction, poor mental health, low self-esteem and social exclusion and isolation (Johnson, Gronda & Coutts 2008). The relationship between some of these associated issues and homelessness is complicated; many are precursors or triggers to homelessness (Fitzpatrick 2005; Johnson, Gronda & Coutts 2008). Homelessness, particularly rough sleeping, is also associated with poor physical health. Poor nutrition, unsanitary or unsafe

sleeping or living conditions and problems associated with an itinerant lifestyle – such as foot and dental problems – are all other known consequences of homelessness (Elder & Tubb 2014; Figueiredo, Hwang & Quinonez 2013; Stolte & Hodgetts 2015).

During his initial tenure (2007-2010), Prime Minister Kevin Rudd made addressing homelessness a key priority within his social policy agenda. Ambitiously, he vowed to halve the homeless population by 2020 (Australian Government 2008). Rudd's promises around homelessness came on the back of the Green and White Papers commissioned by the Australian Government which painted a stark picture of the extent and consequences of homelessness nationally. The documents emphasised the interaction of personal and structural issues underlying and influencing people's experiences of homelessness, and highlighted the need for a multifaceted approach to helping people achieve stable accommodation. Initiatives in the Homelessness White Paper included extra funding for housing, service linkages and early intervention programmes (Australian Government 2008). The White Paper also led to the establishment of the Prime Minister's Council on Homelessness in 2009 to implement the homelessness agenda (Australian Government 2008, 2011).

Between 2009 and the middle of 2013, the Council developed and updated frameworks for collecting data on both people experiencing homelessness – in particular rough sleepers – and specialist homeless services. It endeavoured to set up links with housing, education, employment and

housing services and provided advice to Ministers (Australian Government 2011). Under Rudd's leadership, the Commonwealth Government entered into a series of Partnership Agreements to fund various homelessness initiatives, including homelessness services through Centrelink, a National Quality Framework (NQF) for homelessness services and extra funding for supported accommodation initiatives (Department of Social Services 2013). In 2009 a new National Affordable Housing Agreement (NAHA) was entered into by the Council of Australian Governments, providing \$6.2 billion to assist Australians on low and middle incomes (Council of Australian Governments 2013). The Agreement was revised in 2012 under the then Prime Minister Julia Gillard, incorporating new benchmarks (Council of Australian Governments 2012).

Under and alongside national homelessness reforms, some states and territories have enacted strategies to address homelessness within their jurisdictions (Tually & Beer 2010). In South Australia, for example, Premier Mike Rann established the 'Homeless to Home' strategy in 2009, under the Social Inclusion Unit, now part of the Department for Communities and Social Inclusion (Department for Communities and Social Inclusion 2013). One of the key features of the South Australian strategy was promotion of the 'housing first' model: a model for addressing homelessness with a focus on getting people into accommodation first and then providing support services in a coordinated way (Australian Government 2011). The 'housing first' movement is based on two key ideas: that housing is a basic human right and that housing should not require changes in behaviour before it is

provided, other than for a person to abide by the normal conditions of tenancy (Johnson, Parkinson & Parsell 2012). The move towards the 'housing first' model represents a shift away from the traditional requirements of people experiencing homelessness to reform what may be considered deviant behaviours – in particular drug or alcohol addictions – before being provided with housing (Johnson, Parkinson & Parsell 2012).

The 'housing first' initiative is typified by the development of Common Ground in Australia. Common Ground projects began in New York in 1990 as an initiative of Roseanne Haggerty, a businesswoman who, with the help of government, business and philanthropic donations, oversaw the renovation of a series of run-down buildings around Times Square transforming them into affordable housing units for people experiencing homelessness (Common Ground 2013). The innovative feature of Common Ground projects is their mixed tenancy approach – housing low and middle income earners alongside people moving out of homelessness, including rough sleeping – and the provision of support services as part of tenancy (Parsell, Fitzpatrick & Busch-Geertsema 2014). In 2006, Haggerty was invited to become a Thinker in Residence for the South Australian government (SA Government 2011). Her time as a Thinker resulted in the establishment of the first Common Ground project in Australia, in Adelaide in 2008 (Common Ground Adelaide 2013).

Currently, Common Ground projects also exist in the state capital cities of New South Wales, Queensland, Victoria and Tasmania, with two regional

projects planned in Port Augusta (South Australia) (Australian Common Ground Alliance 2016). The projects have been funded through a mixture of government and philanthropic monies (Common Ground Adelaide 2016; Parsell, Fitzpatrick & Busch-Geertsema 2014). Scholars note that Common Ground has been both embraced and put into practice with ‘unprecedented’ speed, money and enthusiasm in Australia (Parsell, Fitzpatrick & Busch-Geertsema 2014, p. 70). No clear evidence exists however as to the effectiveness of the Common Ground model in reducing rough sleeping or keeping people in stable housing. Despite these concerns, Common Ground initiatives have continued to grow in Australia.

Tackling the ‘problem’ of homelessness is complicated. It needs multiple foci; not only centred on housing or shelter issues, but also dealing with both the causes and consequences of homelessness. As every person is different, with unique experiences of homelessness and complex disadvantages, a nuanced and individual approach is required (Phillips 2013; Phillips, Head & Jones 2011). The next section of this chapter looks at state and national government initiatives to help solve the problems associated with homelessness in Australia. From the literature, it is clear that ending homelessness is not just about providing an individual with shelter; it comes with a myriad of different issues that need to be addressed at the same time in order to allow people to secure and maintain long-term stable housing and engage with their community.

3.3. Financial concerns

Poverty and financial disadvantage are linked in complex ways with issues of homelessness and social exclusion. At its core, poverty represents a disconnect between income and outgoings for individuals or households (Melbourne Institute 2016; Saunders 1995). The level at which a person is considered to be in poverty is contested, as is the usefulness of the Henderson Poverty Line (discussed below) as an adequate measure of poverty (Baum & Duvnjak 2013; Callander, Schofield & Shrestha 2012; Saunders 2015).

There are two broad categories of poverty: absolute, judged by the comparison of individual or household income with the cost of necessities such as housing, groceries and utilities (Melbourne Institute 2016; Saunders 2015), and relative, a comparison of the incomes of the highest and lowest income earners in a country (Callander, Schofield & Shrestha 2012; Melbourne Institute 2016). In Australia, absolute poverty is judged by the Henderson Poverty Line, which represents an amount at which basics cannot be comfortably met (Melbourne Institute 2016). The line is updated with changes in inflation, community expectations and economic circumstances (Melbourne Institute 2016). On the other hand relative poverty, also known as economic disadvantage, is judged as the gap between those at the highest and lowest ends of the income spectrum (Callander, Schofield & Shrestha 2012). While both measures are judged using objective economic data, both have their critics, and are interpreted and used in different ways. Despite the measures and definitions, poverty

tends to be judged structurally, as a consequence of market and government forces (Finfgeld-Connett 2010; Fitzpatrick 2005). Some may talk of poverty as something that has come about due to personal failings (gambling, drugs, *et cetera*), but for the most part poverty is judged by the amount that a person is receiving as a wage or as income support. This is important in terms of how potential solutions are framed.

The Henderson Poverty Line has existed since the 1970s, when it was established from the Commission of Inquiry into Poverty, which set a base income as 'the disposable income required to support the basic needs of a family of two adults and two dependant children' (Melbourne Institute 2016). It is updated and released four times a year, providing data on both relative poverty and absolute poverty. The Poverty Line also provides comparisons with various welfare payments, providing data as to where (below or above the line) such payments fall (Melbourne Institute 2016). The Henderson Poverty Line is not without its critics. In a broad sense, using the Poverty Line as a measurement of poverty in Australia has been criticised for ignoring the causes and consequences of poverty in favour of simple statistics on who is, and who isn't, deemed to be in poverty (Baum & Duvnjak 2013; Saunders 1995). It has also been criticised for focussing too much on inadequacy of income as a measure of poverty and disadvantage (Saunders 2015; Saunders & Adelman 2006; Saunders & Bradbury 1991). The Poverty Line has also been criticised for not being officially endorsed or provided by the Australian government. Others have noted that this may not in fact be a negative issue, as it leaves the Poverty Line independent of

government politics and policy (Saunders 1995). On a deeper level, there are concerns that the Poverty Line is based around flawed or no longer relevant measures relating to income, family or outlay, having been initially based on international figures and focussed on the nuclear family unit (Saunders 1999; Whiteford 1997). Another concern with the measure is how the data are used. As there are different methods for assessing poverty, be it absolute or relative, using the same data in different ways can substantially alter the results leading to contradictions and uncertainty about how such data should be interpreted and what the real levels of poverty are (Australian Council of Social Services 2016; Baum & Duvnjak 2013; Whiteford 1997).

Emerging from such concerns, other measurements have been proposed and used by academics to look at the problem of poverty in different ways. Some have argued that non-monetary items – such as unpaid work in the home – could be given economic value in determining income levels (Whiteford 1997). Others have suggested using alternative benchmarks to set a poverty line, such as the disposable income available to individuals who are at employment age but not working, or by assessing the basic household budgetary needs to meet necessities (Gustafsson & Lindblom 1993; Saunders 1999). Both approaches are problematic. Using the disposable income of welfare recipients as the base poverty line potentially allows governments to set welfare at any level, while maintaining that recipients are on, or above, the poverty line. The use of budgetary standards, on the other hand, is complex and open to interpretation as to

what might be considered 'basic needs', causing many of the same problems as the Henderson Poverty Line (Saunders 1999).

There has been a move away from discussing and measuring absolute poverty in Australia to consideration of relative poverty (Borland 1999; Duclos & Gregoire 2002; Tsumori, Saunders & Hughes 2002). Relative poverty, however, is also problematic and for many reasons. The shift from absolute to relative poverty indicates a change from notions of 'minimum standards' to an understanding that consumption is based around cultural and social structures (Whiteford 1997). Relative poverty judges the lowest incomes in a society against the highest and median incomes (Borland 1999). Doing this allows one to see the gap between those who are poorer and people on average incomes, as well as incomes at the higher end of the spectrum (Tsumori, Saunders & Hughes 2002). In many ways, this is more problematic than using absolute poverty as a measurement. The main problem is that this measurement looks at inequality, rather than poverty (Saunders 1995). If a person is earning less than average or higher incomes, it does not necessarily mean that a person is in poverty, or that their situation is one of disadvantage (Whiteford 1997). Again, this measurement also fails to consider non-economic issues that may be causing an individual or household to be disadvantaged (Callander, Schofield & Shrestha 2012).

At a broader level, questions have been raised regarding the use of poverty lines and poverty measurements in talking about disadvantage. The main

criticism levelled at using such measures is that income, or lack of it, does not provide a complete picture of whether a person is in need or is disadvantaged in any way (Gustafsson & Lindblom 1993). Using purely economic factors to ascertain living standards fails to take into account issues such as isolation, mental and physical health, and the ways in which people may be disadvantaged or otherwise in need (Whiteford 1997). The key question thus becomes how poverty, inequality and disadvantage intersect, and whether measuring income or other economic factors provides any real insight into disadvantage (Saunders 1995). Such questions have led to a broadening of conceptions of poverty and disadvantage, leading, as discussed below, to a shift towards discussions of social exclusion.

A focus on material deprivation is an alternative approach. It is based on the ability of individuals and households to afford goods and services considered necessary by the standards of their local culture (Callander, Schofield & Shrestha 2012; Duclos & Gregoire 2002; Saunders 2004). Philosopher Adam Smith (1868, p. 395 Book V, Ch II, Art IV) encapsulated the essence of material deprivation:

By necessities I understand not only the commodities which are indispensably necessary for the support of life, but whatever the custom of the country renders it indecent for creditable people, even of the lowest order, to be without. A linen shirt, for example, is, strictly speaking, not a necessary of life. The Greeks and Romans lived, I suppose, very

comfortable, though they had no linen; but in the present times... a creditable day-labourer would be ashamed to appear in public without a linen shirt, the want of which would be supposed to denote that disgraceful degree of poverty...

Smith's comments indicate a key dilemma in measuring poverty, as it changes over time, and is often dependent on societal norms and standards.

Using the Henderson Poverty Line measurement, approximately 2.99 million people (around 13.3 per cent of the population) in Australia are living in absolute poverty (Australian Council of Social Services 2016, p. 8). While, as discussed above, this measurement is controversial, it provides a broad estimate of the extent of the problem. Whatever the poverty measurement used, it seems clear that there are many people in Australia who receive an income that is not adequate to allow a basic standard of living (Australian Council of Social Services 2016). The inability to properly afford necessities has many known negative consequences, and is linked closely with further problems such as homelessness (Schmitz, Wagner & Menke 2001; Sharam & Hulse 2014; Thompson et al. 2013). The causes of poverty, like homelessness, can vary substantially.

The shift towards neoliberalism has changed structural and economic circumstances such that more people are likely to be exposed to poverty (Tonts & Haslam-McKenzie 2005; Western et al. 2007). Casualisation of the

labour market has weakened job security and caused a rise in underemployment (Campbell 2004; Campbell, Parkinson & Wood 2013; Watson, I 2002). Escalation of education, qualifications and the skill levels needed to secure employment have also seen people left behind in the job market (Disney 2004; Watson, I 2002). Along with greater competition for employment, there has been a decline in unskilled and semi-skilled positions, causing employment shortages at the bottom end of the market (Disney 2004). Casualisation has also led to a lack of reliability in income, as individuals and households are not guaranteed a sufficient level of income on a weekly or fortnightly basis (Saunders et al. 2006). Failure to provide real increases in welfare benefits for people experiencing unemployment, parents, carers, students and people with disabilities has also seen many people on welfare fall below the poverty line, however it is measured (Australian Council of Social Services 2016). Rising housing costs have made it more difficult for people to achieve ownership, denying them an asset that can lower living costs in the long-term and build wealth in retirement (Baker et al. 2014; Campbell, Parkinson & Wood 2013; Costa-Font 2008).

The consequences of poverty can be severe. At the extreme, poverty can lead to homelessness, as people are unable to afford housing and are forced into couch surfing, living in temporary or supported accommodation such as boarding houses, or the streets (Schmitz, Wagner & Menke 2001; Sharam & Hulse 2014; Tunstall et al. 2013). Poverty also reduces life choices and opportunities, as a lack of money often means paying for

necessities and having little or no money left for other goods or services; it may also mean that difficult choices need to be made between different necessities (Saunders et al. 2006). Food is one of the main necessities that people experiencing poverty go without (Saunders et al. 2006). Clearly this is significant for this thesis, as it highlights a relationship between poverty and soup kitchens, with soup kitchens being one of the places where people experiencing poverty can access food either for free or at minimal cost. Whether people are using soup kitchens after making difficult decisions about going without food, or whether they are choosing to spend less money on food because they know they can access food at soup kitchens is uncertain, and an area of investigation for this research.

Being unable to afford to pursue education can lead to further poverty, as it may limit the ability of individuals or households to secure better employment to increase their income (King et al. 2012; Saunders et al. 2006). Similarly, the inability to afford medical care, particularly dental care, can result in serious health problems (Saunders et al. 2006). Poverty also impacts on people's ability to afford to participate in social activities. This lack of contact can lead to low self-esteem, as well as stress and mental health issues, particularly in children of poor families (King et al. 2012; Saunders et al. 2006). Poor housing circumstances and limited access to infrastructure and assistance are also potential consequences of poverty. Thus social exclusion can be a distinct reality for those in poverty (Saunders et al. 2006).

Given that poverty and the Henderson Poverty Line are largely economic measures, government and non-profit initiatives for alleviating poverty have focussed heavily on the management of income and expenditure for individuals and families. Much of the government's focus on poverty alleviation is through the provision of social welfare payments such as pensions, which, according to the Henderson Poverty Line, do not elevate people out of poverty (Australian Council of Social Services 2016; Melbourne Institute 2016). The Commonwealth Government provides other supports to low income households such as Commonwealth Rent Assistance (CRA) and extra payments for people with dependent children (Department of Human Services 2016b). Other government initiatives to help people out of poverty involve education and training programmes. Examples of such assistance include the Higher Education Loan Programme (HELP) and welfare benefits for eligible students (Department of Human Services 2016c). These schemes help enable people to obtain higher education qualifications in order to increase their chances of better employment (Department of Human Services 2016c). Non-government job networks may also assist people in finding employment, as well as to enrol in various forms of tertiary qualifications such as Vocational Educational Training (VET) and through Technical and Further Education (TAFE) courses (Department of Human Services 2016a, 2016c).

As discussed, many welfare to work and further education programmes have been used to move people through the welfare system and into work, no matter how insecure, or to keep people off official unemployment records

(Peck 2001; Peck & Theodore 2001). This is consistent with the neoliberal belief that social welfare causes poverty by fostering dependence and inertia in persons receiving aid (Argy 2003; Hartman, Y 2005; Mendes 2009). The evidence on whether welfare causes or alleviates poverty is contested; suffice to say that welfare policies are intended to at least provide a basic income level for people who are unemployed or are otherwise disadvantaged, even though in practice this may not be the long-term outcome (Castles 2001; Shaver 2001, 2002).

The Commonwealth Government has trialled income management programmes for low income families on welfare in an effort to ensure that income is managed properly and that households have an opportunity to lift themselves out of poverty (Mendes, Waugh & Flynn 2013). Income management programmes work by sequestering a portion of an individual's welfare payment to ensure that it is spent on approved goods such as food, housing and utilities (Dee 2013; Mendes, Waugh & Flynn 2013). In July 2012 the City of Playford in South Australia became one of the first on-regional sites in the state to trial income management for people experiencing financial distress, or because of potential negligence of children, or for eligible people who volunteer to be part of the trial (Mendes, Waugh & Flynn 2013, p. 3).

Such programmes already exist in the Northern Territory and regional South Australia, and have a disproportionate impact on Indigenous peoples (Knight 2012). According to Dee (2013) there is an implication within this

scheme that people in poverty, particularly those with children, need to be trained out of 'deviant' behaviours and spending habits, and taught to be responsible economic citizens. It is questionable whether income management schemes indeed reduce poverty, but their use indicates the continuation of neoliberal philosophies that people experiencing poverty and other forms of disadvantage are, in some way, personally flawed, and unwilling or unable to look after themselves (Castles 2001; Manning 1998; Shaver 2002).

3.4. Social capital and social exclusion

Discourses of social exclusion emerged from France in the 1980s, expanding with the rise of the European Union in an attempt to create social and economic cohesion amongst European citizens (Buffel, Phillipson & Scharf 2013; Peace 2001; Percy-Smith 2000a). In Europe, discussions of social exclusion have overtaken issues of the discourse around poverty (Percy-Smith 2000a). In Australia, social exclusion discourses have emerged more recently, with concerns over poverty and economic disadvantage being considered too narrow to adequately judge the multiple and complex needs of disadvantaged people (Hayes, Gray & Edwards 2008; Saunders, Naidoo & Griffiths 2008). Social exclusion often goes hand in hand with economic disadvantage, although the two intersect in complex ways (Baker et al. 2014; Bentley, Baker & Mason 2011; Gallie, Paugam & Jacobs 2003; Hayes, Gray & Edwards 2008; Robinson, E & Adams 2008).

In considering social exclusion and its impacts, it is important to make a distinction between social exclusion and social isolation. Social isolation is narrower in scope and centred around the ability of individuals to connect with others in their community (Findlay 2003; Gallie, Paugam & Jacobs 2003). As discussed below, social exclusion is a much broader concept, encompassing individual, political and economic factors that are multiple and complex (Percy-Smith 2000a). Within the discourse of social exclusion and social isolation, there is a focus on social capital, which relates to the non-economic capacities (benefits and outputs) within and between individuals, such as knowledge – language, education and skills – and interpersonal networks (Baum & Palmer 2002; Portes 2000). Recently, governments and not-for-profit organisations in Australia have worked to address the issues of social exclusion for the most vulnerable in the community through a range of projects and initiatives. Social inclusion and exclusion relate to networks between individuals and the community. The formation of such networks is referred to as social capital (Baum & Palmer 2002). Discussions of social capital, and by extension issues of exclusion and inclusion, reflect a shift away from the neoliberal focus on measuring and valuing society purely on economic and material means, towards an understanding that non-economic factors are also important (Baum 1999). There are two prevailing theories of social capital. The first was advanced by anthropologist Pierre Bourdieu (1986), who considered social capital as something individuals accrue through networks with others. The second debate was advanced by political scientist Robert Putnam (2000), and examined the ways in which such accumulation can be beneficial for

individuals and communities. A comprehensive conception of social capital has been developed by the World Bank (1998, p. 5):

The social capital of a society includes the institutions, the relationships, the attitudes and the values that govern interactions among people and contribute to economic and social development. Social capital, however, is not simply the sum of institutions which underpin society, it is also the glue that holds them together. It includes the shared values and rules for social conduct expressed in personal relationships, trust, and a common sense of 'civic' responsibility, that makes society more than just a collection of individuals.

Academics have developed different conceptions of social capital, although most agree that, in broad terms, it relates to gaining resources through social interactions and social networks (Baum & Palmer 2002). Although non-economic and intangible in nature, social capital arguably has clear and visible effects (Svendsen & Sorensen 2006). In relation to social exclusion, it is usually easy to see the consequences of its absence.

While social capital is generally defined as being beneficial, there are negative and positive types and consequences of social capital, for individuals, groups or the community at large (Svendsen & Sorensen 2006). This is especially true where communities are tightly bound, as they may be internally unhealthy, or externally distrustful or even hostile to outsiders (Baum 1999). There are particularly more complex interplays in terms of

social capital for groups such as rough sleepers, who may form their own communities that can potentially prevent individuals from breaking away, whether moving away to seek housing or join in with the mainstream of society, or otherwise prevent outsiders from providing help (Hawkins & Abrams 2007). Similarly, individuals seeking to escape homelessness or cope with other forms of social exclusion or disadvantage may have limited supports, with the only social networks around them being people who are involved in problematic behaviours such as drug or alcohol abuse, prostitution, violence or crime (Hawkins & Abrams 2007).

There are many different approaches to conceptualising social exclusion, and there is no clear and settled definition (Burchardt, Le Grand & Piachaud 1999; Hulse et al. 2011). Most academics focus on indicators and dimensions of social exclusion, reflecting the myriad of forms social exclusion takes and the ways in which it affects people. Three broad definitions are explored here. They cover three different ways of looking at the same problem: the first examines the different dimensions of social exclusion, along with their indicators, and the ways in which they constitute a broad spectrum of barriers to inclusion (Percy-Smith 2000a); the second conceptualisation considers the ability to participate in 'normal' activities, listing five broad areas in which social exclusion may occur (Burchardt, Le Grand & Piachaud 1999); and the third definition provides three broad categories within which types of social exclusion may occur (Hulse et al. 2011). Together, the three conceptualisations provide a picture of the ways in which social exclusion may materialise.

The first conceptualisation of social inclusion provides seven dimensions in which social exclusion may occur, and provides indicators for each. These dimensions are: economic, social, political, neighbourhood, individual, spatial and group (Arthurson & Jacobs 2004; Percy-Smith 2000a). The economic dimension relates back to poverty and economic disadvantage, focussing on unemployment, lack of job security and casualisation of the workforce (Percy-Smith 2000a; Swan 2005). The social dimension concerns families, friends and social networks, capturing issues such as divorce and homelessness (Percy-Smith 2000a, p. 9). Many of the social dimensions tie in closely with issues surrounding homelessness and risk of homelessness.

Political dimension

The political dimension of social exclusion extends the notion of social exclusion to the discussion of the state. Political exclusion refers to disempowerment and detachment from the political process (Hayes, Gray & Edwards 2008; Percy-Smith 2000b). Such exclusion can take many different forms. Recently arrived migrant groups, for example, can suffer political exclusion because they are 'outside' or unfamiliar with a country's political and governmental processes (Percy-Smith 2000b). Other forms of political exclusion involve being unable to exercise the right to vote, take part in political lobbying or engage in political discourse. It may also denote whether an individual has personal autonomy in relation to the state; if they are free to make their own decisions, or the state is making them on their behalf (Percy-Smith 2000b).

Notably, there is a distinction made in the literature about voluntary and forced political exclusion, such as between people choosing not to vote or not to become engaged in political processes (Percy-Smith 2000b). However, this is something of a grey area, as apathy towards political engagement may indeed stem from other forms of social exclusion (or personal agency). The neighbourhood dimension of Percy-Smith's (2000a) conception of social exclusion centres on the condition of the local area in which an individual resides. Quality of nearby services, access to transport and the physical state of housing are all important elements of neighbourhood exclusion (Argy 2006; Bailey et al. 2015). Links between housing and social exclusion are particularly important in this context. The physical structure of housing, its safety and security, as well as the safety of the neighbourhood surrounding it, all contribute to residential satisfaction and personal health and wellbeing (Arthurson & Jacobs 2004; Baum & Palmer 2002; Marsh & Mullins 1998).

Spatial dimension

In the first conceptualisation, neighbourhoods, as the fourth element, are strongly linked with the spatial dimension of social exclusion. The focus of spatial exclusion is on areas of high disadvantage, where there are clusters of people experiencing various types of disadvantage such as poverty, low levels of education, high rates of unemployment or various levels of homelessness (Hayes, Gray & Edwards 2008; Swan 2005). Areas with a high concentration of poverty or unemployment, and areas with a high proportion of public housing are often areas of spatial social exclusion; also

associated with a lack or withdrawal of necessary community and social infrastructure and facilities and above average rates of crime (Buffel, Phillipson & Scharf 2013; Swan 2005). Likewise, regional areas in Australia often lack the necessary services to provide people with good quality health, education, transport or social services (Alston & Kent 2009). Poor health and education and impaired ability to access services such as public transport can impinge on the ability of people in rural areas to secure and maintain employment, sustain links with friends or family, and/or undertake recreational pursuits (Alston 2002).

Individual dimension

The final form of exclusion discussed in this first conceptual framework is the individual dimension. Individual factors that influence social exclusion include disability, low self-esteem, poor physical and mental health and educational and behavioural problems (Hayes, Gray & Edwards 2008). These factors may be purely individual, but they may also be a product of wider structural issues (Hayes, Gray & Edwards 2008). As discussed earlier, housing, education and health services all impact upon the life choices of, and opportunities available to, individuals.

Activities dimension

The second conception of social exclusion shifts from discussion of dimensions of exclusion, instead considering a person's ability to undertake 'mainstream' activities to be socially included (Burchardt, Le Grand & Piachaud 1999). If people fall out of or below certain predetermined

standards of the activities, they are taken to be socially excluded. Such activities include: consumption, saving, production (involvement in employment), education, child rearing, political involvement and social activity (Burchardt, Le Grand & Piachaud 1999, p. 231). Crossover exists between the activities.

According to Burchardt, Le Grand and Piachaud (1999), consumption activity accords closely with the measurement of poverty, as it relates to the minimum consumption of goods and services necessary to live a satisfactory life. Unlike other measurements of poverty and disadvantage however, consumption is not based on a monetary figure. This makes it a more fluid, yet less precise, measurement of disadvantage. Savings activity is about the acquisition of assets: of being able to save money, prepare for retirement or purchase a house (Burchardt, Le Grand & Piachaud 1999, p. 231). Similarly, production activity relates to employment, with exclusion occurring where an individual is unemployed, or underemployed, which can also be considered in economic terms. Production activity refers to viable economic activities, including not only education or employment, but also raising children. This conception further broadens social exclusion and inclusion beyond economic factors, to show that other non-work activities are important. Political and social activities also accord with the previous discussions of dimensions of exclusion, such as being unable to vote, and access to hobbies and interpersonal interaction (Arthurson & Jacobs 2004).

Scope dimension

The final conceptualisation of social exclusion provides a threefold typology of exclusion that is broader than the previous two, but focusses on how and where exclusion may manifest. With a focus specifically on housing, this conception provides three ways in which social exclusion can occur: deep social exclusion, where a small group of people experience multiple and complex disadvantages; concentrated social exclusion, which involves a single area that contains a high concentration of people experiencing one or more types of disadvantage; and wide social exclusion, where a large group of people experience one or two dimensions of disadvantage (Hulse et al. 2011).

Usefully, this final conceptualisation brings together the previous two, broadening our understanding of social exclusion to where, and how, exclusion may occur in the community. The final typology acknowledges that people generally experience more than one type of disadvantage, and on a practical level, knowing where and how exclusion is occurring allows for more targeted aid. Considering the dimensions in which exclusion can occur, the activities that people are unable to undertake due to exclusion, and where exclusion is likely to occur are important pathways for allowing governments and not-for-profit organisations to begin to address such problems.

Responses to social exclusion

Australia has had a very recent history in promoting social inclusion as a necessary social goal. In 2007 as part of his social inclusion agenda, Labor Prime Minister Kevin Rudd established the Social Inclusion Unit to combat social exclusion and its associated consequences (Saunders 2013). The Unit examined, addressed and advised relevant Portfolios on economic issues (including poverty), cultural respect and survival, welfare, education (in part leading to the failed Educational Revolution), health and discrimination (Edwards 2008; Smyth 2010). The Unit brought together separate but interrelated elements under the broad banner of social inclusion.

Over the course of its existence the Social Inclusion Unit aided in the development of the Community Development Fund, an initiative geared towards providing further employment and educational choices in rural areas, as well as helping establish the Australian Charities and Not-For-Profits Commission, which changed regulation of charities nationally, and provided clearer information regarding philanthropy for charitable organisations, philanthropists and the general public (Social Inclusion Board 2013). The Unit also engaged with communities, government organisations and not-for-profits by disseminating information on charitable causes, spreading awareness of social problems and promoting the Commonwealth Government's agenda on halving primary homelessness and battling poverty and social exclusion (Social Inclusion Board 2013). The Unit was

formally disbanded in September 2013 by the newly elected Conservative Prime Minister Tony Abbott (Karvelas 2013).

Many states also have their own social inclusion agendas. Locally, the South Australian Social Inclusion Initiative was established in 2002 by Labor Premier Mike Rann (Newman et al. 2007; Wilson, L & Spoehr 2015). The Initiative, like the Commonwealth Government's agenda, brought together disparate areas of government and the community, such as health, education, crime, sport and the arts (Newman et al. 2007). The School Retention Action Plan, Street to Home (an assertive outreach programme for rough sleepers) and Common Ground were all programmes spearheaded through the Initiative (Wilson, L & Spoehr 2015).

On a broader level, programmes to reduce poverty and combat homelessness, as seen in South Australia and in other examples above, all, in some way, are social inclusion programmes. Social inclusion encompasses all aspects of disadvantage, housing, and the health and wellbeing and participation of individuals, households and the community in general. While governments of the day differ in their approaches to social issues, social policies and addressing disadvantage, social inclusion remains a key focus and desired outcome of actions by the not-for-profit sector.

3.5. Conclusion

As explored in the next chapter, the not-for-profit sector has worked, and continues to work, with people experiencing various types of disadvantage. The separate but interrelated issues discussed above lead individuals to seek aid from charities (Marston & Shevellar 2014). This is especially so now that governments have outsourced much of their social welfare assistance to non-government services, including, but not limited to, charities themselves (Cahill 2013; Considine 2003).

As noted above, government initiatives addressing disadvantage are generally centred on providing funding, direction or public awareness for charitable organisations, rather than creating their own welfare services. As governments retreat further from service delivery, charities and not-for-profit organisations are occupying a more important place in Australian society. Homelessness, poverty and social exclusion are large, complex and interrelated issues that governments continue to struggle with alleviating. Many of the disadvantages associated with these 'wicked' problems, though not new, are exacerbated or perpetuated by the shift towards neoliberalism, with economic and market factors overtaking considerations of welfare and social justice. The move towards discourses of social inclusion and exclusion shows that the social justice element within Australian society is not entirely dead – the dismantling of the Social Inclusion Unit notwithstanding. The consequences of disadvantage can be dire, not only for individuals, but for communities and the nation.

The disadvantages discussed in this chapter all have varied consequences for the people affected by them. People experiencing disadvantage may use different types of services at different times, and in various ways. As is discussed in the following chapters, people may be reluctant to access certain services that require them to constantly re-tell distressing personal stories, or require extensive or intrusive activities. Low self-esteem, shame and embarrassment can all prevent people from seeking the help they need, even from charitable organisations. The fact that soup kitchens do not require people to provide personal information, their informal nature and the lack of commitment required by attendees (that is, in frequency of attendance as well as in terms of work required to receive food) seemingly make soup kitchens a more enticing place to seek charity than some other services. Because of this, soup kitchens tend to attract people experiencing disadvantage who may not access other charitable services, and many soup kitchens are used as a gateway to further, long-term aid for people experiencing disadvantage-related challenges in their lives.

Chapter 4

The third sector and food charity

4.1. Introduction

This chapter builds on the foundation laid in the previous two chapters, bridging the gap evident in the discussion so far between people experiencing disadvantage and the neoliberal welfare state. The discussion focusses on the third sector in Australia – a collection of not-for-profit, charitable and community organisations (Carey, Braunack-Mayer & Barraket 2009; Lyons & Passey 2006) – and the (increasing) role of such organisations in welfare provision, especially in food charity. The chapter traces the evolution of the third sector and the move towards more corporate structures within not-for-profits (Carey, Braunack-Mayer & Barraket 2009; Considine, O'Sullivan & Nguyen 2014). It also examines the rise of conditionality imposed by government on outsourced charitable and not-for-profit organisations (Shutes & Taylor 2014; Whitworth & Griggs 2013).

Broadening our understanding around the third sector, welfare and food charity, the discussion also addresses two key drivers of not-for-profit organisations: volunteers, who provide unpaid labour to third sector organisations at various levels (Hustinx, Handy & Cnaan 2010); and the rise of philanthropy in providing funding for not-for-profit organisations in Australia (Lyons, McGregor-Lowndes & O'Donoghue 2006; Tually, Skinner & Slatter 2012). These drivers interact with, and intersect, the third sector in complex ways.

The chapter further looks at the emergency food sector; a collection of not-for-profit and charitable organisations that provide food (usually rescued or donated food) to eligible people (generally those experiencing disadvantage) (Biggerstaff, McGrath Morris & Nichols-Casebolt 2002; Lindberg et al. 2015; Poppendieck 1998; Tarasuk & Eakin 2005; Wakefield et al. 2012). Soup kitchens are a subset of the emergency food sector (Poppendieck 1998; Reschovsky 1991). Using the (limited) literature, this thesis provides a new and comprehensive definition of soup kitchens, and explores the key attributes of the services.

Finally, the chapter addresses the challenges and barriers to receiving charitable assistance. It considers the key controversies in shifting the provision of welfare from government to the non-government sector. Such issues include suitability and reliability of assistance provided, shame and the expectation of gratitude.

4.2. The third sector in Australia

Australia's economic system can be seen as being divided into three sections: the public sector (government and the public service); the private sector (for-profit businesses); and the 'third sector' (Butcher, J 2015; Lyons 1998; van Gramberg & Bassett 2005). The third sector is a broad collection of not-for-profit, charitable and community organisations, with some cutting across sectors to a degree (Carey, Braunack-Mayer & Barraket 2009; Lyons & Passey 2006). The third sector is, in essence, 'a sector between state and market, fulfilling both economic and social missions, which pursues a

general interest, and whose final objective is not the redistribution of profit' (Organisation for Economic Co-operation and Development 2003, p. 10).

The key characteristics of not-for-profit organisations are defined by Billis and Glennerster (1998, p. 81) as:

organisations that are (a) formal or institutionalised to some extent; (b) private – institutionally separate from government; (c) non-profit-distributing – not returning profits generated to their owners; (d) self-governing – equipped to control their own activities; (e) voluntary – involving some meaningful degree of voluntary participation.

Not-for-profit organisations in Australia fall into two broad groups: recreational and altruistic. Recreational organisations, as Lyons (2001) explains, exist to support hobbies and leisure pursuits, such as sporting clubs or cultural groups. Such groups are characterised by the self-interest of the members of the organisations – for example, volunteers and members of sports clubs generally play the relevant sport, or are friends or family of people who do. This means that the membership of such associations is relatively exclusive (Lyons 2001). While this thesis is not concerned with recreational not-for-profits, they are worth mentioning as one part of the third sector, and may behave in similar ways to altruistic charitable organisations in terms of their organisational structure and fundraising activities. They also enculture the volunteering ethos on which Australia is founded and which is the cornerstone of many third sector

organisations and activities – including as this thesis investigates, soup kitchens (Oppenheimer 2008).

Altruistic organisations, on the other hand, provide goods or services to the community without the expectation of making a profit (Billis & Glennerster 1998). These organisations are made up of employees and volunteers who do not receive the goods or services provided; instead, they are provided to consumers or beneficiaries for free or at a nominal cost (Lyons & Passey 2006). Larger, or more corporatised, charities may retain a number of paid employees, but the sector is still heavily reliant on, and peopled by, volunteers (Bellamy & Leonard 2015; Hwang & Powell 2009; Lyons 1998). Charitable organisations generally derive income through a combination of individual and corporate donations and philanthropy, alongside government funding and contracts (Carey, Braunack-Mayer & Barraket 2009; Lyons 1998; Lyons & Passey 2006; Zappala & Lyons 2008). Beneficiaries of the goods or services provided by charitable organisations vary depending on the organisation and its purpose, but tend to be specifically disadvantaged groups, for example people experiencing homelessness or suffering from terminal or chronic illnesses (Carey, Braunack-Mayer & Barraket 2009). Charitable organisations may also take on advocacy roles for their consumers or beneficiaries (Casey & Dalton 2006; Martin, F 2012; Phillips & Goodwin 2014).

According to neoliberal ideology, the non-government sector – including business and charitable organisations – is the backbone of the market and

regarded as the most efficient way to provide services to the community (Considine, Lewis & O'Sullivan 2011; Peck 2010). Charities are seen to have more flexibility and capacity for experimentation than both governments and the for-profit sector (Billis & Glennerster 1998; Hwang & Powell 2009). The neoliberal state is vocal in its support for charities as a viable alternative to government welfare (DiFazio 2006; Gilmour & Milligan 2012). While many charities maintain independence from the government sector by only sourcing money through personal, philanthropic and business donations (Clifford, Geyne-Rahme & Mohan 2013; Lindberg et al. 2015), others receive government funding (Butcher, J 2015; Carey, Braunack-Mayer & Barraket 2009), or participate in 'compacts' between charities and government, although the funding stream is recent (Butcher, J 2015; Carey, Braunack-Mayer & Barraket 2009). The trends signal a shift in the way government and business relate to the third sector, which has in turn changed the operations of charitable organisations.

4.2.1. Drivers of change in the third sector

Charitable services have been part of Australia's social and economic landscape since European settlement in the 1800s. Early charitable organisations were largely run by, or affiliated with, Christian churches of various denominations (Dickey 2003). Post Federation, the country had a mixed economy of welfare delivered by governments and by government-funded charitable organisations (Harris, J & McDonald 2000; McDonald & Marston 2002). Governments in Australia have long supported the rise of charitable service provision as an alternative to state intervention and

welfare (Western et al. 2007). The move towards neoliberalism through the 1980s however, has seen further expansion of the role of the third sector, with privatisation and a greater number of government programmes outsourced to charities (Carey, Braunack-Mayer & Barraket 2009; van Gramberg & Bassett 2005).

In the 1990s the Howard government sought control over the charitable sector by tightening the rules on provision of funding. In particular, funding was denied to organisations that were seen to have a greater emphasis on advocacy, rather than focussing solely on providing aid to their clients. This applied particularly to organisations advocating against the actions or ethos of government (Casey & Dalton 2006; Martin, F 2012; Seibert 2015; Staples 2012). In 2002 the Rudd government sought to restructure the charitable sector with the establishment of the Australian Charities and Not-For-Profits Commission (generally known as the ACNC), creating a single portal for regulation and aid to not-for-profits in Australia (Ingram 2012; Valenti 2013). The Commission faced abolition by the Abbott government in 2014, but after calls from the sector to maintain the regulator, there has been further government support, most notably in the 2015 Budget (Caneva 2015; Cham 2014; Gilchrist 2014; Hutchens 2014; Hutchens & Ireland 2014; Stuart 2015). The long-term fate of the Commission remains unknown.

Alongside changes in government regulation of the not-for-profit sector, there have been substantial changes in the internal operations of individual charities. The Commonwealth Government has outsourced many of its own

functions to not-for-profit organisations; for example, the dismantling of a single government agency to support job seekers and replacement with a network of for-profit and not-for-profit groups providing similar services (Considine, Lewis & O'Sullivan 2011; Considine, O'Sullivan & Nguyen 2014). The outsourcing of employment agencies was more strongly influenced by neoliberalism and couched in terms of market solutions and competition.

Organisations have evolved in two particular ways under the neoliberal framework: first, through professionalisation of their operations; and second, in taking on board neoliberal ideals of mutual obligation and personal responsibility in dealing with clients (Castles 2001; Harris, P 2001). Charities before, and in the early years of, Federation, preached personal responsibility to their clients, both through religious instruction and enforced work regimes (Dickey 2003; Kinnear 2001). The expansion of the welfare state after the Second World War saw charities take on a quasi-governmental role, delivering services with extensive government funding (Considine 2003; Wright, S, Marston & McDonald 2011). As such, there has been a circular move back to personal responsibility and work for welfare, through the doctrine of mutual obligation (Considine, Lewis & O'Sullivan 2011). Increased demand for the goods and services supplied by charities has required an expansion in the scope and reach of many charities, meaning that heightened professionalism is needed to streamline operations and to cater for a larger client base (Carey, Braunack-Mayer & Barraket 2009; Considine, O'Sullivan & Nguyen 2014).

Professionalisation in the third sector has occurred in response to an increased need for not-for-profit organisations to engage significantly with governments and for-profit businesses as well as welfare service providers (Carey, Braunack-Mayer & Barraket 2009; Considine, O'Sullivan & Nguyen 2014). This shift to professionalisation has a number of consequences for not-for-profit organisations. These consequences include a move away from flexibility in service delivery and in the systems of the organisation, towards standardisation (Considine, Lewis & O'Sullivan 2011). There is also the threat of 'mission drift' – a shift away from the ideologies and goals of the organisation (Considine, O'Sullivan & Nguyen 2014; Maier, Meyer & Steinbereithner 2016). Professionalisation puts not-for-profits in an awkward position, as they also need to maintain strong community connections (Carey, Braunack-Mayer & Barraket 2009).

Not-for-profit organisations have also been influenced by the emerging discourses around welfare provision, in particular conditionality. Conditionality, an evolution of workfare and mutual obligation, has emerged in the spheres of unemployment (Shutes & Taylor 2014; Whitworth & Griggs 2013) and the provision of social housing (Birdsall-Jones & Farley 2016; Habibis et al. 2013). It is underpinned by a contractual relationship whereby a welfare recipient receives aid from a service provider on the condition that they adhere to certain standards of behaviour (Dwyer 2004; Habibis et al. 2013; Whitworth & Griggs 2013). The shift intersects with moves towards outcomes-focussed funding for not-for-profits. As a consequence, larger

and more corporate-style not-for-profits have been given priority in government funding over smaller organisations (Shutes & Taylor 2014).

Another level of complexity added to the not-for-profit sector over time has been the shift away from standardisation of services to flexibility, through the emergence of individualisation, consumer-directed and consumer-centred care (Cortis et al. 2013; Jacobs et al. 2016; Jacobs et al. 2015). This has emerged most significantly with the reform of the disability sector and the development and implementation of the National Disability Insurance Scheme (NDIS) (Bonyhady 2014; Cortis et al. 2013; Jacobs et al. 2015). Individualisation and conditionality will see a move towards instability in service delivery of social care and welfare, and the potential to create uncertainty within not-for-profit organisations (Cortis et al. 2013). Concerns have also been raised that they might see a shift to individualised funding in social care and welfare and the entry of for-profit businesses into these spaces may see not-for-profits move away from their core goals, towards more commercially focussed activities (Connellan 2014). Soup kitchens are not immune from such shifts in organisational and philosophical structures. However, as discussed below, they have evolved differently from other not-for-profit organisations, due to their place outside government funding and the 'simplicity' of their service model.

4.3. Key players in the third sector

Like business and government, the third sector runs on two key resources: labour power and money. In contrast to business and government, however,

the third sector is heavily reliant on the provision of time and money through personal goodwill (Billis & Glennerster 1998; Lyons 1998; Lyons & Passey 2006). Volunteer labour and philanthropic donations are crucial for the functioning of the third sector, including soup kitchens.

4.3.1. Volunteering

Despite substantial shifts in funding and service provision, the not-for-profit sector remains heavily reliant on volunteer labour (Warburton, Smith-Merry & Michaels 2013; Williamson 2014). In 2015, Australia was ranked as the fifth most generous nation in the World Giving Index (up from seventh in 2013), seventh in terms of monetary donations and twelfth in volunteering (Charities Aid Foundation, pp. 11, 19, 39). According to the Australian Bureau of Statistics (2010) approximately 6.1 million people in Australia volunteer.

Generally, mid-life and older people make up the bulk of the domestic volunteer workforce (Healy 2004, p. 22). This can be attributed in large part to the fact that many charities operate during normal business hours. There is an emerging trend towards corporate volunteering – businesses engaging with and in charitable activity through small groups of employees volunteering together on a regular or semi-regular basis as part of their employment (do Paco & Nave 2013; Moore, K & Augustinus 2014). While volunteering is increasingly popular with younger people, particularly those of school leaving age, this group tend to be focussed on international causes with a rise in episodic volunteering and volunteer tourism (Holmes

2014; Hustinx, Handy & Cnaan 2010). Data suggest that people on lower incomes are more inclined to volunteer (O'Donoghue, McGregor-Lowndes & Lyons 2006). With statistics on philanthropy (discussed later) showing a tendency for high-income earners to give generously to causes, suggesting that those who are unable to give much money to charity instead donate their time.

The term 'volunteering' is not universally agreed upon. It varies through time, culture, and context, and, '[as] a consequence, the boundaries between what definitely constitutes volunteering and what does not are permeable' (Hustinx, Handy & Cnaan 2010, p. 74). Volunteering does not represent a single unified task, but encapsulates a multiplicity of unpaid labour, 'from sitting on governance boards to stuffing envelopes' (Hustinx, Handy & Cnaan 2010, p. 74). Motivations to volunteer are likewise complex. A purely economic framework – that sees humans as merely self-interested individuals – may see volunteering as counter-intuitive, and must look to the non-economic benefits of volunteering (Hustinx, Handy & Cnaan 2010). A broad understanding of the nature of volunteering and motivations to volunteer can be gleaned through academic discourse, and while the definition is not settled, some observations can be made.

In the most basic terms, volunteering involves giving time to a charitable cause without receiving a wage for labour undertaken. The ABS (2006, p. 3) defines voluntary work as, 'willingly [giving] unpaid help, in the form of time, service or skills, through an organisation or group'. Despite the

overlap, volunteering differs from charity in that it focusses upon the individual rather than the organisation undertaking charitable work. Not all who undertake work for a charitable organisation are considered volunteers, and volunteering may not be strictly limited to charity work.

Scholars have identified four key elements of volunteering. The first is that it must be a planned action (Penner 2004). This feature distinguishes it from emergency actions, such as the behaviour of, for example, witnesses rescuing someone from a vehicle after a traffic accident (Penner 2004). The second element of volunteering is that it is a long-term action (Penner 2004). This too distinguishes it from emergency aid, but it creates uncertainty in relation to sporadic or holiday voluntary and charitable work (Allahyari 2000). The third element of volunteering is its lack of obligation – defined here as obligation due to friendship or familial bonds (Penner 2004; Wilson, J & Musick 1997). There are broader questions, however, about coercion where ‘voluntary’ activities are undertaken due to mutual obligation requirements such as for unemployment benefits, or judicially mandated community service (Allahyari 2000).

The fourth and final element of volunteering is that it must take place within an institutionalised context (Penner 2004). The institutionalisation requirement serves to distinguish it again from personal unpaid care for family or friends (Lee & Brudney 2012). The provision of personal unpaid care is known as informal volunteering, separating the collective action of formal volunteering as discussed above, with the personal actions of

helping friends and family. Informal volunteering assumes a close relationship between the provider and recipient of unpaid, voluntary activity (Taniguchi 2012). One-off activities such as helping a friend move house, regular unpaid labour like mowing the lawns for an elderly neighbour, or even more involved work such as step-parenting may be considered forms of informal volunteering (Oppenheimer 2008). The key features of informal volunteering are that there is a connection between the volunteer and the person they are performing the service for and that the action is personal, rather than as part of a collective (Manatschal & Freitag 2014; Taniguchi 2012).

Formal volunteering generally requires that the volunteer does not receive an income for their work (Cnaan, Handy & Wadsworth 1996). In situations where charities take on a small number of paid employees, such people are not considered volunteers, despite working for a charitable organisation. While this may be clear, there are other circumstances where the line between volunteer and worker cannot be easily delimited. Some academics regard the receipt of compensation for work – in the form of travel allowances or reimbursement for expenses – as repudiating the claim that a job be considered volunteering, even where no wage is paid. Others may be considered to fall outside a narrow definition of volunteering where the rewards received are not monetary but less tangible, in the form of awards, recognition, or work experience (Cnaan, Handy & Wadsworth 1996).

Generally, however, any compensation below an actual wage is not considered 'payment' for the work undertaken, making the person a volunteer (Cnaan, Handy & Wadsworth 1996, p. 370). The notion of sacrifice is important in considering volunteering; such time spent helping others means time away from work, family, friends or other leisure activities. The uncertainty about the line between volunteers and non-volunteers can create anomalies where two people undertaking the same charitable work may be regarded differently in relation to their status. While academically the distinction may be interesting, it is uncertain whether it makes any practical difference in relation to the work undertaken. It may, however, alter the way in which volunteers see themselves or their work (Cnaan, Handy & Wadsworth 1996).

Motivations to volunteer vary between individuals. Religion, particularly Christianity, has been found to be a significant motivator of undertaking volunteer work, inside and outside the church environment (Bellamy & Leonard 2015; Hustinx et al. 2015; Johnston 2013). The notion of living according to God's wishes and mission and good witness are strong Christian motivations (Bellamy & Leonard 2015). Altruism and compassion for others, in the religious or secular sense, is also a known motivator for volunteer work (Krause 2015; Unger 1991). More self-interested reasons are also known to drive volunteers – for example, to gain skills for paid employment (Chaddha & Rai 2016; Thoits & Hewitt 2001). This is particularly true for younger volunteers (Hustinx et al. 2015).

Volunteering is generally considered to be beneficial to donors (Alonso & Liu 2013; Lum & Lightfoot 2005; Mollidor, Hancock & Pepper 2015; Taghian, D'Souza & Polonsky 2012). Despite the ostensibly altruistic nature of voluntary work, participants receive benefits in the form of recognition, appreciation, work experience and skills development, as well as the positive psychological outcomes known to come from providing help to others (Clary & Snyder 1999). For younger people especially, volunteering builds social and cultural capital, fosters community engagement and aids training in preparation for paid employment (do Paco & Nave 2013; Gatignon-Turnau & Mignonac 2015).

4.3.2. Philanthropy

Unlike volunteering, philanthropy is considered an emerging phenomenon in Australia in relation to social issues. The country is behind many others, particularly the United States, in individuals and businesses providing large philanthropic donations, but an increase in the wealth of individuals has seen both individuals and governments become more interested in the opportunities it can provide for charities (Tually, Skinner & Slatter 2012). Up until now, philanthropy has not been accorded much mainstream attention in Australia, as the provision of money, rather than time and goods, has been regarded as contrary to the country's egalitarian ideals and the social justice agenda of a government provided safety net (Lyons, McGregor-Lowndes & O'Donoghue 2006, p. 389).

The rise of neoliberalism has precipitated and supported increased philanthropic activity in Australia, as in other nations (Barraket 2008; van Gramberg & Bassett 2005). Philanthropy acts as an intermediary between donors and charities, receiving and investing assets, then disbursing the profits to selected charitable organisations (Tually, Skinner & Slatter 2012, p. 31). The role of philanthropy in Australia expanded in the 1990s, through efforts by the Howard Coalition government, assisted by the encouragement of partnerships between communities and businesses, and the introduction of tax incentives for philanthropic giving (Mendes 2009, pp. 107-108). It fell by the wayside, however, under the Rudd Labor government, with their restructuring of the not-for-profit sector, somewhat undermined by the shift of attention away from support for philanthropy (Butcher, J 2015; Cham 2014).

It may seem obvious, but people in higher income brackets tend to give more money philanthropically (Madden 2006, p. 454). Research in Australia and the United States reveals a series of key reasons behind philanthropic giving by affluent people. One motivating factor is self-interest, although it is not the most frequently reported or most important. Self-interested motivations may include the desire for recognition of generosity, development of personal self-esteem or to receive tax deductions (McGregor-Lowndes, Newton & Marsden 2006; Sargeant & Crissman 2006). Semi self-interested motivations also exist, such as setting up trusts in the name of departed loved ones in order to honour their memory, giving as part of a family tradition of philanthropy, or identification with a specific

cause or community (Madden 2006). More altruistic reasons such as community-mindedness, empathy and a sense of social responsibility also provide motivation for people to donate philanthropically (Madden 2006).

Giving philanthropically is strongly linked with positive outcomes, including: increase in happiness, a sense of achievement, and increased self-worth (Tually, Skinner & Slatter 2012). In an effort to encourage more people to donate money, scholars have also considered some of the important barriers to setting up philanthropic trusts. While some people may feel unable, or simply be unwilling, to provide money, others are suspicious of the political motivations of voluntary organisations, or with their expenditure on non-altruistic activities such as administration (Madden 2006; Villadsen 2011). Further, sometimes people simply do not know how to go about setting up philanthropic trusts, or how to contribute to already established ones (Madden 2006).

Beyond the motivations of, and positive outcomes for, the individual, philanthropy is important for the not-for-profit sector in Australia, and for the nation generally. Philanthropy provides a link between people who want to provide money or assets to charitable causes, for whatever reason, and the charities that require them. Philanthropic giving thus forms the backbone of many charities, in Australia as around the world. Larger philanthropic trusts may support a vast number of different charitable organisations, providing regular or semi-regular payments to them that allow their continuation (Tually, Skinner & Slatter 2012). Volunteers and philanthropists are crucial

in the continued existence of the charitable sector. Both allow not-for-profits to continue providing assistance to their clients.

4.4. The emergency food sector

Before specifically discussing soup kitchens, it is important to look at the area of food charity more generally. Food charity is a term used to describe a unique sector, which is comprised of services that are not only about an ongoing, basic necessity, but also something that is perishable and not amenable to the usual system of (second-hand) donated goods.

There are two distinctive but related types of food charity: the first is charitable food provision, encapsulating food pantries, food hampers and soup kitchens; the second, and a more recent trend in Australia, is food rescue, which provides a link between businesses with leftover food and charitable food services. The second type, while an interesting area of study, is peripheral to this thesis and is discussed only fleetingly. The first branch of food charity, however, needs to be considered before looking more closely at soup kitchens specifically.

Unlike soup kitchens, food pantries and food hampers provide groceries, rather than prepared food. Food pantries are an American phenomenon, including the provision of groceries to eligible people at regular intervals – anywhere from every week to every month or so (Poppendieck 1994; Reschovsky 1991; Teron & Tarasuk 1999). They have, more recently, been imported into Australia (Booth & Whelan 2014; Lindberg, Lawrence &

Caraher 2016). Food hampers (or parcels) are also provided in Australia, often incorporating a combination of groceries and toiletries (Frederick & Goddard 2008; Lindberg et al. 2015).

Both food pantries and services providing food parcels require clients to provide proof of identity and of entitlement to receive goods (Curtis 1997; Tarasuk & Eakin 2003). This means that the main users of such services are low-income but housed individuals or families (Lambie-Mumford 2016; Martin, KS et al. 2013); in Australia, this usually means people receiving government benefits (Booth & Whelan 2014; Frederick & Goddard 2008) and it excludes people sleeping rough, couch surfing or who are otherwise unable to prepare their own food. These latter groups are generally those who attend soup kitchens as an alternative (Biggerstaff, McGrath Morris & Nichols-Casebolt 2002; Rauschenbach et al. 1990).

Other niche forms of not-for-profit food service also exist, including community cafés and operations that target specific populations. Organisations such as Meals on Wheels provide food, for a small fee, to Australians who, for a variety of reasons, have difficulty shopping or cooking for themselves (Winterton, Warburton & Oppenheimer 2013).

Emergency food services sit within the third sector. Like many third sector organisations they have gone through the process of professionalisation (Booth & Whelan 2014; Riches 2002). Commentators have noted that food charity has moved away from its 'emergency' status to a more stable and

routine provision over time (Lambie-Mumford 2016; Martin, KS et al. 2013; Poppendieck 1994, 1998; Riches 2002). The entrenchment of food charity as routine and stable has been criticised for not providing solutions to the problems of food insecurity – a lack of ability to access or afford food – and poverty (Frederick & Goddard 2008), as well as for diverting attention away from state-based long-term solutions to these issues (Curtis 1997).

The emergency food sector is primarily supply driven (DiFazio 2006; Tarasuk & Eakin 2003). According to the literature, food pantries and soup kitchens mostly collect and distribute rescued and donated foods (Benjamin & Farmar-Bowers 2013; Koh, Bharel & Henderson 2016). Many food service organisations rely on ongoing contracts with supermarkets, hotels and small businesses to provide food that cannot be sold, as well as donations of non-perishable food stuffs from individuals and one-off donations of leftover food from events (Koh, Bharel & Henderson 2016; Poppendieck 1994; Tarasuk & Eakin 2005). The challenge of such services being supply driven is that there may not be enough food available to meet the needs of service users (Dachner et al. 2009).

As well as being supply driven, the emergency food sector is also *ad hoc* in nature (Booth & Whelan 2014; Dachner et al. 2009; Poppendieck 1994; Teron & Tarasuk 1999). In contrast to the highly standardised government welfare system, the emergency food sector is made up of organisations of differing size and scope, operating independently from one another (Berg 2008; Dachner et al. 2009). Booth and Whelan (2014) argue this sometimes

puts organisations in competition with each other to access limited resources. In North America, emergency food services receive funding through a combination of private donation and government grants (Biggerstaff, McGrath Morris & Nichols-Casebolt 2002; Cotugna & Beebe 2002). Some Australian food services receive funding (Booth & Whelan 2014), although, notably, not soup kitchens (Sanders 2013).

As well as private and corporate donations, food is also provided to emergency food services by way of food rescue intermediaries, known as food banks (Lindberg et al. 2014).⁴ These organisations collect, store and distribute (to emergency food services like pantries and soup kitchens) food from a variety of sources, including businesses and supermarkets (Booth & Whelan 2014; Butcher, LM et al. 2014; Davis et al. 2016; Faherty 2015; Lindberg et al. 2014). Intermediary organisations serve the dual purpose of servicing the emergency food sector as well as undertaking food rescue, saving food that would otherwise be thrown away (Cotugna & Beebe 2002; Lindberg et al. 2015; Poppendieck 1994; van der Horst, Pascucci & Bol 2014).

The emergency food service sector has not been immune from the evolution occurring in the third sector, including the shift towards client-centredness.

⁴ It should be noted that some of the United States literature uses the term 'food banks' to denote food pantries rather than intermediary organisations. There are also several organisations that operate as both intermediaries (food banks) and also provide groceries directly to service users (food pantries). For the sake of clarity, the term 'food bank' has been solely used in this thesis in relation to intermediary organisations. Further muddying the waters is that two (unrelated) organisations called Foodbank exist; one in the United States and one in Australia.

Food pantries have been moving away from the traditional provision of pre-determined groceries towards a supermarket-based experience, with users being able to choose which items they select, albeit within set limits (Benjamin & Farmar-Bowers 2013; Martin, KS et al. 2016; Martin, KS et al. 2013; Remley, Kaiser & Osso 2013).

4.5. Soup kitchens

Despite being part of the third sector, soup kitchens occupy a unique space even within emergency food services. The origin of the soup kitchen can be traced back to French chef Alex Soyer during the Great Irish Famine of the 19th century (Morris, H 1982; Rosenblum et al. 2005). Soyer is also famous for his recipe for 'famine soup', which he created for workers during the Famine (Morris, HS 2013).

It is difficult to trace the origins of soup kitchens in Australia, but like the United States and the United Kingdom, they have become more prominent since the 1980s with the rise of neoliberalism as the dominant political and social force and the related retreat of a strong welfare state (as discussed in chapter two) (Berg 2008; Biggerstaff, McGrath Morris & Nichols-Casebolt 2002; Booth & Whelan 2014; Poppendieck 1998; Rosenblum et al. 2005). Neoliberalism as impacted upon the nature and scope of social and economic disadvantage (as discussed in chapter three) and seen an expansion of the third sector (as discussed in this chapter).

4.5.1. Defining the soup kitchen

There is limited international and Australian literature on soup kitchens, and the extant literatures are largely silent on definitional issues. Some writers integrate soup kitchens into broader definitions of the emergency food system, categorising them as community-based and charitable in nature (Tarasuk & Eakin 2003). Others differentiate between food banks and soup kitchens based on their mode of delivery, with food banks supplying 'unprepared food taken off premises' and soup kitchens 'prepared food consumed on premises' (Stein 1989, p. 242). Sociologist Janet Poppendieck (1994, p. 69) provides the most comprehensive definition from the literature, although it still fails to fully capture the complexity of the soup kitchen system:

In common parlance, the term *soup kitchen* is usually used to designate a prepared meal program, whether the meal is consumed on site or taken away (emphasis in original).

Many scholars seem to take the definition of soup kitchens as a given, common sense, or imply definitions through discussions of elements of soup kitchens, such as who is accessing the services and the challenges associated with food charity. Anthropologist Irene Glasser, in her book *More than Bread: Ethnography of a Soup Kitchen* (1988), provides a description of the structure of the soup kitchen she studied, but does not provide a definition of soup kitchens as a service. The same absence of definition is apparent in more recent studies of soup kitchens by Allahyari (2000) and DiFazio (2006).

This thesis provides a comprehensive definition of soup kitchens, based on the key traits identified by a review of the relevant literature. It is a definition broad enough to capture a variety of soup kitchen models, but focussed enough to be useful in identifying and studying soup kitchen services. It also serves to distinguish soup kitchens from other types of charitable food provision, as well as the commercial sale of prepared meals.

The comprehensive definition of the soup kitchen formulated here has five key elements. Each element is descriptive, but also distinguishes soup kitchens from other commercial and non-commercial services; that is, a soup kitchen:

- is run by a charitable, not-for-profit or community based organisation;
- serves pre-prepared meals, hot or cold (either to be consumed on the premises, or to be taken away);
- provides food for free or for a nominal charge; and
- makes its food available to the general public.

Soup kitchens are charitable services. In contrast to businesses that sell pre-prepared food, soup kitchens are run on a not-for-profit basis (DiFazio 2006). Soup kitchens are non-commercial entities – their food is donated, their workers are largely volunteers and they do not charge a commercial fee for their goods (Allahyari 2000). Soup kitchens can be run by discrete charitable entities, offshoots of larger not-for-profits (such as churches), or by small community groups (Bowering, Clancy & Poppendieck 1991; Glasser 1988; Gurumurthy et al. 2016). There are levels of formality, but soup

kitchens are collective and ongoing actions – a one-off free meal or barbecue does not constitute a soup kitchen.

A distinction also needs to be made between soup kitchens and other altruistic business practices. There has been a recent trend towards ‘suspended coffees’ for example, where a patron in a café pays for their own coffee, as well as an additional coffee that will be provided for free to another patron who does not have money (Black 2013). There are also businesses that provide ‘pay what you are able’ or ‘pay what you want’ meals (Riener & Traxler 2012). Such programmes are most often integrated into for-profit businesses and therefore are not, by definition, soup kitchens.

The second element of soup kitchens is that they serve pre-prepared food. As discussed above, food pantries provide groceries to poor but housed individuals and families (Benjamin & Farmar-Bowers 2013; Daponte 2000). By contrast, soup kitchens provide pre-prepared – generally hot – meals (Biggerstaff, McGrath Morris & Nichols-Casebolt 2002; Bowering, Clancy & Poppendieck 1991; Magura et al. 2000; Poppendieck 1994; Wicks, Trevena & Quine 2006). This element of soup kitchens can be problematic, as meals may not always be tailored to diet or taste (Reschovsky 1991). Some soup kitchens may also provide food items to take away, and hot drinks (Glasser 1988; Magura et al. 2000).

The third key feature of soup kitchens is that the meals are provided to attendees for free (Bowering, Clancy & Poppendieck 1991; Eppich &

Fernandez 2004; Miller, Creswell & Olander 1998), or for a nominal fee (Mulquin, Siaens & Wodon 2000). The rationale for charging a nominal fee in some soup kitchens is summarised in a study of a Belgium soup kitchen by Mulquin, Siaens and Wodon (2000, p. 254) which noted that the fee charged is nominal (less than \$2 US), and the meals:

are not provided for free, in order to respect the dignity of the customers and to not foster a culture of dependency among them...

Given that some soup kitchens do charge a small amount for their food, a distinction must be made between soup kitchens and 'community cafés': being not-for-profit church-run cafés that serve low-cost meals and snacks (Marion Church of Christ 2016; St Andrews by the Sea 2016). Community cafés serve the dual purposes of providing food and social interaction in a way similar to soup kitchens. They are more business-like in their operations and not targeted only to people experiencing homelessness, poverty or similar types of disadvantage.

The final definitional element is that soup kitchens do not require proof of need and do not impose mutual obligation requirements on attendees (Lane & Power 2009; Magura et al. 2000; Rosenblum et al. 2005). This sets them apart from the emergency food services sector, and the rest of the third sector generally. Services such as food pantries regularly maintain records of attendees in order to check entitlement (Curtis 1997), and to keep track of how often individuals seek relief (Berg 2008). By contrast, soup kitchens

have a policy of not asking for proof of need, and will serve anyone who seeks food from them (Curtis 1997; Eppich & Fernandez 2004; Johnsen, Cloke & May 2005).

While the original soup kitchens in Ireland often required attendees to undertake work in exchange for their meals (Berg 2008), modern soup kitchens do not have any requirements of reciprocity (Glasser 1988; Johnsen, Cloke & May 2005, p. 329). In effect then, soup kitchens remove the distinction between the so-called 'deserving' and 'undeserving' poor.

4.5.2. The soup kitchen literature

The elements discussed above serve to distinguish soup kitchens from other kinds of charitable organisations, and in particular other forms of emergency food service. Aside from these defining features of soup kitchens, there are other aspects of such services that need exploring, and which form the basis of further discussions concerning the data collected for this thesis. These relate to: attendee demographics; the purpose of soup kitchens; organisational models; goods and funding sources; and community engagement and backlash. Consideration of these issues provides a more rounded picture of what soup kitchens are and what they do.

The traditional and popular view of soup kitchens is that they primarily target, and largely serve, people who are homeless, especially people sleeping rough, couch surfing, or living in temporary accommodation

(DiFazio 2006; Glasser 1988; Lane & Power 2009). Studies of the actual social characteristics of soup kitchen attendees vary markedly between geographic areas. In the United States, the literature suggests that soup kitchens are used by rough sleepers, and also by single-parent households, low-income families and people who are underemployed or seasonally employed (Biggerstaff, McGrath Morris & Nichols-Casebolt 2002; DiFazio 2006; Poppendieck 1998). Some attendees receive government welfare (Bowering, Clancy & Poppendieck 1991; Rauschenbach et al. 1990).

While some North American studies indicate a disproportionate level of attendance by African-American people (Bowering, Clancy & Poppendieck 1991; Friesen, Spangler & Altman 2009), other soup kitchen studies identify a significantly higher white population among attendees (Rauschenbach et al. 1990). The North American studies put the average ages of attendees between 30 and 50 (Bowering, Clancy & Poppendieck 1991; Rauschenbach et al. 1990). A low level of education (Biggerstaff, McGrath Morris & Nichols-Casebolt 2002) has been identified among attendees of the soup kitchens studied in the literature, as have high levels of substance abuse (Magura et al. 2000; Nwakeze, Magura & Rosenblum 2002; Nwakeze et al. 2003; Rosenblum et al. 2005).

The literature highlights four intended or actual outcomes of soup kitchens. The first and most important goal of soup kitchens is that they provide relief from hunger (Dachner et al. 2009), with studies indicating some attendees come simply for food (Lane & Power 2009; Mulquin, Siaens & Wodon 2000).

Other scholars indicate that there is a social element to soup kitchens, with some attendees forming interpersonal connections (Friesen, Spangler & Altman 2009; Glasser 1988; Lindberg, Lawrence & Caraher 2016; Mulquin, Siaens & Wodon 2000; Poppendieck 1994).

Some soup kitchens have strong religious (particularly Christian) underpinnings, and see the service as a way to impart their beliefs to others (Dachner et al. 2009; Lane & Power 2009). Finally, some soup kitchens provide referrals and linkages between attendees and longer-term social supports, such as housing, welfare or treatment for substance abuse (Magura et al. 2000; Nwakeze et al. 2001; Poppendieck 1994).

The literature identifies two models of soup kitchens. The first is the fixed soup kitchen. These are contained services, generally set up in a canteen or café style, with a kitchen, serving area and seating/dining area (Allahyari 2000; DiFazio 2006; Glasser 1988). In a fixed soup kitchen, meals are prepared and served on the same premises (DiFazio 2006; Glasser 1988; Mulquin, Siaens & Wodon 2000). Some fixed kitchens are attached to, or adjacent to, a day centre or a homelessness shelter (Glasser 1988; Miller, Creswell & Olander 1998). This model of soup kitchen is seen as allowing for higher levels of interpersonal interaction between attendees (Glasser 1988; Mulquin, Siaens & Wodon 2000).

The second soup kitchen model is what is known as the 'soup run'. It is a mobile version of the fixed soup kitchen, and is characterised by the

separation of the place of food preparation and the place of food service (Johnsen, Cloke & May 2005; Lane & Power 2009). Typically, food is pre-prepared in a kitchen and transported to a temporary, and usually pre-determined, site where it is distributed. Mobile services by nature tend to lack the extra services provided by fixed soup kitchens, although some may have emergency services such as police or ambulance on hand to provide aid for attendees (Johnsen, Cloke & May 2005). Mobile soup runs have been criticised for lacking the control and safety of their fixed counterparts, due to the open and uncontained areas they serve in (Lane & Power 2009).

Services source food through several channels. In the United States, surplus food is provided through government programmes (Biggerstaff, McGrath Morris & Nichols-Casebolt 2002). Other services source food through individual and corporate donations of goods (Eppich & Fernandez 2004; Poppendieck 1994). Increasingly, food is sourced by soup kitchens through intermediary organisations (Booth & Whelan 2014; Lindberg et al. 2014; Warshawsky 2010). The rise of these organisations in Australia – for example, Foodbank, SecondBite and Oz Harvest – has, according to the literature, created more consistency in supply for services such as soup kitchens (Benjamin & Farmar-Bowers 2013; Lindberg et al. 2014). Some soup kitchens in North America also operate community gardens from which to source fresh fruit and vegetables (Hanna & Oh 2000; Loopstra & Tarasuk 2013). This too is an emerging trend in Australia (Anglican Parish of St Mary's 2016; Cultivating Community 2016).

There is an inherent lack of security observed around both funding and food in relation to soup kitchens (Berg 2008; DiFazio 2006; Poppendieck 1998). Several commentators, particularly in the United States (Allahyari 2000; Berg 2008; DiFazio 2006; Poppendieck 1998) have documented the ongoing struggles of soup kitchens in making ends meet. Some services have been noted as having to take measures such as rationing the amount of food served, cutting down the hours that food is made available, or turning people away due to lack of food availability (Allahyari 2000; Berg 2008; DiFazio 2006; Poppendieck 1998).

In addition, soup kitchens can have a problematic relationship with the local community. In the United States, neighbourhoods and individuals have expressed their displeasure at having soup kitchens nearby (Allahyari 2000, p. 225). In the United Kingdom, there has been government backlash against soup runs, largely on the basis of fears of violence and perceived perpetuation of homeless 'lifestyles' (Johnsen, Cloke & May 2005; Lane & Power 2009). Speaking in 2016, several academics from Australian and Malaysian business schools (Gurumurthy et al. 2016) discussed moves by the Malaysian government to ban soup kitchens in a broad area of Kuala Lumpur on the basis that they encouraged itinerant lifestyles, spread disease and provided a poor image of the city. In 2015 in Adelaide, a local strip club stated publicly that it was being forced to move premises due to violence and drunkenness associated with a neighbouring soup kitchen (Williams 2015).

It is difficult to generalise about the nature of soup kitchens given the limited literature available. Individual services have their own histories, experiences, philosophies and methods of operation. As services that are underresearched and separate from one another, commonalities in terms of models and modes of operation, reach and scope can be difficult to discern. What is evident however, is that soup kitchens don't fit comfortably into new (neoliberal) models of welfare provision across the third sector. The literature highlights a lack of reciprocity and formalisation of soup kitchens, framing them as simple and largely unchanging services that sit apart from an evolving (professionalising and corporatising) third sector.

4.6. Controversies in the emergency food sector

While governments champion the rise of volunteering and private charity as a better delivery model for welfare (Billis & Glennerster 1998; Considine, Lewis & O'Sullivan 2011; Gilmour & Milligan 2012), the third sector is not without its critics. Concerns have been raised around the provision of welfare by non-government actors, particularly in the emergency food sector. These issues include social justice and enforceability of rights; reliability and consistency of product and the danger of symbolic charity; shame and stigma; and choice and autonomy.

Critics of emergency food see the sector as a poor substitute for government welfare, and a retreat from the fundamental ideals of social justice (Curtis 1997; Riches 2002). Sociologist Janet Poppendieck opined, '[charity] erodes the cultural prerequisites for a vigorous democracy' (1998,

p. 255). One argument put forward in this vein is that charitable food provision does not address the underlying structural and social issues that contribute to poverty and food insecurity (Frederick & Goddard 2008; Riches 2002). Others note that such approaches are not an adequate substitute for achieving equitable social outcomes through government welfare and protections (Benjamin & Farmar-Bowers 2013).

A further criticism of private charity is the lack of enforceable rights for clients receiving aid (Tarasuk & Eakin 2005). Poppendieck (1994, p. 69) considered government provision as the 'justice model' of welfare:

associated with dignity, entitlement, accountability, and equity.

Its essence is the creation of rights, not only moral rights that may be asserted but also justiciable rights that can be enforced through legal action ... the justice model springs from a notion of fairness and is concerned with the limitation of inequality.

Contrastingly, private charity, it is argued, particularly in the emergency food sector, is characterised by a lack of consistency and certainty, and is, at its core, an altruistic deed that cannot be demanded or enforced (Poppendieck 1994, pp. 72-73). Commentators (Lindberg et al. 2014; Riches 2002) are especially critical of the emergency food system as undermining a fundamental human right to food. Consequently, the experience of charity can be a degrading one. On this point, Lichtenberg (2009, p. 19) argues:

to be the recipient of aid or charity is to experience a sense of indebtedness, and this feeling is an important source of

concern that charity is inevitably tinged with domination, pity and resentment.

On an operational level, scholars criticise the unreliability of private charity, due to its supply-driven nature (Frederick & Goddard 2008; Poppendieck 1994; Tarasuk & Eakin 2003; Wakefield et al. 2012). Private charity is seen as the replacement of consistency and certainty with uncertain, *ad hoc* or sub-standard products through the third sector (Berg 2008; DiFazio 2006; Poppendieck 1998). Studies of the emergency food sector in Australia and abroad note inconsistency of aid (Crawford et al. 2014; Frederick & Goddard 2008; Lindberg, Lawrence & Caraher 2016); a lack of resources (Booth & Whelan 2014; Koh, Bharel & Henderson 2016); and a lack of culturally appropriate foods (Ford, J, Lardeau & Vanderbilt 2012; Ford, JD et al. 2013). The uncertain nature of charity makes it unreliable for recipients whose lives already lack stability (Frederick & Goddard 2008; Wakefield et al. 2012).

One of the most substantial criticisms of the emergency food sector has been the nutritional content of the food served (Hoisington, Manore & Raab 2011; Lindberg, Lawrence & Caraher 2016; Sisson & Lown 2011). Nutritional studies of foods provided by emergency food services have found deficiencies in the provision of fresh fruit and vegetables, as well as high concentrations of foods containing large amounts of fat and sugar (Hoisington, Manore & Raab 2011; Sisson & Lown 2011). A study by Eppich and Fernandez (2004) however, found that a soup kitchen in North Carolina

had meals that, while lacking in some areas (particularly in vitamin D), were, overall, nutritious. These results from the literature highlight the fragmented nature of emergency food services, especially soup kitchens, and how variable quality and content is between organisations and geographical areas.

In their study of soup kitchens and similar meal programmes in Toronto, Dachner et al. (2009) found a disconnect between the food provided and the needs and wants of the people seeking aid. Tarasuk and Eakin's (2003) study of food rescue and food banking observed a high proportion of inappropriate and unusable food being provided to service users, with the authors arguing that food charity is largely symbolic in nature and designed to make volunteers and donors feel better about themselves, rather than helping people who are experiencing disadvantage. Scholars including Fredrick and Goddard (2008), Berg (2008) and Poppendieck (1998) argued that the inappropriateness of goods provided by charitable organisations can be a barrier to people seeking and accessing further aid. The rise of intermediary organisations has arguably increased the certainty of supply, however, giving emergency food services a more dependable source of goods (Booth & Whelan 2014).

Issues of inappropriateness in terms of food link strongly with concerns around choice and emergency food services. In the study of a food bank in Toronto, it was observed that service users were explicitly told that they would not be able to receive substitutions for groceries provided to them

(Tarasuk & Eakin 2003, p. 1510). In another, Tarasuk and Eakin (2005, p. 184) note that '[f]rom our observations, it would appear that clients could take or leave what food was offered to them, but they rejected food at their own peril'. For some users, there may only be a 'choice' between an inappropriate item or nothing at all (Douglas et al. 2015; Ford, JD et al. 2013; Frederick & Goddard 2008; van der Horst, Pascucci & Bol 2014). The rise of choice food pantries (where users choose a selection of food available to a pre-determined value) (Benjamin & Farmar-Bowers 2013; Martin, KS et al. 2016; Martin, KS et al. 2013; Remley, Kaiser & Osso 2013) may correct some of these deficiencies and foster self-esteem and increased self-reliance in service users.

A final concern about the emergency food sector is stigma. The need to seek charity may be considered shameful, causing or worsening feelings of desperation, because of the requirements to justify need and treatment of recipients, which may cause or increase low self-esteem in already disadvantaged people (Frederick & Goddard 2008; Purdam, Garratt & Esmail 2015; van der Horst, Pascucci & Bol 2014). An increased focus on personal responsibility, mutual obligation and bureaucracy has made accessing charitable services both complicated and demeaning for clients (Fothergill 2003; Purdam, Garratt & Esmail 2015; Wakefield et al. 2012). It has been argued (Douglas et al. 2015; van der Horst, Pascucci & Bol 2014) that the lack of choice, and the sub-standard nature of goods provided, sends a negative message to recipients about their worth as a person, including whether they 'deserve' a certain standard of goods.

The act of seeking goods through private charity can lead to feelings of helplessness. Lindberg, Lawrence and Caraher (2016) observed that service users were referring to themselves as 'beggars' and felt they needed to plead for goods from people who were well off. Several studies have explored these complicated emotional and psychological consequences of the need to seek and receive food charity (see, for example: Douglas et al. 2015; Frederick & Goddard 2008; Lindberg, Lawrence & Caraher 2016; Purdam, Garratt & Esmail 2015; van der Horst, Pascucci & Bol 2014).

Alongside feelings of shame among service users, there is some commentary included in the literature about the expectation of gratitude for organisations or volunteers by service users, whether or not the goods received are sufficient or desirable (Allahyari 2000; Tarasuk & Eakin 2003). This expectation seemingly exists even when what is provided is sub-standard, inappropriate or has not been of help to the recipient (Douglas et al. 2015; Lichtenberg 2009; Stein 1989).

Agencies underpinning the emergency food sector demonstrate an awareness of these conflicts, with many seeing government welfare as still the best solution to alleviating poverty and disadvantage (Allahyari 2000; Berg 2008; DiFazio 2006; Poppendieck 1998). There is a sense of duty to do good and meet the immediate and basic needs of service users indicated by staff and volunteers in the emergency food sector, with Johnsen, Cloke and May (2005, p. 328) quoting a soup run volunteer in the United Kingdom:

If there wasn't a need we wouldn't do it, and the need is still there, and at the end of the day if the need isn't supplied, people will die.

Whatever the real or perceived failings of the emergency food sector and the services with it, the emergency food sector, including soup kitchens, exists to provide a basic, and extremely vital, service.

4.7. Conclusion

The third sector in Australia is large and complex. It is an evolving structure that encompasses a myriad of disparate organisations and groups, all with different goals and modes of operation. The sector has become increasingly corporatised and institutionalised, with strong ties to both business and government. Over time the focus of actions across the sector has shifted away from short-term emergency provision of aid, such as food, to longer-term and multi-faceted aid.

Sitting within the third sector is a collection of less understood, more informally structured services known as the emergency food sector. Emergency food services are more fragmented and immediate than much of the corporatised third sector. Like the third sector generally, the emergency food sector is also increasingly becoming more corporatised, moving towards individualisation of services. Such services are also seeking to promote longer-term goals for service users, such as education and self-sufficiency (Butcher, LM et al. 2014). This shift is most notable in food pantries, which have begun incorporating grocery choices into their

operations (Butcher, LM et al. 2014; Cotugna & Beebe 2002; Martin, KS et al. 2016; Martin, KS et al. 2013).

Soup kitchens occupy a unique space within the third sector and even within the emergency food sector. Like the rest of the third sector, they have moved away from their 'emergency' focus, becoming an ongoing source of aid. But unlike the rest of the sector, they appear to have resisted the move towards individualisation, mutual obligation and corporatisation. It appears, from the scant literature about them, soup kitchens remain the essence of traditional 'hand out' charity (DiFazio 2006; Glasser 1988).

Soup kitchens are also vastly underresearched, save for a small number of studies (Allahyari 2000; DiFazio 2006; Glasser 1988). Broader research into the emergency food sector (most notably Berg 2008; Poppendieck 1998) also provide minor insight into soup kitchens. Therefore, limited data exists on modern soup kitchens. Chapters six and seven explore the field research conducted for this thesis. The discussions contained within the chapters seek to fill many of the gaps in the literature and our understanding of the services. Together the chapters provide a study of the organisational model of the soup kitchen. The chapters also highlight the resilience of such services in the face of sectorial change and a neoliberal welfare state, as well as the seeming resistance of soup kitchens to change.

Chapter 5

Methodology

5.1. Introduction

Following from the literature and before presenting the data, this chapter sets out the methods used in the field research component of the thesis. It begins with an exploration of the main objectives of the research, before discussing the methodological frameworks and data collection methods used. Ethical challenges and limitations in data collection are also explored. Initial data collection was based on the relevant academic literature, but it was also heavily influenced by observations made during field research. Notably, many of the assumptions around the use, operation and attendees of soup kitchens evolved during the course of the research, with the initial research frameworks adjusted accordingly.

5.2. Research methods

Field research for this thesis used a combination of participant observation and semi-structured one-on-one interviews with key informants involved in the operation of the soup kitchens (staff, coordinators and volunteers on the ground), as well as the people who use such services, referred to in the research as attendees. (The complexities around staffing and informants involved in the operation of services is explained fully in chapter six in the operational discussion of each service.)

For this research, it was deemed appropriate to use qualitative research methods rather than quantitative-focussed surveys to garner information

from both staff and attendees. Srivastava and Thomson (2009, p. 73) note that while quantitative research methods can provide answers to technical questions – the who, what, where and when – the how and why is best answered through more in-depth qualitative exploration. As further noted in the literature (Babbie 1986; Flick 2006), broad quantitative surveys are best utilised where a large group of individuals is being studied to explore and explain opinions or behaviours. While soup kitchen staff and volunteers may be able and willing to provide quantitative feedback through surveys, the relatively small population using soup kitchens means that qualitative methods are more appropriate (Travers, M 2012).

Qualitative analysis allows the researcher to place information received in a broader context, and to gain a deeper and more nuanced understanding of the position of the people studied (Sarantakos 1998). It takes a naturalistic approach to research, allowing the participants to illuminate and guide the themes explored (Ormston et al. 2014). Moving away from viewing disadvantage and charitable use in purely statistical terms, qualitative methods help humanise service users through an understanding of their lives, their needs and their disparate reasons for attending soup kitchens (Sarantakos 1998). One can understand the world through a participant's eyes, using flexibly structured interviews (Charmaz 2004). Moreover, qualitative data collection methods are 'spontaneous and open ended and usually [have] less structure and planning than quantitative research' (Dooley 1995, p. 260). This makes qualitative data ideal for exploring the

natural organisation and behaviour of soup kitchen staff and volunteers, and service users.

Qualitative research methods also allow researchers to understand the lived experiences of participants and the interactions between participants and the world around them (Flick 2006). In the context of this thesis, such techniques help us to understand the reasons people work for or use soup kitchens, the interactions between attendees and providers, and the way soup kitchens are operated. For this research it was decided to both observe the operation of the services and conduct interviews at the soup kitchen sites. This type of field research is useful where people and processes need to be observed within their own setting, particularly where interaction is limited to a specific time or place (Babbie 1986).

5.2.1. Participant observation

Field research was conducted through a combination of participant observation and interviews with soup kitchen coordinators, staff and volunteers, and attendees. The purpose of participant observation is to observe the phenomenon under study from within, particularly the interactions between individuals in a relevant setting, usually by taking some part in the activities of the group or organisation (DeWalt & DeWalt 2011). This research method allows understanding of the way in which people interact naturally in a given setting, with as little interference from the researcher as possible (Hartman, J & Hedblom 1979). Participant observation thus differs from interview techniques as a data collection

method for, as Janes (1969, p. 52) noted: ‘the subject observed is not aware that the investigator is using his behaviour as a source of information’.

In this study, the researcher interacted with attendees, staff and volunteers as both an observer and a participant. Participant observation involved touring soup kitchen premises, observing interaction between people within the service areas, as well as a combination of helping prepare and serve food and engaging volunteers and attendees in casual conversations. Observational data was also collected about service users during other informal interactions such as playing card games.

This method of participant observation was considered most effective as it allowed researcher integration with research subjects and the soup kitchen ‘community’, without losing the researcher role completely (Babbie 1986, p. 243). Researcher integration into the subject of the research enables one to build up trust with others (in this case, study participants) and allows their integration into the environment (Hartman, J & Hedblom 1979). Observing volunteers and attendees on the premises, having casual conversations with them and ultimately undertaking interviews within the service allowed greater immersion in the environment. This immersion arguably provided greater insight than if the subjects were studied from afar (Charmaz 2004). In saying this, the researcher was cognisant of the fact that, as participant observation combines research observation with becoming part of the subject being studied, it can be a delicate balance of immersion and objectivity (DeWalt & DeWalt 2011). There is an inherent element of

subjectivity in participant observation, as situations observed in field research can be interpreted differently depending on the observer, their background and experiences, and their view of the world and particular problems and scenarios (Stafford & Stafford 1993). Moreover, the process of participant observation can be time consuming. However, it provides deeper insights into the workings of the soup kitchens, the norms and processes underpinning them and the people they serve (Hartman, J & Hedblom 1979).

As noted above, participant observation can be time consuming. For this study it involved spending time at each soup kitchen. The time spent at each service varied depending on their opening hours and the nature and duration of the service. Observation was undertaken in several ways. At most services the researcher aided in the preparation of meals, or simply observed the process of preparation if unable to help directly. This provided the opportunity to talk to staff within the kitchen environment, away from the attendees. Doing so allowed observation of 'social' norms in the services (Mason 2002), particularly, in this case, food preparation. Helping prepare food enabled observation of such things as attitudes to food handling, as well as insights into routines and information on the origins of the food being prepared. It allowed for observation of the interactions between staff/volunteers, in addition to their attitudes (and understandings) of the attendees while away from the serving area. The researcher was able to have informal discussions with the staff and be present during conversations between them. These casual conversations helped unearth

nuances, attitudes, behaviours and norms that may well have been missed through the more formal interviews conducted (Hartman, J & Hedblom 1979).

As observations also took place during food service time, it was possible to gain a clear understanding of the interactions between kitchen staff, and especially volunteers, and attendees. These processes of immersion within the services gave the opportunity to note the spoken and unspoken rules of conduct in each service (something which was not anticipated to be as formal as the research findings suggest) and any possible sanctions for breaking them.

Interactions with attendees, staff and volunteers were at a level of moderate participation, where help was provided in undertaking some duties, but the majority of the interaction with people (and services) was through conversations. Records of observation and informal interactions were noted by hand immediately after leaving the soup kitchen. This method of recording data ensured participant observation was as unobtrusive as possible while allowing robust data to be collected (Dooley 1995).

During the field research, the researcher attended a combination of fixed soup kitchens and mobile soup runs. The fixed soup kitchens – particularly service one, which was attached to a day centre – allowed for more extensive observation of attendees. Conversely, the mobile soup runs provided more time with staff during preparation and travel to the service

sites. Observation of both soup kitchen models provided a contrast between attendee and service interaction in more formal and informal settings.

5.2.2. Semi-structured interviews

Alongside participant observation, semi-structured one-on-one interviews were undertaken with both the staff and volunteers of the soup kitchens, and attendees. As noted earlier, interviews were chosen as a key research methodology for this study as they allowed the researcher to gather in-depth information from participants in a way that is systematic and controlled, but that also allows for flexibility in discussions (Denscombe 2010; Sarantakos 1998, p. 256). Further, semi-structured interviews enable a researcher to cover the key themes required, at the same time allowing for spontaneous questions and answers, and flexibility in the order and nature of questions asked (Denscombe 2010; Ryan, Coughlan & Cronin 2009). Table 5.1 provides an overview of the interviews conducted in each of the soup kitchens observed.

The interviews used in this study were semi-structured, falling between strongly structured interviews for the purpose of collecting data about the use of soup kitchens, and more open-ended discussion focussed on the interviewee's background and experiences (Hartman, J & Hedblom 1979; Sarantakos 1998). This meant that there were pre-determined questions (see Appendices A and B), but they were broad and the researcher had scope to ask further questions on topics of importance that were raised by

the interviewee. All interviewees were provided with introductory letters and information sheets prior to interview (see Appendices C, D, E and F).

Table 5.1 Breakdown of formal interviews conducted

	Service One	Service Two	Service Three	Service Four
Location	Adelaide CBD	Adelaide CBD	Inner south-western suburbs	Western suburbs
Observation times	11 mornings	One evening	One evening	Three evenings
Attendees interviewed	Seven on premises	Participant observation due to time, safety and operational concerns	Participant observation due to time and operational constraints	Eight on premises
Staff/ coordinators/ volunteers interviewed	Eight on premises	Participant observation due to time and operational constraints	Three undertaken off premises	Seven on premises One undertaken off premises

Questions for attendees were more open-ended in nature and centred around themes: personal circumstances; engagement with soup kitchens and other welfare providers; alternative means for accessing food; and views on charity (see Appendix B). Interviews were more structured for volunteers and staff, as the data being sought from these study participants was about their habits, the frequency of volunteering/working, and their personal circumstances. Staff were asked about the operation of the relevant soup kitchen, other charitable work undertaken and relationships within the soup kitchen (with other employees and with attendees) (see Appendix A). As key informants for services, interviews with coordinators,

senior staff and longer serving volunteers were more in-depth, using the set questions for volunteers but also tracing the history of the relevant service and its parent organisation, as well as interactions between the soup kitchens and other groups, such as churches, businesses and local communities.

A total of 34 formal interviews were conducted for this research. Of these, 19 were conducted with people who worked or volunteered at the soup kitchens (staff, volunteers and coordinators) and 15 were soup kitchen attendees (see Table 5.1). Interviews were all conducted face-to-face, allowing for the interpretation of body language and other non-verbal cues as context (Ryan, Coughlan & Cronin 2009). Where possible, interviews were conducted one-on-one, with two exceptions due to circumstances. In one case an interview was conducted with a husband and wife together, and in another case an interview was conducted with a key informant with some impromptu input from another researcher. In line with the observations of Denscombe (2010, p. 176), face-to-face interviews were generally easier to arrange, control and interpret. The unique situations of each interviewee could be taken into account, allowing study participants to tell their own stories. Interviews with attendees were all conducted on the soup kitchen premises; a deliberate approach given the assumed nomadic nature of the participants.

While impromptu interviews on premises have been acknowledged as harder to control than off-site ones (Denscombe 2010), and disruptions,

background noise and other attendees interrupted some interviews briefly, all on-site interviews were able to be conducted efficiently and effectively. Most interviews with staff and volunteers were conducted on premises; this time for their convenience. Interviews with four more senior coordinators and staff were undertaken in pre-arranged circumstances off premises, in quieter, confidential and more controlled conditions, which also allowed for longer and more in-depth discussions. Of these senior coordinators, one was interviewed off premises to allow time for more in-depth discussion of the relevant soup kitchen's history and philosophy. The other three interviews were undertaken outside soup kitchen times and off premises due to the transitory nature of the soup kitchen they were a part of that made in-depth interviews difficult.

Interview data were analysed using framework analysis (Ritchie & Spencer 1994); a common method of analysis in applied policy research, particularly in multidisciplinary contexts (Srivastava & Thomson 2009), in which the researcher interrogates data thematically, notes and collates themes, and familiarises themselves with the material collected in the field. Data themes were determined from the literature review, with some also emerging organically during interviews and as a result of participant observation.

5.3. Selection of services and study participants

Relevant services for this research were initially identified through a comprehensive search of food assistance organisations on the South Australian Community website (SA Community 2011). Organisations were

also identified by word of mouth and through viewing posters and advertisements for local soup kitchens in both homelessness and other premises such as second-hand shops.

A list of 80 organisations operating in South Australia broadly defined as emergency food services and community cafés was compiled from these exercises. Regional services were omitted due to travel constraints and inability to source accurate information on the nature and scope of the organisations. A total of 64 parent organisations were identified in the Adelaide metropolitan area. Further information on each service was then sought, via various means (web searches, examination of local council community directories, *et cetera*) and those services falling outside the soup kitchen definition – as discussed in chapter four – were omitted. The data sourced from Community SA was not always complete, and some organisations (or the nature of their services offered) could not be identified or located.

Nineteen soup kitchen sites were identified using the methods discussed above, including seven that were overseen by the same parent organisation. Eleven service sites were omitted due to geographical limitations, safety concerns, or organisational overlap. Eight services, including two operating under the same overseeing organisation (but located in different suburbs), were contacted. Services from city and suburban areas were asked to participate in the research, including a combination of fixed soup kitchens and mobile soup runs, in order to provide

as broad a picture of mode of operation, clientele and catchments as possible.

Of the eight services contacted, four responded positively and allowed observation and interviews to be undertaken on their premises. Where a larger organisation ran several soup kitchen premises, only one site was observed and information was then sought on the other services through interviews with key informants. Different 'models' of operation among the soup kitchens were sought out; from those attached to day centres, to community-based kitchens, to transitory soup runs that were set up temporarily then dismantled. By default rather than design, the services participating in the research also represented different models and approaches in terms of ancillary services attached to them: for example, emergency aid, on-site health or housing services and religious support.

As Travers (2012) and Gaskell (2003) both note, there is no agreed upon universal baseline number of interviews necessary for qualitative research to be indicative of trends in experiences. The number of qualitative interviews that should be undertaken in any given research depends largely on the nature of the research and when 'saturation' point is reached (Silverman 2010; Travers, M 2012). Saturation point occurs when no new themes can be extracted from the data collected. Understanding saturation is important, for, as Gaskell (2003, p. 43) notes, 'there are a limited number of interpretations or versions of reality'. During the field research, 19 interviews were undertaken with the staff and volunteers at the participating

services, and 15 soup kitchen users were interviewed (Table 5.1). Interviews were undertaken between December 2012 and September 2013. Interviews were audiotaped and contemporaneous notes were taken. Interviews were transcribed verbatim and analysed for common themes via standard word processor search functions.

The processes around recruiting both staff/volunteers and services users for the study was carried out on service premises. For staff/volunteers, a key staff member in the soup kitchen provided a verbal description of the research and the request for study participants. Staff/volunteers were approached about participating in the research during the time spent in food preparation. As most services had a maximum of ten people preparing for food service at any given time, all people present could generally be approached about being involved in the project. Interviews were undertaken with everyone who accepted. Interviews with staff/volunteers had no other criteria for inclusion beyond working at the soup kitchen and consenting to be interviewed. All staff interviewed were aged over eighteen (children were volunteering at one of the services) and were provided with the requisite information about the study required by The University of Adelaide Human Research Ethics processes (see Appendices C, D, E and F). These requirements are discussed later in this chapter.

Attendees were also approached within the soup kitchen premises, most often in the dining area (where applicable) or area where food was being consumed in the case of the mobile services. Attendees were recruited for

the research in a largely random manner, with the researcher finding that simply approaching people directly, explaining the research and asking if they were interested in talking with her was the most effective method of recruitment. At two of the services, a key staff member also promoted the research to attendees, explaining the purpose of the study and directly identifying the researcher to people.

Beyond their attendance at the soup kitchen, no specific inclusion criteria were applied to the process of recruiting attendees to the study. Initially, attendees were to be interviewed on the basis that they self-identified as homeless, but with the broadening of the scope of the thesis beyond homelessness – a result of early research findings that emphasised that such services provide assistance to a much wider group of people than the homeless – this inclusion criterion was removed. Given the nature of the services studied, there was some concern that attendees of soup kitchens might not be willing to be interviewed, particularly because of possible issues around shame or mistrust (Travers, M 2012). Finding willing participants was less problematic than anticipated, possibly because interviews were conducted in a less formal manner on service premises. That said, recruiting service users was somewhat challenging. Not all attendees agreed to be interviewed, although some were willing to engage in informal conversations.

A small number of interviews were conducted with attendees who were initially uncertain about the research and clearly wanted to know more about

it and build a relationship with the researcher prior to interview. In these cases mutual trust and rapport was built over time through informal interactions with them – including playing cards or casual conversations. These activities helped some overcome their scepticism about the research and their concerns about participating in the study. Discussions with staff at services about the need to build trust with the researcher before some attendees agreed to participate in the study revealed it to be a common behaviour. Some attendees were wary of telling their story to someone they don't know, simply suffering from research fatigue (given, as noted in chapter four, soup kitchen attendees are often used as an access point for researchers to gather information on people sleeping rough or using illicit substances) or plainly sick and tired of telling their story to people. Not all attendees interviewed were forthcoming with information about their experiences. It was notable also that mental health issues were prominent among the attendee population. Their narratives are presented in the thesis *prima facie*.

In seeking participants for the study, the researcher was mindful of approaching people of different ages, genders and circumstances. As alluded to earlier, some casual conversations were had with service users who did not want to be formally interviewed, but who were happy to chat about their experiences and the research generally. These casual conversations provided a more rounded picture of the people within a service beyond the in-depth profiles of interviewees. This small group of people, like those attendees who engaged in both casual conversation and

in-depth interviews, were spoken with at the soup kitchen service within a day centre. These attendees were all regulars at the service. They found comfort in remaining in these surroundings and in the company of their friends, and the service staff/volunteers. All interviews with attendees were conducted in accordance with University of Adelaide Research Ethics procedures (National Health and Medical Research Council 2007).

5.4. Challenges

A number of challenges were faced in the conduct of this research. The key challenge was finding services (and the parent organisations of services) willing to agree to be involved in the research in the first instance. A number of organisations contacted did not respond to the requests regarding the study, or were not able to accommodate the request for a range of reasons.

For those services who did agree to be part of the research, internal organisational processes needed to be satisfied as a prerequisite to undertaking observation or interviews on their premises. These processes and procedures reflected the internal philosophies and standards of conduct around participating in research and its value (including for clients) within organisations. In some instances the researcher was required to meet internal ethics procedures, as well as other health and welfare-related procedures and safety clearances. While in four cases these requirements for studying services and involving people in the research were met, for a fifth service they were an insurmountable hurdle. In this instance the staff of a small suburban soup kitchen stated that they were initially willing to be

involved in the research, but later had to withdraw as their parent organisation (a large social support service) did not grant approval. This decision followed several months of consultation with the service and its parent organisation and followed an application for involvement submitted through their internal ethics process. The reasons cited for this organisation's eventual withdrawal were that they were in the process of internal restructuring and did not feel they had time to commit to involvement in the study.

A number of other challenges were also met in the conduct of this research. Among these were some minor issues with determining the appropriate contacts within some services – especially the smaller, less prominent services – as well as scheduling times to meet with key people. These challenges added to the lead times around the field component of the research.

Ensuring personal safety for the researcher was a major factor in the conduct of this research, for a number of reasons. First, there was (and remains) an element of unpredictability around who attends soup kitchen services at any given time. Second, three of the soup kitchens operated in the evenings, with two of them set up outdoors and in temporary, unguarded settings. Third, supervisor experience with interviewing people with complex histories and personal circumstances (including mental health issues and substance abuse problems) had shown the need to exercise caution in such circumstances, and conduct interviews in public places. Fourth, safety was

a key issue raised by the staff of two of the services in their discussions with the researcher before her attendance at sites to undertake interviews and participant observation. For one of these services – a mobile soup run – the researcher (like all staff and volunteers) was required to undertake some basic awareness training around personal safety, familiarising herself with their procedures in the event of a fight or violent episode. Three of the four services had experienced violent incidents (between service users and also between service users and staff) and had instigated or changed safety procedures accordingly. After discussions with thesis supervisors, it was decided that being accompanied by another person (a supervisor) to the evening sites would allow the researcher to undertake work without having to be overly concerned for her own safety. For all interviews the researcher informed one of her supervisors of her location and commencement and finishing times.

5.4.1. Ethical considerations

This research was granted ethics approval from The University of Adelaide's Human Research Ethics Committee. This approval was received in August 2011, and renewed in May 2012 and April 2013, with initial approval given prior to any field research being undertaken. The conduct of the research was completely in accordance with the process for ethical research governed by that committee and as per the National Statement on Ethical Conduct in Human Research (National Health and Medical Research Council 2007).

Before every interview, participants were fully briefed on the research and the reasons for the study and interview. Study participants were provided with documents containing information about the project and contact details for the interviewer and her supervisors (see Appendices C, D, E and F). Interviewees were given an opportunity to ask questions and it was stressed to participants that they did not have to answer any questions they did not wish to, and they could withdraw from the interview at any time. Informed consent was sought from all interviewees, via the signing of the standard University Ethics Committee consent forms by the participant and the researcher. A duplicate of this was provided to the interviewee to retain. Although the need did not arise in the interviews undertaken, provision was made for interviews with people requiring consent from guardians.

Study participants were notified that their interview would be audiotaped, but that recording could be stopped whenever they needed and they were free to terminate the interview at any time. In the case of any distress on the part of the interviewee, or the raising of issues surrounding abuse or violence, drug and alcohol issues, or depression or suicide, a list of key organisations and their contact details was given out. This list was developed by the researcher in consultation with one of her supervisors and was also a requirement for the research as stipulated by the University's Ethics Committee.

Given that people using soup kitchens are generally part of a particularly vulnerable population, steps were taken to ensure their safety and

emotional security during interviews and other interactions. This was particularly the case when collecting sensitive and personal data regarding housing, homelessness and economic and social disadvantages. As noted by Bahn and Weatherill (2013), collecting sensitive data requires an understanding of the distress this can cause for interviewees.

It was of the utmost importance that the researcher treated all people interviewed with respect and compassion, for as Charmaz (2004) emphasised in their research, it is important to treat people with respect and as human beings and not simply as subjects of the research. Discussions with participants often continued after the 'formal' interview was complete, as well as, in many cases, occurring prior to it, with the researcher finding that this made people, especially service users, feel less like they were simply being studied and more as though they were being acknowledged as people.

The researcher was equipped to seek the advice and support of relevant university resources where interviews were particularly concerning or challenging. Such resources included her supervisors and the Human Research Ethics Committee. Such need did not arise beyond regular debriefing with supervisors about data collection and data collection methods. At all times the researcher was cognisant of the impact of interview questions (and, potentially, participant observation) on people from culturally and linguistically diverse backgrounds and people with mental health issues, with the latter group assumed to be overrepresented

among soup kitchen attendees; an assumption certainly found to be the case in this study.

5.4.2. Limitations

The largest limitation to data collection in the field research was the issue of consent; both from services and from individuals. Obtaining consent from services, as noted above, often involved negotiating the internal processes of the organisations. Meeting their criteria for participation in research was a significant limitation, with impacts on the number of soup kitchens that could be studied and therefore the number of staff/volunteers and service users who could be interviewed or observed. The willingness of organisations to allow and facilitate field research meant that the researcher was restricted to those organisations willing to help. Moreover, as the research was designed with participant observation as a key methodology, finding organisations willing to allow this and to help promote the research to participants was crucial.

It is important to mention here that qualitative data collection has its limits. The data collected for this study was from a small number of services and people in a limited geographical area, making generalising about experience or organisations difficult. This is a recognised limitation around qualitative research (Travers, M 2012). With Adelaide being a relatively small city, there is also a limit to what can be extrapolated here and applied to larger cities (Sydney or Melbourne, for example). Additionally, data collected was not longitudinal, but point-in-time, and therefore can only

describe what has already passed. Observation of soup kitchen services over an evening, or a week, or even several weeks, provides only a snapshot of an organisation that has evolved over years or even decades. A full history and understanding of the services cannot be gleaned so quickly.

The interviews undertaken for this study also captured the thoughts and experiences of participants at a particular point in their lives (and in time). Denscombe (2010) and Sarantakos (1998) note that in conducting interviews it can be difficult to establish objectivity, and consistency of narrative or belief. All data collected must be considered in the context of its time and place, and, arguably, as a basis for further study and broader application.

5.5. Conclusion

This chapter sets down the foundation for the discussion and analysis of the data of the field component of this research. It identifies the techniques used in selecting the relevant services and study participants. Not all services or people approached agreed to be part of the study. In all, four services were observed and examined in detail, with 34 interviews conducted with staff, volunteers and service users. The data collected from the field observations and interviews are presented in the following two chapters. The first of these chapters (chapter six) presents research findings for coordinators, staff and volunteers of the services. It outlines the organisational structures of the soup kitchens, along with the attributes and attitudes of the service

providers. Chapter seven focusses on the service users, specifically their circumstances and their engagement with the services. The final chapter of the thesis brings together these data with the literature, exploring the learnings about soup kitchens and implications of the study (and the literature) for soup kitchens as a charitable service in a neoliberal political environment.

Chapter 6

Inside the modern soup kitchen

6.1. Introduction

Since the introduction of services providing soup in exchange for work in famine-torn Ireland, and even beyond the breadlines of 1980s America, soup kitchens have adapted and evolved in their form, function and prevalence. Such adaptation has in part been caused and facilitated by the rollback of the welfare state (Berg 2008; Poppendieck 1998). The 21st century soup kitchen is more complex, multi-dimensional and expansive than its predecessors. Nutrition and social interaction have become key foci in the running of soup kitchens (Dachner et al. 2009; Wicks, Trevena & Quine 2006). Within services there has also emerged a focus on linking users to a broader range of services (DiFazio 2006; Nwakeze et al. 2003). Soup kitchens, however, still occupy a unique place within charity and welfare, with academics noting that they are marginalised services, even within the homelessness sector (Johnsen, Cloke & May 2005). The modern soup kitchen, then, is both consistent with, and yet different from, traditional support services.

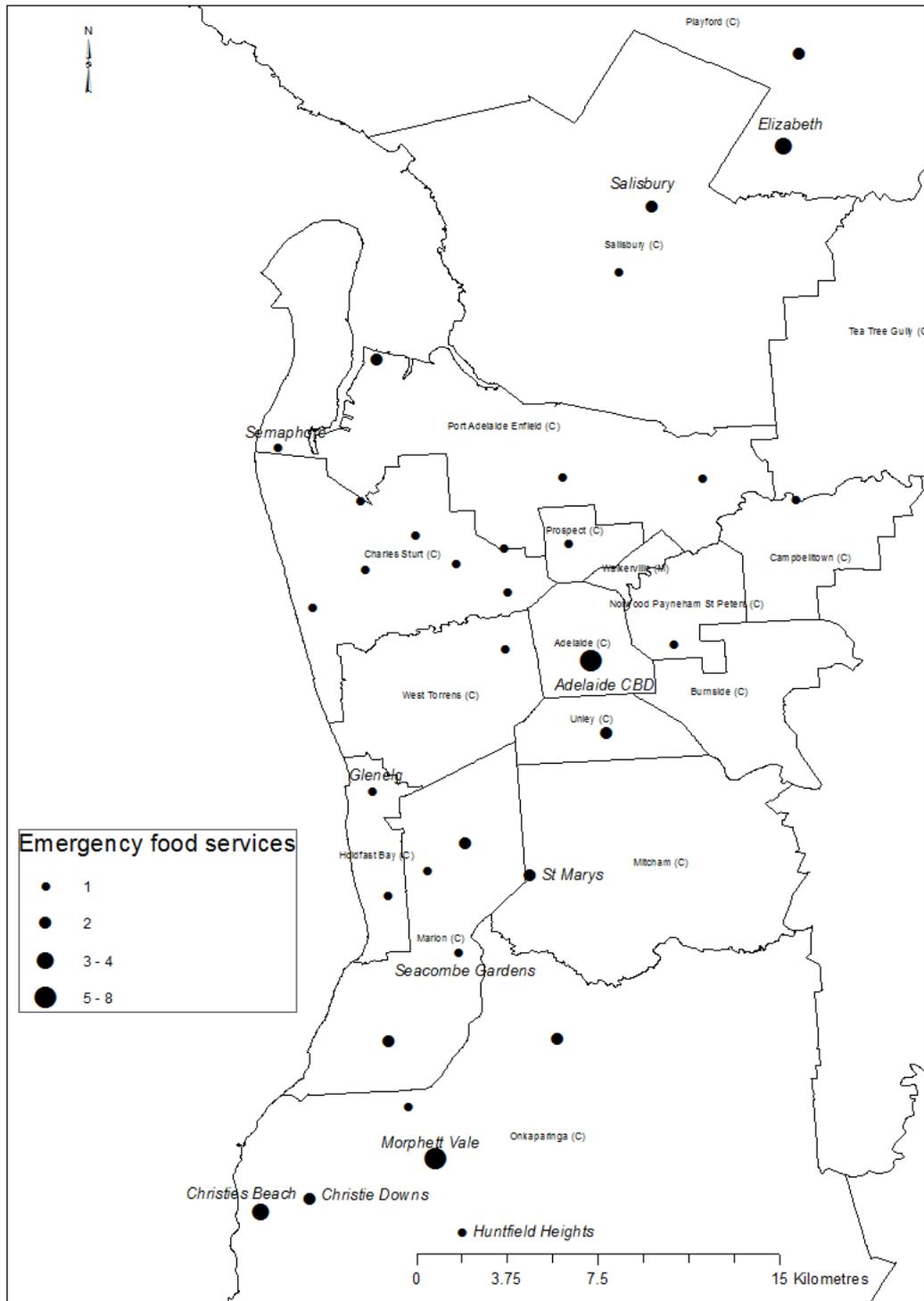
This chapter unpacks the first tranche of data from the field research. It examines the scope of soup kitchen provision in Adelaide, and explores the four key services observed for the dissertation. It looks at the mechanics of soup kitchens, the key themes that unite or distinguish the services from one another, and explores the experiences of the coordinators, staff and volunteers. The discussion brings together the theoretical issues of welfare

and charity through the lens of soup kitchens. This chapter leads into chapter seven, which explores the use of soup kitchens by people experiencing multiple disadvantage.

6.2. *Emergency food services and soup kitchens in Adelaide*

In 2011, the author identified 80 different emergency food services in South Australia through the SA Community website and further online and offline research. The purpose of this search was to find relevant organisations for the field research, as well as to establish the distribution of emergency food services. The services identified in this process included soup kitchens, food hampers, community cafés and unspecified charitable food provision. These services can be broadly considered as emergency or low-cost food services, with community cafés providing cheap food menus, primarily aimed at older people and those on fixed incomes. Information on the nature of services was scarce, making identifying their scope and coverage difficult. Organisations were charitable in nature, and run by either churches (generally Christian) or community groups. Some regional services were identified, but because of the focus of this research on metropolitan Adelaide only, they were omitted from the data underpinning this study. A total of 64 metropolitan services (some working in conjunction) was identified. This decision was made due to the difficulties around travelling to regional locations and sourcing accurate information about the nature and scope of such services. Figure 6.1 shows the distribution of *emergency food services* in Adelaide and surrounding suburbs.

Figure 6.1: Distribution of emergency food services by local government area (LGA), metropolitan Adelaide, May 2011*



Source: Community websites and verbally communicated information. Figure by J. Law.

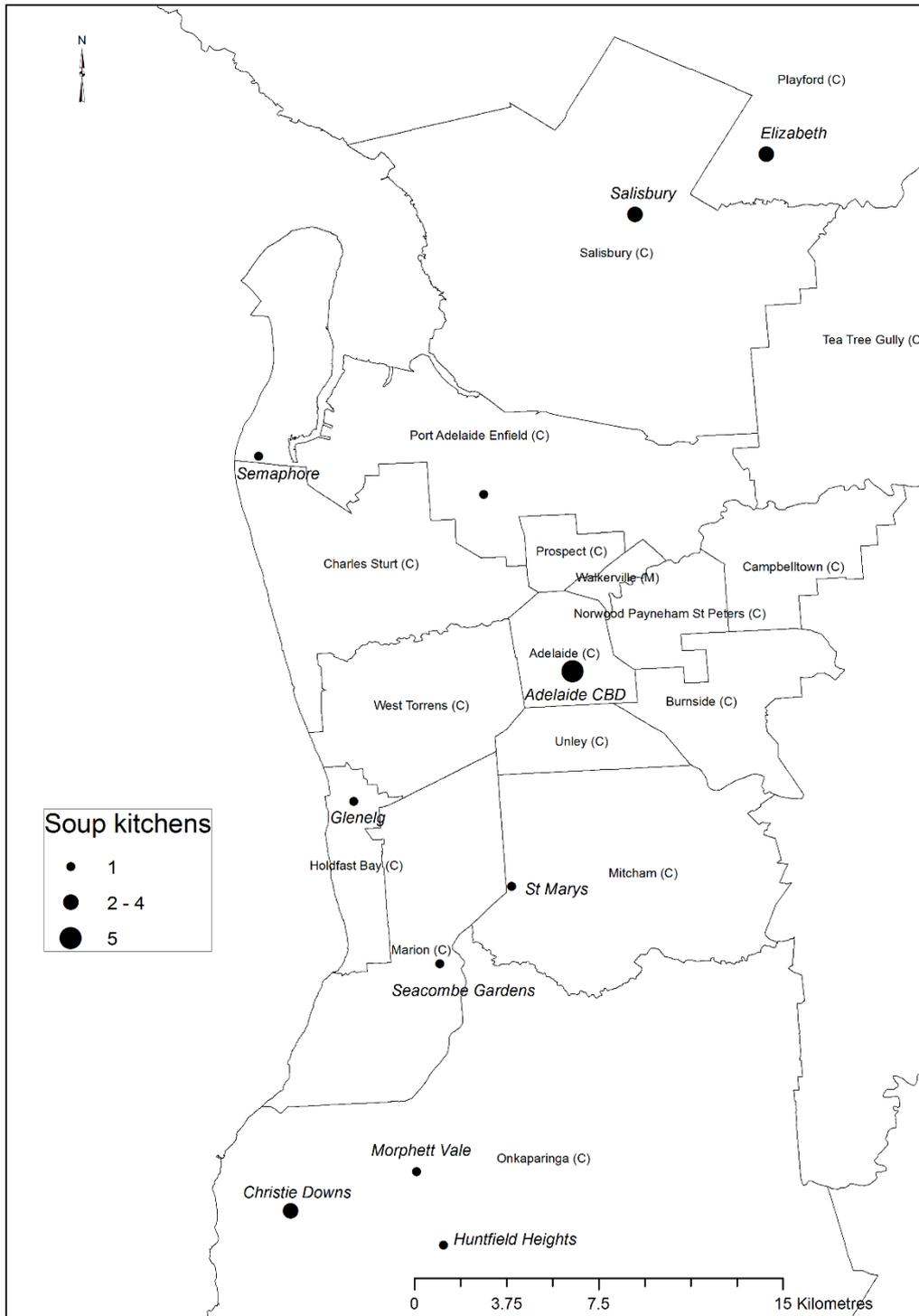
Note: Key suburbs indicated.

*Data includes some instances where there is more than one parent organisation involved in the delivery of emergency food assistance.

Mapping emergency food services revealed that (as at May 2011) there was a concentration of services in the CBD, as well as the outer southern and northern suburban areas. Such concentration in the outer areas is in many ways unsurprising, given these are recognised areas of socio-economic disadvantage, particularly the City of Onkaparinga in the south (with services concentrated around Christies Beach, Christie Downs and Morphett Vale), and the Cities of Salisbury (Salisbury) and Playford (Elizabeth) in the north (see Figure 6.1). The concentration of services in the CBD is also logical, reflecting two factors: first, as a central area, access to organisations and service users is likely to be easier and more convenient; and second, with larger and more established organisations in the city, it may simply be that information about them is easier to obtain.

Soup kitchens are often more difficult to locate than other services, with many choosing to retain low profiles (Johnsen, Cloke & May 2005). Some organisations may not self-identify as soup kitchens, and may lack a formal structure or may operate on an irregular basis. There is no formal system for identifying soup kitchens (due to the definitional issues discussed in previous chapters), and no official statistics are kept about them. No guidelines exist to find them, nor are they represented by a governing body or peak organisation. Soup kitchens were therefore categorised according to the criteria discussed in chapter four. Figure 6.2 shows the distribution of identified *soup kitchens* in the CBD and surrounding suburbs.

Figure 6.2: Distribution of soup kitchens by local government area (LGA), metropolitan Adelaide, May 2011



Source: Community websites and verbally communicated information. Figure by J. Law.

Note: Suburb of soup kitchen site named.

The highest concentration of soup kitchens recorded was in the CBD (five, as identified in Figure 6.2). Like other food services, soup kitchens were generally larger and more corporatised in the CBD. There were also clusters in lower socio-economic areas, particularly Salisbury and Playford. It is notable that the spread of soup kitchens is quite different from emergency food services generally. Soup kitchens often targeted people experiencing homelessness, and it can be argued that there is a greater concentration – or at least, greater visibility – of people experiencing homelessness in the CBD than in the suburbs.

6.3. The soup kitchens studied

Four services were observed for this dissertation. Two were located in the CBD and two in suburban locations – one in a beachside area in the western suburbs, the other in the inner south-western suburbs, near a major shopping centre (see Table 5.1). Two of the services were fixed soup kitchens, preparing and serving their food in one location, the other two were mobile soup runs. One of the operations ran morning and afternoon six days a week, while the other three services ran several evenings a week. All of the services were run, directly or indirectly, by a church of Christian denomination.

6.3.1. Service one

Service one was a fixed soup kitchen – referred to as a meal centre or ‘bistro’ by staff and volunteers – located in the CBD and housed in one of three buildings owned by the overseeing organisation. The first building held

administration offices, while the other two contained the meal centre and adjoining day centre. Both buildings were behind aluminium fencing with a lockable gate. A patio area led to a small second-hand clothing shop and then into the main day centre building. The first room of the day centre was an open-plan area with several tables with chairs, a table with coffee and tea-making facilities as well as a water cooler and disposable cups, and an area with couches, bookshelves (with books) and a wall-mounted television. Directly in front of the main entrance was an enclosed reception desk where attendees could talk to staff, seek information, buy tickets for the meal centre (service one charged a nominal fee for their meals, as discussed below), and access various other services. Some frequent attendees had medication or mail stored securely behind the reception desk.

The day centre had a front room with computers and art supplies, where attendees could take free art or computer lessons, or use the internet. Offices and private rooms in the day centre were available for appointments with Centrelink and Housing SA officers and various medical practitioners. Toilet and shower facilities were available for both sexes, with toiletries available on request. Behind the day centre was a small courtyard area with tables and chairs. One volunteer explained: 'if you take a look at the courtyard out there, all the old tables [the attendees have] done mosaics on top of the tables' (informant two). The mosaics were created as part of the art classes undertaken in the day centre. A small building off the courtyard contained a washer and dryer for attendees to use. The outdoor area ran

around the side of the day centre, between the day centre and meal centre buildings. Table 6.1 shows the basic information about the service.

Table 6.1: Key characteristics of service one

Location	Adelaide CBD
Hours of operation	Monday-Friday, breakfast and lunch/Sunday and public holidays breakfast and takeaway lunch
Soup kitchen type	Fixed soup kitchen
Price of meal	\$2 lunch, minimum 20c donation for breakfast
Capacity (attendees)	80
Volunteers/staff per shift (approx.)	6-8
Volunteers/staff total (approx.)	40
Food served	Hot meals, including dessert
Overseeing organisation	Catholic denomination church historically/service one is now part of an independent charitable organisation
Other amenities	Adjoining day centre with showers, laundry facilities, clothes shop, classes and medical and financial aid
Food sourced	Foodbank, direct purchase, private donation, corporate donation
Income sourced	Corporate sponsorship, philanthropy, private donations

The meal centre was a single large unattached building, located between the day centre and the administration offices. The building was open-plan but divided roughly into thirds. The first area, closest to the front entrance, was a waiting area. This area contained a small row of chairs against one wall, and a table that, during meal times, held various food items for

attendees to take away. Food provided ranged from fresh fruit to canned goods (soups and vegetables) and packets (rice, pasta, and biscuits). Attendees were allowed to take one or two items from the table. The front door was controlled by a volunteer who took the meal centre tickets, regulated the entrance and watched the food table.

The second area, the dining room, was separated from the waiting area by a large curtain which was opened when meals were ready to be served. The dining area contained between eight and ten round tables, each seating four to five people. Each table was provided with cutlery and bread. Attendees were served food and drinks at their tables. At the back of the building was a large industrial kitchen, separated from the dining area by a bench and a large food warmer. The kitchen contained steel benches, two large sinks and a dishwasher, as well as a large cold storage area and a large pantry. A back entrance was located in the kitchen. A maximum of ten people worked in the kitchen during meal times.

Service one's operations were overseen by a head cook, who was employed on a full-time basis to run the soup kitchen. It was her job to coordinate and oversee food donation and purchase (as the service bought a small amount of fresh food, rather than relying solely on donations), as well as the daily roles of the volunteers. The rest of the team consisted of volunteers, who acted according to the instructions of the head cook.

Breakfast and lunch were served on the premises from Monday to Friday, with breakfast on Sunday mornings and a take away lunch. No meals were served on Saturdays. Breakfasts required a minimum donation of 20c, while lunches were provided for \$2. Tickets were purchased at the reception area, and were passed to the volunteer at the door of the meal centre for access. Negotiation was possible for those unable to pay. One volunteer explained that attendees could 'deliver brochures, or they do the cleaning up, then they don't have to pay for their meal' (informant two). Regular attendees receiving a wage or benefits were able to pay in advance, paying \$20 every two weeks to cover lunches over that period. The amount charged was nominal; the rationale for charging was more to encourage personal responsibility than with covering the costs of feeding service users:

You're doing the clients no favour if you just keep giving [to] them... the bottom line is, if they don't have money, they'll still get lunch, so it's about chipping away at educating them that, you know, in some small way they have to take responsibility for themselves... (informant seven).

While the fee could be waived in certain circumstances, one volunteer observed '... most people don't want to have it waived, most people actually wanna do it' (informant one). There was a feeling among volunteers that charging a nominal fee for meals was good for attendees: 'it's not charity. It makes them feel proud to actually, like, be able to buy something and get something for that money' (informant one).

Attendees were served at their tables by volunteers. Meals consisted of meat (cold or hot, depending on the weather) with vegetables, bread, and a fruit-based dessert. On busy days two sittings were conducted, with attendees encouraged to simply 'eat and go'. On slower days attendees were able to sit at the tables and talk for longer. Food was sourced through Foodbank, with some goods purchased privately and from donations to the service made by individuals as well as through businesses.

Attendees were in large measure older men, either sleeping rough or living in boarding houses in the city. Many attended the soup kitchen and day centre on a regular or semi-regular basis, with some getting their food almost exclusively from the service, or a variety of soup kitchens/runs. Despite its proximity to areas where Indigenous people sleeping rough were known to congregate, there were few Indigenous people at the service. Families were observed visiting very occasionally. There were many who attended the soup kitchen but did not stay in the day centre afterwards.

6.3.2. Service two

Service two was a mobile soup run, with its temporary service area located in the CBD, and its preparation area in a nearby suburb. The service was overseen by a Catholic charity organisation, and was one of several similar mobile runs that operated in various suburbs throughout Adelaide. The services were not directly linked, but were operated independently under the auspices of the charity. All of the soup runs operated in similar ways.

The service operated four nights a week – Tuesday to Thursday evenings and Sunday – serving at the same location (see Table 6.2). Other unaffiliated mobile soup runs offered a service at the same place on different evenings. The service area was a small side-street in the city, with a garden and seating area (with benches). No serving tables or other equipment remained in the area permanently; each soup run provided temporary serving tables. The preparation area for service two was located in an industrial kitchen in a suburb just outside the CBD. The building included a kitchen, a garage (which stored the van used by the service), as well as a second-hand shop run by the overseeing organisation. The kitchen was used exclusively for the soup run. Table 6.2 provides the key elements of service two.

As service two was one of several soup runs overseen by a larger parent organisation, much of the coordination activity for the service appeared to occur at a higher operational level. The volunteers in attendance on the observation evening had set tasks such as food preparation, or picking up donated food, but did not coordinate the rosters or liaise with businesses for donations. Due to problems with coordinating interviews with volunteers and the short observation time, it was difficult to ascertain if any of the volunteers took on coordination roles within the service. A key contact within the parent organisation served as the point of contact for public enquiries about the service (and its six sister mobile runs across Adelaide), as well as having some involvement in ensuring sufficient volunteers staffed the service on any given night and volunteers were safe and undertook their required

training. Overseeing the operation of the mobile soup runs was part of the remit of this person's broader portfolio of tasks.

Table 6.2: Key characteristics of service two

Location	Adelaide CBD (service)/eastern suburbs (preparation)
Hours of operation	Tuesday-Thursday from 7pm/Sunday from 6pm
Soup kitchen type	Mobile soup run
Price of meal	No charge
Capacity (attendees)	Outdoors, but 40-50 attending
Volunteers/staff per shift (approx.)	6-10
Volunteers/staff total (approx.)	150
Food served	Sausages, pies, sausage rolls, sandwiches, cakes, assorted donated goods
Overseeing organisation	Catholic denomination/major charity
Other amenities	Blankets and knitted hats/scarves given out on request/occasional attending paramedics
Food sourced	Donations from businesses and individuals
Income sourced	Donation, through overseeing organisation

On service evenings, volunteers met at the kitchen to prepare food approximately one hour before service time. Most evenings six to ten volunteers or staff attended to prepare and serve food, working on monthly rotating shifts. Meals consisted of: barbecue goods such as sausages; warmed pies, pasties and sausage rolls; cakes; and 'lunch packs' with sandwiches, yoghurts, drinks and other donated items. The hot food was

prepared in the kitchen and placed in mobile food warmers for transit to the soup run site. Volunteers put together the lunch packs. The packs, hot food, bread (for the sausages), cakes and other items were stored in the van, along with tea and coffee facilities (including an urn) and red cordial (that the volunteers referred to as 'punch'), as well as the folding tables. Several volunteers rode in the van to the serving site, while others followed in their own vehicles.

Attendees lined up at the service area before the volunteers arrived, aware of where and when they would be served. Attendees appeared to be rough sleepers, many carrying large bags of possessions. Most attendees were male, although a few women also attended (including some with children). A large proportion of the attendees were Indigenous. Police attended the scene to observe and keep the peace, and on several occasions paramedics were on site to check attendees for health problems. Volunteers and staff handed out donated blankets, hand-knitted scarves and beanies upon request. Volunteers served food, including condiments, and drinks. Attendees were not able to handle any of the food, including condiments, themselves. Attendees received a sausage with bread or warmed baked good, along with a lunch pack. Most attendees ate nearby, sitting on benches or low fences. Those who knew each other grouped together. Volunteers and staff knew the names of regulars and engaged them in brief conversation.

When available, second helpings of food were provided to attendees, particularly take away foods, such as the lunch packs. It took around 45

minutes for all attendees to be served and for volunteers to begin packing up. Perishables such as leftover loaves of bread and the milk used for coffee and tea were given away to attendees. The van was re-packed and goods taken for cleaning and storage in the kitchen.

Safety was a primary concern for service two, particularly given the open area in which they served. The area was not well lit and volunteers were reminded to stay close and visible to one another at all times. There was a standard procedure in the event of a violent incident. Attendees were not charged for food, and goods were sourced through regular donations from a local bakery, as well as through private arrangements with several supermarkets. Volunteers used whatever food was available to them on any given evening.

The van used by the service had been donated to them, and was painted with the service's logo. Monetary donations allowed for upkeep and petrol. The kitchen was owned by the overseeing charity, so was not included in the costs for the soup kitchen itself.

6.3.3. Service three

Service three was a small mobile soup run operating in the inner south-western suburbs, serving from a carpark of a church/hall across from a major shopping centre. The soup run was operated by a group of three churches: church A was located in the inner south-western suburbs, and provided volunteers and funding for the service; church B was a south-

eastern suburbs church that oversaw the soup kitchen, provided volunteers and funding, and also provided the kitchen in which food was prepared; and church C provided the venue for the service, a less direct involvement than the other two churches. The service was funded exclusively through donations:

It's all self-funded by the church – the three churches fund it.

So we don't rely on any government hand-outs or anything like that, or any other agencies... (informant ten).

The activities of service three were primarily coordinated by two people – the initial creator of the service, who attended church A, and an administrative person who was employed by church B (partially to oversee service three, but also in another capacity). The coordinators organised volunteer rosters and food donation. Separately they recruited further volunteers and spearheaded new avenues of support for attendees, as is discussed further in this chapter. A minister employed by church A also frequently assisted with the service. He was present during food service, both serving food and providing counsel to attendees. Other volunteers with the service undertook assigned tasks such as preparing and serving food.

The soup run ran on Tuesday and Sunday evenings, with preparation of food from around 5:45pm, and service from 7pm to approximately 7:30pm (Table 6.3). Food preparation was timed to fit with the availability of volunteers directly after work hours. The service previously ran Thursday evening sessions as well, but this was cancelled due to a lack of available

volunteers: ‘Unfortunately [the Thursday night] team sort of dropped off a bit, and they amalgamated with [the Sunday night team]... We are trying to get Thursday back up now’ (informant ten). Table 6.3 provides a brief overview of service three.

Table 6.3: Key characteristics of service three

Location	Inner south-western suburbs church carpark
Hours of operation	Sundays and Tuesdays, 7-7:30pm
Soup kitchen type	Mobile soup run
Price of meal	No charge
Capacity (attendees)	Outdoor, so no capacity issues – between 10-30 attendees depending on weather
Volunteers/staff per shift (approx.)	6-8
Volunteers/staff total (approx.)	45-50
Food served	Barbecue meats, sandwiches, drinks, cakes
Overseeing organisation	Three Christian churches
Other amenities	Toiletry packs, sleeping packs for rough sleepers
Food sourced	Direct purchase by soup kitchen, ongoing bakery donations
Income sourced	Donations by attendees of the three churches, potential pending corporate donations

Volunteers met at an industrial kitchen on Tuesday evenings in church B, which was also used for a church café. The volunteers worked on an eight-week roster, and were generally people in full-time employment. Meals consisted of sausages or hamburgers, or other cooked meat, as well as

sandwiches (generally with salad in them), prepared by the volunteers that evening. The coordinator of the service explained she had previously been concerned about the nutritional content of the food, and had experimented with providing more nutritious food, including soup she made herself – however this was not popular amongst attendees, which she attributed to an aversion to vegetables.

Food for service three was prepared and stored in warmers and on trays, and packed into a van for transport to the serving site. At the time of the field research, there were plans to source a new van through a local real estate agency affiliated with church A – with the real estate agency interested in providing money, goods, and volunteers to the soup run for another evening of service.

Several months before this research was undertaken the soup run temporarily moved their service area to the indoor café area of church B, to provide warmth and shelter for attendees. However, this move resulted in a significant drop in attendance. The venue was shifted back to the original food service area, with a slow but steady increase of attendees to previous levels. This original service location contained not only a church but a hall with a playgroup, a second-hand shop, a small playground and during the week provided various emergency and low-income services. At the time of the field research, attendance figures had not reached the previous stated levels. Limited attendance at the service clearly contributed to its informal nature, as well as the large amount of food taken to site:

The biggest number [of attendees] I've ever seen would have been about 25 at [the service]. We cater for probably closer to 50-60 people... possibly more (informant nine).

The service area contained no chairs or natural places to sit, except for a small wooden fence. Attendees ate standing up and took surplus food away with them. Volunteers and staff led in saying Grace before serving food. Volunteers, staff and the attending religious minister engaged in casual conversation with attendees, and knew regulars by name. The minister in particular counselled attendees upon request. No other services were provided with the food, but volunteers and staff kept a list of support services for attendees who identified or were identified as needing help.

Service three was in an expansion phase, with the volunteers and staff considering ways to secure more funding, attendees and volunteers. Safety was a priority for staff and volunteers, and staff worked hard to ensure that any conflicts were managed carefully.

Attendees at the service tended to be quite young, with several parents of young children and single-parent families. There were several older regulars also, and some rough sleepers were known to attend semi-regularly. Generally, however, attendees were local people from nearby social housing. One volunteer explained how local need had been identified:

I'd spoken to [the pastor of the church C] – he's said there was a fairly big need in the area. Now, I didn't know that. It

wasn't until I did the letter drop that I quickly understood what he meant. There are areas there that most of us wouldn't even know existed... that are in real strife. I take it they're Housing Trust type estates, but they're just really in bad condition, two and three storey buildings everywhere... clearly a need, people not managing well and so on (informant ten).

Although small, service three was looking to expand, and also to explore new initiatives to improve the well-being of attendees and others in their service area.

6.3.4. Service four

Service four was a fixed soup kitchen operating one night a week from inside a church hall in a major beachside suburb (Table 6.4). The service was established in the early 2000s and operated one evening a week on Tuesdays. The serving area was a multi-use hall that contained a café (with kitchen) and a second-hand shop. At the time of the field research, the coordinators were considering remodelling the kitchen into an industrial kitchen. Around 20 tables were set up in the café, used for both the café and the soup kitchen, and packed away when not in use. The tables took up almost half the hall, with the rest partitioned off from the service area during the evening. The service area included an outdoor space between the hall and the church, with access through the church or external access through a gate. During the hours of operation, access to the soup kitchen

was restricted for attendees to enter through the gate only, and a male volunteer or staff member staffed the gate at all times. Table 6.4 provides the key information for service four.

Table 6.4: Key characteristics of service four

Location	Beachside suburb
Hours of operation	Tuesdays 5:30pm-7:30pm
Soup kitchen type	Fixed
Price of meal	No charge
Capacity (attendees)	30-40
Volunteers/staff per shift (approx.)	6-8 (minimum 5)
Volunteers/staff total (approx.)	60-70
Food served	Soup, fruit salad, once a month Nando's chicken (donated by local store), other hot main meals regularly provided
Overseeing organisation	Uniting Church
Other amenities	Linked emergency aid services
Food sourced	Local businesses, home-cooked soup from volunteers, staff and associated community groups, SecondBite
Income sourced	Overseeing church, private donation

Service four was overseen by a head coordinator, who watched over the services and its activities, and managed logistics. She liaised with the overseeing church on behalf of the service, as well as coordinating food and volunteers. She was assisted by a long-term volunteer who managed work safety and hygiene issues and aided in the coordination of volunteer roles. A minister employed by the overseeing church attended every service

evening to provide counsel to attendees, but did not take on a coordinating role in the operation of the soup kitchen.

Concerns around hygiene and nutrition contributed significantly to the way in which service four was run. Food safety was a priority, with food handling instruction provided for volunteers and staff, and rules around how food was given to attendees strictly imposed. In particular, (for example) attendees getting second helpings of soup were always given a clean bowl.

Volunteers began preparing food around 5pm on service nights, with between six and eight volunteers and staff undertaking various tasks. Two male staff or volunteers had to be present for the service to open, one of whom would guard the front entrance. Attendees who were violent, threatening, or appeared to be under the influence of alcohol or other drugs were refused entry and were provided with a take-away food pack. Also in attendance was one of the church ministers, whose role was to oversee the church's outreach services. His role in the kitchen was to talk to attendees and provide advice and counsel. As well as being a minister, he had a background in psychology. Meals were served inside, with attendees lining up to get soup before sitting at the tables. Previously attendees were allowed to eat at tables in the outdoor area, but this practice was later prohibited due to past safety issues. On evenings with fewer attendees, people stayed behind to talk; on busier nights people would eat and leave quickly. The service was usually concluded by 7pm.

Attendees were generally insecurely housed, with many living in local boarding houses. Some of the attendees were rough sleepers, with others living in low-income housing. There were more men than women attending, with many socially isolated older people attending for the social aspect of soup kitchens as well as for the food. Also in attendance were some young families. A number of long-term attendees and semi-regulars frequented the service. Many of the attendees were known to the staff and volunteers by name.

6.4. Organisational elements

Although each soup kitchen possessed its own unique methods of operation, broad themes of concern related to each organisation could be extrapolated from the data about services and from the observations and experiences of their staff (paid and unpaid). These themes are considered below. Religion is important as all the services had religious (Christian) roots. Social interaction between staff, volunteers and the soup kitchen attendees formed an important part of soup kitchen activities. The provision of further services beyond pre-prepared food is also discussed. The formality of the services is considered, as well as safety, particularly in relation to violence. Nutrition, food safety and hygiene are also highlighted as issues. Finally, community involvement beyond the soup kitchen is explored, with a review of the engagement between services and businesses, community groups and individuals. Together these themes create a broader picture of how the soup kitchens operate, why they operate, their goals, and how they measure their success.

6.4.1. Religion

Religion played a dual role in the life of the soup kitchens studied. For some staff and volunteers, it was the *raison d'être* of the soup kitchen or their involvement in it, while others were uncomfortable with engaging clients on spiritual matters. At an operational level, church 'ownership' of the soup kitchens provided important financial support, but was also a source of conflict for some services. All services observed for this research were overseen by organisations of Christian denomination. Even where religion was not openly preached, Christianity clearly informed the goals and behaviours of the soup kitchens studied. The importance of religion in the establishment and philosophy of the soup kitchens was reasonably uncontroversial – however, opinions differed markedly on the presentation of Christianity to soup kitchen attendees.

Services one and two were the most corporate of the four services studied, and both had strong religious roots from Catholic denominations. At service one nuns and monks (from their order) volunteered within the soup kitchen and adjoining day centre. Neither service one or two, however, was overtly religious in their operation, with neither saying Grace before meals. During the period of observation of service one, a small informal religious service was performed in the day centre in honour of a regular attendee who had recently passed away, but the service itself contained no overt religious symbolism. Likewise, service two based its operations on a strong Catholic doctrine that employees and volunteers adhered to, but also did not impose religious practice upon attendees. By contrast, services three and four were

open about their religious heritage, conducted their services on (or around) religious sites and said Grace before meals were served.

Service three was established with a strong Christian ethos; a deliberate undertaking by the churches running the service, in response to the secular nature of a soup kitchen the service's coordinator was part of previously:

I did have an issue with the Christian aspects of what we were doing... I had expected the programme was an outreach of the Church. Turns out it wasn't. And so whilst it was doing good for the people there, some of the people who were volunteers didn't like the fact that I would say Grace before the meal, and so on – which the recipients love... that was a bit of a conflict, and, a new coordinator took over, who was quite secular... (informant ten).

This conflict over the place of religion in the soup kitchen led to the establishment of service three, as a more Christian soup run, although the coordinator did not see it as detracting from the key service provided:

We don't make it overly religious – we say Grace, we talk to people about hope, we give Christmas gifts, they might be Christian in nature... we haven't made it burdensome for people (informant ten).

The importance of the religious underpinnings of service three was contested within the service itself, even among the coordinators, with one

insisting that the service is 'not about pushing Christianity, because we don't do that' (informant sixteen). Others had a much stronger view of the importance of religion in the service:

It's the opportunity that relationship presents to present Christ to people. That's probably the underlying motive for the food – the food's just the mechanism to allow that to occur, with a group of people that have a need for food, but perhaps they have a greater need for Christ (informant nine).

There was a tension between the two main coordinators in relation to the role of religion in service three. This was borne out by the way they both spoke of how they engaged with the clientele about religion and spirituality, and the key purpose of the service itself.

A volunteer from service three noted that the response of attendees to the religious aspect of the service was not always positive. For a short period the service site was moved into another church, resulting in a significant drop in attendance. One staff member speculated that the move to inside a church was intimidating or otherwise unpalatable for potential attendees. They noted that their previous (and subsequent) service area had been outside another church, albeit one that also served as an emergency aid centre:

But the interesting thing is the [current food service area is] a church, but they don't perceive it as a church because they go there for their food, they go there for their clothing, they go

there for financial help, so it's not actually – they don't see it as a church (informant eleven).

This was also an issue for service four, and the coordinator of that service expressed concern that religion potentially kept people away:

It was hard to get people to come initially, because it was in a church – they felt that they were gonna have God rammed down their throat, or... I truly don't know what it was, but they found it very difficult to come through the door (informant seventeen).

Grace was also said before meals at service four, with mixed responses. When asked whether the clients responded well to saying Grace, the coordinator was diplomatic:

Half do, half don't. Half will talk through it. And we've only been doing it this year... we have always done it for the Christmas dinner, and [the minister] did it for the Christmas dinner for the first time, and we had a number come up and say they really liked [it]. It takes them back I think to their childhoods, where, you know, it goes back to that familiar, comforting thing... Most are relatively respectful. Relatively (informant seventeen).

It seemed that while some attendees were happy with Grace, and most were at least respectful, there was still an element of uncertainty as to

whether the religious aspect of the parent organisations worked against the services.

Service four also experienced other problems with their religious affiliation, often clashing with their overseeing church in relation to the characteristics of the people attending the soup kitchen. One of the main coordinators of the service indicated that the church was not always supportive of the soup kitchen:

As much as the church – while they were happy we were running the soup kitchen, there was a large percentage of the congregation who were uncomfortable about who our clients were. And that has been an absolute work in progress for us... (informant seventeen).

The service experienced several issues with the church over the use of non-parish volunteers, the nature of the clientele, and after several violent incidents, the safety of the soup kitchen. However, the appointment of a new minister, specifically in charge of outreach, helped to bridge the gap somewhat:

Some of them are [more accepting], and I think they're getting the feeling more as if they own it now, since we've had [the new minister] here, working as the part-time, as the 0.5 [Full-Time Equivalent] Deacon, who is in church with his family on Sunday. Also, we've gotten better at communicating... (informant fourteen).

Keeping communication channels open with the parish and church board was key to maintaining a good relationship, although interviewees acknowledged that acceptance of the service was an ongoing issue, particularly with some soup kitchen attendees beginning to attend church services. Service four also had difficulty with the church in relation to letting non-members of the church volunteer at the soup kitchen:

When we first started we were only able to have volunteers through our church. Now, church populations are inherently elderly, and a soup kitchen can be a confronting environment – so the two of them don't go together very well. So we had a couple to start with who were happy just to be in the kitchen, but, you know, they were heading into their 80s... So we've been asking the church for a number of years – you know, quite often we've had people approach us, asking us if they could volunteer, that they'd heard about it, and we had to say 'unless you're a member of the church, I'm sorry you can't'... It really annoyed me, because these were really good people... (informant seventeen).

For some volunteers, staff and coordinators, religion was the driving force behind the soup kitchens. For others, it was a source of concern and conflict, with some expressing the desire to move away from the service's Christian underpinnings. Even in the more corporate services Christianity, through the overseeing churches, played some part in influencing the ethos of the soup kitchens. Those soup kitchens with stronger connections to their

overseeing churches – services two and three – had an often turbulent relationship, with ongoing dialogue about the aims and ethos of the services.

6.4.2. Social interaction

Social interaction was identified as an important function of the soup kitchen environment. The sense of isolation felt by people experiencing poverty and homelessness, caused by a lack of community engagement, is well known (Baum & Palmer 2002; Clapham 2002). Poverty, homelessness and social isolation are often closely linked with one another (Clapham 2002; Neil & Fopp 1992). The international literature suggests soup kitchens provide a safe environment to allow for social interaction for marginalised people (Allahyari 2000; Glasser 1988). From discussions with volunteers and staff, it was clear that social interaction was seen to be an important part of the soup kitchen experience.

There were several ways in which interaction was important in the soup kitchens. The first was the notion of visibility – soup kitchens gave attendees a chance to interact with others, particularly for marginalised and ‘invisible’ people such as those sleeping rough. One of the key employees of service one felt strongly about the value of the soup kitchen and adjoining day centre as an outlet for marginalised people:

There's a great myth out there that day centres perpetuate homelessness. They don't. They give dignity to the homeless. They give them hope that they will get off the street. They give

them a point of contact for socialising. We're a safety net...
(informant seven).

This notion of visibility manifested strongly in the interaction between attendees and the staff and volunteers of the soup kitchens. For the volunteers, it was a way to demonstrate that they cared about those who attended, and to give them a sense of belonging:

If you look at the tables – we sit around tables, we serve them, and you hear a hum here, people are talking. You could simply drop off a case of food to a person, and they're in one room and they're not seeing anybody – some people don't see anybody, some people, like the clients, who I'll smile at, tap them on the shoulder; that person has had no-one smile at them or speak to them, could be all day, could be for a week. If they come here and we smile at them, and we tap them on the shoulder and say 'enjoy your meal', and they sit with other people at the table, that's the interaction... (informant two).

As discussed in chapter four, there is often significant stigma attached to the receipt of charity (Parker & Fopp 2004). Volunteers and staff recognised this and the social element – particularly between volunteer and attendee – and it was seen as one way of overcoming that stigma, of providing dignity to those using the soup kitchens.

For me it's not about the charity, it's about making a connection with people and actually, I guess, letting them know in an

indirect way that I think about that, and I think about their situation and I am concerned and I do care for them and I'm not being judgmental... (informant one).

Beyond simply providing food, volunteers saw soup kitchens as a place where attendees could find 'acceptance – somewhere to go, somewhere to feel safe, somewhere to belong' (informant two).

There were clear limits to this form of social interaction, however, with volunteers and staff acutely aware that they were in a professional, rather than personal, relationship with the attendees:

It's important to note that we don't take them out for coffee, we don't overstep the boundaries. But within these walls, though, it's important for them to have a smiling face, and to be greeted by their names... (informant two).

Interactions between staff/volunteers and attendees in the services observed were polite and professional, with staff and volunteers making an effort to learn the names of regular attendees, and to enquire about their lives. The religious ministers involved with services three and four provided deeper counsel to attendees upon request. In service four however, interaction between staff and attendees was quite minimal, with the majority of the interaction left to one or two key staff members. While there was certainly a welcoming atmosphere, clear boundaries were placed around

the interactions between staff and volunteers and those who attended the soup kitchens, possibly for safety reasons.

Another aspect of social interaction within the soup kitchens was between attendees. This is discussed further in the next chapter, but staff and volunteers were aware of the importance of this interaction:

One of the things we've noticed here... people have started joining tables together, so creating community within a community, which I think is something that's – it wouldn't necessarily happen in a drop-in centre perhaps... I think there's certainly something unique about soup kitchens (informant thirteen).

Particularly within the fixed soup kitchens, but to some extent also with the mobile ones, clients formed bonds with one another and, as observed above, began creating their own groups. This 'uniqueness' of soup kitchens seemed to stem from the bonding over meals, something that is not present, and arguably not possible, in other forms of emergency food service provision (Glasser 1988; Mulquin, Siaens & Wodon 2000).

Within the soup kitchens, volunteers and staff interacted with attendees, and attendees interacted with one another, even if only in a transitory or superficial way. The value of these connections has been disputed, with some scholars arguing that social connections within homeless and marginalised communities can have negative consequences in maintaining

destructive habits or lifestyles (Glasser 1988; Putnam 1995; Svendsen & Sorensen 2006). It was clear, however, that staff and volunteers believed social interaction was an important feature of the soup kitchens they worked in:

I think the social environment brings them a little bit too, it's not just the food – I think some of them do just come in for the food, and some of them it's about the social part of it (informant one).

Social interaction was central to the functioning of the four services observed, although much more so with the fixed kitchens. Interaction between attendees and staff/volunteers was a natural part of the soup kitchen system, although there was a clear delineation between the two groups. Notably, interaction among attendees was not forced.

6.4.3. Provision of additional assistance

For many of the volunteers and coordinators of the services studied, soup kitchens provided more than just food – they were an access point for attendees to receive further, often longer-term, assistance such as with housing, life skills or employment. As one volunteer explained, 'If you're completely down and out, where do you go? A place like this is a starting point, it might turn your life around...' (informant eight).

Provision of additional assistance for attendees was approached in different ways between the four services, with the soup runs – services two and three

– in particular providing information and referrals, rather than brokering or providing other assistance internally.

Service two gave out blankets and hand-made beanies to attendees upon request, particularly during the winter months. Front line emergency services were sometimes in attendance to check on the health and wellbeing of attendees. Staff and volunteers also had referral lists on hand for those requesting additional assistance. The overseeing organisation had strong links to other front line agencies and organisations providing longer-term assistance for people experiencing financial, housing or health issues. In a similar vein, service three provided referrals, but also other items for rough sleepers:

We make up little, um, I think [the coordinator] calls them 'blessings packs', but they're little packs that have got soap and toothpaste and things like that, that might just help people out (informant eleven).

At the time of the field study they were also beginning to provide Street Swags:⁵

I found out about this group in Queensland... they're actually manufactured by [homeless] shelter workshops and places like that... the whole thing comes together pretty well, because

⁵ Street Swags is a not-for-profit organisation that provides portable bedding for people sleeping rough (Street Swags 2016).

they're made by people who are struggling a bit for people who are struggling a bit (informant eleven).

Such items were specifically targeted at attendees suspected or known to be sleeping rough. Discussions with interviewees around these initiatives were more often than not accompanied by a desire on the part of soup kitchen coordinators and staff (and some volunteers) to do more than just provide people with food and recognition that providing food was only a partial solution to what they understood to be complex underlying issues. It was clear that volunteers, paid staff and coordinators knew the limits of soup kitchens as a charitable endeavour.

The church overseeing service four provided other emergency assistance under its outreach banner, including food parcels and financial aid. The church's half-time minister oversaw the charitable arm of the organisation, including the soup kitchen and

[The minister] is more involved with... the umbrella [organisation] that oversees [service four], my community aid, open church – we have volunteers there – café, [seniors college]. We don't run the op shop, but he has links in with the op shop as well. So he does a lot of the outreach... (informant seventeen).

Service one was housed within a day centre that similarly offered a variety of outreach services, including assistance with housing, financial aid,

educational support and basic showering and laundry facilities. Additional assistance measures provided by this service were the most elaborate and numerous of all the kitchens studied, but were still deemed outside the remit of the soup kitchen service itself. They were funded and run separately by the overseeing organisation. The importance of long-term aid for attendees was highlighted by the staff, who saw the soup kitchen as a starting point for the provision of a range of assistance measures. One staff member traced the evolution of the ancillary support provided through the service's adjoining day centre:

We think that we're doing the job that we're here to do – we're getting people into housing. And, um, we were doing that before, but we didn't have the back-up support, we didn't have outreach services, we didn't go out and see how they were coping in their housing. So that's where our success story comes from, and keeping people in housing... I am very proud about, when I say I've been here nineteen years – the huge steps [the service has] taken, you know, from seven staff to nearly 40, to the services we've put in place, to the things we do here... in our education, our training programme, that was a big leap... (informant seven).

The soup kitchen was the initial service provided by service one, with other broader assistance measures and programmes added over time.

Additional services varied between the soup kitchens studied, but formal services were always kept separate from the kitchens themselves. Distribution of other goods was seen with the soup runs, but the fixed kitchens were more closely aligned with a range of other long-term outreach services. The larger and more corporate services were able to provide more additional aid outside the soup kitchen environment.

6.4.4. Formality and clientele

The soup kitchens studied were characterised by a lack of overt bureaucracy and red tape, as well as the lack of criteria for attendees to receive help. With the exception of service one, which charged a nominal fee, the soup kitchens provided their food for free. The receipt of food did not require identification or proof of need at any of the soup kitchens, and there was a lack of concern about whether or not the attendees were in genuine need. No distinction was made as to whether people were 'deserving' of food or not.

Service one was the most formal of the services in terms of information gathering, although this was done through the adjoining day centre and not the service itself. The overseeing organisation collected information about attendees for the purposes of aiding in linking individuals to assistance as required. Records were not kept about the soup kitchen. Service volunteers and staff made an effort to gather information on the attendees in order to engage with them about their lives. Regular and semi-regular attendees were often given birthday presents, and volunteers and staff learnt trivia

about attendees' personal interests, such as their favourite football team. These actions were considered important in building trust with attendees and boosting their feelings of self-worth and belonging.

The other soup kitchens did not take the names of attendees – again, though, some volunteers and staff knew their regular attendees. The outreach minister for service four engaged with those who attended the soup kitchen, learning names and information in order to connect with them, and in some cases to link them with other emergency or longer-term aid. Service three had a similar system, with ministers who regularly attended and talked to attendees. Volunteers in service two knew some of the regular and semi-regular attendees, although discussions with them were limited, and largely occurred while food was being served, with attendees consuming the food nearby, either alone or with other attendees.

Volunteers and staff were generally unconcerned about the backgrounds of attendees. While soup kitchens targeted people who were sleeping rough or in insecure housing, staff and coordinators understood and acknowledged that other people outside these categories also attended. Volunteers of service two noted that international students occasionally attended the service looking for food, as well as people who did not appear to be in critical need. Given that no records were kept, and no questions were asked of attendees about need, it was accepted this could not be controlled. Likewise, service one reported that backpackers often attended for meals – especially during Adelaide's festival season. There was an

acceptance among volunteers and staff of all four services that, due to the nature of soup kitchens, there were people who did not fit their target population. The coordinator of service four explained that one evening she was accompanied by a man interested in volunteering in a soup kitchen, leading her to explain to him the open nature of the service:

This guy who shadowed me wanted to know how we knew they were homeless, and I said 'actually that doesn't matter if they're homeless'. We have backpackers come in sometimes. I said, 'it doesn't matter, we serve whoever walks through the door'... For whatever reason that they come in, I don't mind. And he couldn't get that (informant seventeen).

Other staff acknowledged that some attendees were not those targeted, but again did not find this problematic:

You know that you've got people just rocking up to get a free feed, because they happen to know... where these things are. I figure if they want to rock up that's cool, I don't have a problem feeding anyone that sort of wants to come along (informant nine).

One staff member commented that soup kitchens were, to an extent, self-selecting, and about more than just food. She related an anecdote from someone who asked why people who were not homeless attended soup kitchens:

So I said to him look, you know If I was walking down [the road], and I was hungry... and went 'I'm starving, what is there to eat?' and I can have a bowl of soup for free here... or I can go over the road and have a pizza and a glass of red wine, you know what? I'd probably go the pizza and the red wine. That's me. I said, so for whatever reason they come in here... just the fact that someone might know their name and have a chat to them... because they're lonely (informant seventeen).

For volunteers, and most clearly for staff, soup kitchens provided a place that was open and welcoming, and this was the key reason for keeping the criteria around attendees open, rather than requiring proof of need. Staff and volunteers were aware that the system was open to people who may not necessarily need to use them, but did not see it as a major problem. The value of having a welcoming atmosphere and a lack of red tape seemed sufficient to justify tolerating those who were seen not to be in need but who nonetheless attended.

6.4.5. Safety

Safety was an important issue in and for all the soup kitchens observed. Each service had their own concerns about the behaviour of attendees. All the services had formal or informal measures in place to maintain a safe and peaceful environment. Safety was necessary for the volunteers and staff, but also to create a comfortable environment for the attendees. In talking with coordinators, staff and volunteers of services, it was evident

there was a disconnect around perceptions of safety, with volunteers reporting they largely felt safe working in the soup kitchen environment. It was clear, however, that their safety and feeling safe was due to rigorous standards put in place by service coordinators.

For services two and three, their open-area service and the mobile nature of their kitchen made safety a high priority. Service two had a strict emergency plan, under which staff and volunteers were to leave in the van in the event of any trouble. They were advised not to take any of the kitchen items with them. The service area was next to a police station, and staff and volunteers reported that police often attended simply to observe and keep the peace at the site (although they possibly also attended for liaison purposes). By contrast, service three lacked any formal plan for dealing with conflict. With a comparatively small number of attendees, control and safety of the soup kitchen population was not as high a priority, although coordinators acknowledged that the potential for conflict was a concern. Service three had experienced some minor altercations, although no violence, and there had been no need for emergency police attendance. There was an emerging understanding that safety needed to be considered, particularly in light of a shooting in the local area that, while not during the soup kitchen service times, involved one of the semi-regular attendees.

The fixed soup kitchens – services one and four – were much more focussed on issues of safety. Service one had a very strict set of rules around violence, drug use and behaviour that related both to the soup

kitchen and to the adjoining day centre. With more permanent staff and security, the service was able to impose a code of conduct:

[Service one] is run on a set of rules, and the clients know, once they pass the front of [the service], they know – you will see the rules out there. No alcohol, no drugs, all this, and there is a set behaviour that is acceptable. If you break that code then there are consequences. And the clients know that. On occasion it happens because we are dealing with people who have a problem, and they know there's consequences. And, [the service is] very strong with those consequences, which they have to be. So, I mean this place has been running for years, people who run it know what they're doing (informant two).

These rules were displayed on a sign at the entrance to the day centre, and penalties were enforced for non-compliance. Police were seen to be in attendance at the service during field observation, although the reason for this was unknown by the researcher, and no acts of violence were witnessed.

Volunteers were generally confident that the staff could handle difficult situations as they arose:

I feel quite safe, yes. If somebody gets a bit worked up about something, they do sometimes, there are always staff, permanent staff here to diffuse it very quickly (informant five).

This was particularly true in the kitchen of service one, where the head cook imposed the rules strictly:

She is [strict with the rules], yes. Which is good, but then the clients, because she is, they know exactly where they stand with her, which is important. She just says it how it is (informant two).

Volunteers related that attendees generally obeyed the rules in the soup kitchen because of the influence of the head cook: 'she's the one they look up to and respect' (informant one). Such respect was key in keeping the peace within that soup kitchen.

Service four had a difficult history with safety. In its original form, the kitchen was open to all attendees, and tables were available both inside and outside the church for people to eat at; largely to accommodate those who smoked. One of the key people involved in establishing the kitchen admitted that they had not seriously considered the potential for violence on the premises: 'we were probably fairly naive in that we just – we just ran it. We didn't really think about risk factors...' (informant seventeen). The kitchen had been free from problems for several years, until a particular incident caused the staff to rethink the way they ran the operation:

We had a – we had an incident one Christmas, where we had two people turn up that we didn't know, and they were very drunk, really, really drunk, and in very poor condition – a male

and a female. Um, one of the clients knew them, and you know, our policy had been to let anyone in. Um, and she took one of his cigarettes through the evening, and so he stabbed her with a fork. All I could hear was someone saying 'he's stabbed her', and I'm thinking 'no, this is Christmas, you don't do that at Christmas! Not here you don't!'. None of us had true first-aid training, and it was just lucky that we were gloved up for Christmas, because we were serving so much food it's actually easier just to do it with gloves rather than tongs. Um, so I was gloved up, and I just raced over there and went 'oh, actually, yes, he has stabbed her'. He'd stabbed her twice, and a fork can do a lot of damage. And she was so drunk, she actually didn't realise what had happened. He just ran off. So we had to call an ambulance, um, and of course the police came then... (informant seventeen).

The incident highlighted some of the safety issues that had not been considered, including the adequacy of their first-aid kit, and training for staff and volunteers. While in itself a distressing incident, it was a further act of violence that caused the kitchen to be shut down for some time:

... then a couple of years ago we had a really serious bashing with an iron bar – and it had been escalating, there had been, with that table outside, where they were able to smoke, that had been where there were problems starting and we were – we didn't have as many staff, we might've only had three or

four staff on a night. We didn't have anyone at the gate, and, um, and we didn't have [our minister], so there was no-one specifically on the floor... (informant seventeen).

After this incident, service four was shut down for several months and restructured. During this time, the staff and coordinators sought help from the local police, and attended training with them on dealing with aggressive people, as well as ensuring that staff and volunteers had first-aid certificates. The move to re-open the kitchen was controversial:

So we – we spent probably three or four months actually, and there was a lot of angst and, you know, the two people that had started it, they left. They didn't think we should re-open. So, it was a pretty challenging time for a lot of us (informant seventeen).

A change in attitude for volunteers, staff and attendees was made clear upon reinstating the service:

As a result of being re-opened again, we did some publicity in the local community. The [local] Council paid for a security guard for the first week or two, just to sort of say, this is a no-nonsense sort of thing here (informant thirteen).

The kitchen was re-opened with a series of new rules in place. Under the new rules, the service would not open unless at least five volunteers or staff were in attendance, with at least one of those being a male. One person –

usually a male – would be at the entrance of the soup kitchen, and would refuse entry to people who were violent or intoxicated, offering them food to take away instead. The coordinators also wanted to have someone in the kitchen specifically to talk to attendees:

[O]ne of the criteria we put down was that we wanted to have someone on the floor that was mental health trained, or a chaplain, or someone they could talk to, or just to kind of diffuse [things] (informant seventeen).

This role was filled by their half-time minister, who, like the head cook of service one, was able to command respect amongst the attendees.

During the observation period at service four, volunteers stated that the kitchen felt safe, and that the minister in particular helped keep the atmosphere peaceful.

I don't have any trouble with them at all. They generally are very polite, and are very thankful for what we're serving them. They know that they're safe here, and that we're not going to get angry with them, or anything like that. As long as the rules are all followed, everything's fine (informant nineteen).

Volunteers in service three were offered courses in first-aid, dealing with aggressive or difficult people, and mental health training through the overseeing church, as well as through the local police. These actions helped them engage with the attendees and deal with potential violence or conflict.

6.4.6. Nutrition, food safety and hygiene

Soup kitchens by their nature are generally characterised by the provision of donated foods, with an emphasis on food rescue (Berg 2008; DiFazio 2006; Poppendieck 1998). However, of the four services studied, two purchased the majority of their food. Service one, as a soup kitchen within a large, corporate organisation, ran a much larger operation than the other services. It operated six days a week for breakfast and lunch, and as such could not solely rely on donated food. Further to that, the head cook of the kitchen changed the way in which the food was purchased and prepared after concerns were raised over nutrition:

When I started, well, there'd been no cook – it was the Sister who was, like, the manager of the centre, she used to do all the ordering. She used to just be here when the volunteers got here at half-past eight, and she'd say to the volunteers 'right, there's a box of mince, make lunch today'. And the ladies and men who were the volunteers, you know – the ladies were just ladies who brought up, you know, four or five kids, so they all collectively put their heads together and they strived to do the best they could. What brought about my employment was a couple of uni students... they came here to [service one], to look at the nutritional value of the food that went out, and the report was full of praise for the effort from the volunteers, but, sadly, there wasn't much variety, and the nutritional value was getting lost in the cooking of the food. So, the board decided

that we would employ a cook, and I was the person that they employed (informant seven).

While continuing to accept food donations, service one placed their emphasis on sourcing monetary donations, to ensure they could purchase fresh, nutritious and varied ingredients. Similarly, the majority of the food in service three, with the exception of their bread (donated by a local bakery), was purchased, using donations sourced from the congregations of the affiliated churches. While sourcing money could be problematic in itself (as discussed below), the use of purchased food allowed for a degree of certainty and stability in terms of the provision of meals, negating the need to cobble together something from whatever was donated.

Although they relied largely on donated food, service four took a different approach to their meals. As a soup kitchen that actually served soup, service four asked volunteers and interested community groups (including local schools) to make soup that could be easily frozen, along with any accompaniments (such as pasta) that could be added before serving. They also sourced food through several local businesses, including Nando's (a local chicken shop franchise), a bakery and a greengrocer. Relationships with these businesses provided the service with a degree of stability and predictability in their meal planning. Service two, also, relied upon certain staples of donated food, such as meat and bread. However, they were also given a wide assortment of other foodstuffs, including on one evening during the observation period, chocolate, yoghurt and fruit juice. As a service with

the most unpredictable food supply, their meals were of noticeably higher calorie content and far more random in nature than those served by the other three services.

The move away from the donation of goods (such as food) for services mirrors a recent trend in charity; with a shift to a preference for monetary donations (Dominus 2009; White 2015; Yglesias 2011). Service one in particular focussed as much as possible on donations of money to purchase food for their kitchen, although they continued to accept donated food, using it as backup supply, or providing it as extra take-away food for attendees. As a relatively high-volume soup kitchen, service one sought (and generally attracted) larger donations, particularly from corporations. On a smaller scale, service three operated its soup run with money donated by its associated congregations, with one church in particular providing extra funding:

We have a young couple in the church, they're both in their early 20s, they've been donating something like \$600 a month towards this, and they work on a team, and whenever they work on a team they bring something extra... (informant eleven).

Reliance on the generosity of key donors was both typical of the soup kitchens studied (in terms of both food and money) and a characteristic that underlined their inherent insecurity.

Two out the four soup kitchens studied showed an increasing focus on the nutritional content of the food served. Unlike service one, the impetus to change the types of food served in service four came more from observation:

It concerned me that most of our clients' diet on the street is quite high in fats and carbohydrates. Their go-to choice for a meal would be something quick and easy (informant seventeen).

Service four also adapted their practices when confronted with hygiene challenges in relation to serving fruit as an entrée:

... we watched them pick [the fruit] up with their hands, and we just went – nah! Not serving it like that again. And that's why a lot of the food prep time is actually cutting up fruit salad (informant seventeen).

The fruit salad served during the observation period was made available in individual bowls, rather than the initial spread of fruit available on plates.

Service one had also changed a few hygiene practices, with the then newly appointed head cook discovering problematic washing practices (focussing on saving water rather than cleaning the dishes properly), which, when considered against the nature of the food served, required her to reorganise the kitchen:

So I had to balance my skills as a cook and also juggle work with the volunteers, and not stand on their toes and upset them, and probably re-educate them in the way that they did things (informant seven).

While key staff and coordinators struggled with overcoming concerns about nutrition and hygiene, volunteers were generally happy with the food being provided. One commented that 'I wouldn't be comfortable serving something that I couldn't eat myself' (informant one). It was telling therefore that in all of the soup kitchens the volunteers generally ate the same food they served to attendees.

As well as the hygiene and nutrition issues, staff and volunteers also had to take into account certain practicalities of serving people with complex health issues. Accommodations were made for attendees who required particular diets – for health or religious reasons. One volunteer noted that many attendees required specific consideration: '... a lot of clients have trouble with their teeth, so we can't give them anything that takes a huge amount of chewing' (informant two).

Unlike the experiences identified in the literature discussed in chapter four, the soup kitchens observed did not struggle to have enough food for their attendees. Rather, some had the opposite problem, with a surplus of food that the staff and volunteers had difficulty passing on to attendees who had already received a sufficient amount. Services two and three had particular

issues with surpluses, as mobile soup runs that could not store food for further use. One of the coordinators of service three commented 'we just do too much. The cost is more than it needs to be, because we provide too much food' (informant nine). In the fixed services, surpluses could also be found, with service four for example generally happy to provide second helpings of soup. In service one an informant commented:

... we've never run out of food on a day, ever, so usually there's quite a lot left over, so we get a bit more generous at the end (informant one).

Coordinators, staff and long-term volunteers were generally experienced in ensuring that there was enough food for average attendance, particularly in the fixed services. Volunteers occasionally ran out of particular parts of meals – certain vegetables or meat – but this was not a major issue, with fixed services in particular having canned or frozen goods stored that could be used as substitutes.

6.4.7. External support

The soup kitchens observed relied heavily on the provision of goods and services by the surrounding community and local businesses for their ongoing operation. As one interviewee noted: 'Without all of their support, we wouldn't be able to do what we do' (informant thirteen). Reliance on donations drove community support: 'we don't generate any income... we're relying on donations' (informant fourteen). While with all services there was a degree of support provided by their overseeing organisations and

associated churches, there was also a need for further aid. Extra volunteers from outside the church, food donations from businesses and community groups, and the support of local people and groups were all key to keeping the soup kitchens active.

Businesses were a major sponsor of the provision of support for each of the services. Service two relied exclusively on donations from bakeries and supermarkets, having established links with key shops that supplied surplus food on a weekly basis. While service one purchased most of its food, it relied on the financial support of major corporate sponsors – and although that sponsorship included goods and services for the day centre and other projects, the soup kitchen was generally the focal point for advertising the organisation to potential sponsors. Unlike the other three services studied, service one targeted large businesses, including iconic South Australian brands.

Service three also found and fostered support from business, having ties with a local bakery for their weekly supply of bread; one of the few foods they had directly donated. Local business became particularly important for them in strengthening their volunteer numbers. In the case of service three, a local business created another service evening with their staff as volunteers:

Just recently [the coordinator of service three] has been talking with [a member of the congregation], who's the real estate agent bloke. And he was really keen on the idea – in fact, he's

donated some funds towards keeping it going. And he was keen to get his staff involved in a community project – so I think it's about 50 of his staff come along Thursdays now (informant eleven).

Service one also had several special days (generally once a month) when volunteers from various workplaces would come and serve, providing their own food (often a barbecue) and sometimes hosting special events.

The emergence of food rescue organisations also had an impact on the services, with some of them being able to access more food: 'July [2013] we revisited Coles, and we have linked in with them with their SecondBite [programme], that they were re-launching... we just happened to be there at the right time...' (informant seventeen).⁶ Establishing connections with businesses helped the services gain an element of stability around food supply.

Local community organisations and individuals were as important as businesses in supporting the soup kitchens. Service one received donations through a (well promoted and over-subscribed) sponsorship initiative to provide money to feed attendees for a day, attracting support from businesses, community groups and individuals, who could not only contribute but also see the soup kitchen in operation. Service four had

⁶ SecondBite is an intermediary organisation that partnered with Coles supermarkets through the Coles 'community food' initiative. SecondBite collected surplus food from participating Coles supermarkets to distribute to emergency food services (SecondBite 2016).

considerable support from community groups, particularly their local Rotary Club, who hosted barbecue nights. Other local organisations also provided food: 'The local Catholic school has been making soup for us. I think it's a group of year four and five students making the soup' (informant thirteen). Services one and four were far more community orientated than services two and three, reflecting the difference in engagement between fixed soup kitchens and soup runs. As runs, services two and three were not permanently based within their service area, and neither of their service areas was surrounded by smaller or supportive businesses. This isolated them somewhat from the support that services one and four enjoyed as fixed, integrated services anchored within business districts. Far from being problematic, however, the four soup kitchens observed were embraced by businesses and other local groups who, in many cases, provided their support, their time and their resources. Services one and four in particular enjoyed support from their local shops and engaged with the community in a fruitful way.

Soup kitchens, as traditional, low-cost charitable services, have few, if any, links to government. As services that don't keep formal records, have no particular long-term goals and require no real obligation on the part of the attendee, even the modern soup kitchen falls outside the necessary criteria to receive government funding. There was no indication that any of the soup kitchens studied sought government funding for their services. The lack of government intervention in areas touched upon by the services – such as additional assistance around housing, mental health *et cetera* – was

frustrating for volunteers and coordinators of the services, but there was a tacit understanding that funding the soup kitchen was not the job of the government.

There was one area in which some government support was provided to the services studied: while not providing financial assistance, local councils tended to be very supportive of the soup kitchens studied. Service four was helped by their local council, particularly with regard to establishing new safety practices in light of violent incidents, allowing the service to re-open. The support they enjoyed came from an understanding by the local council of the impact of their soup kitchen:

Actually, it was what [the local] council recognised, was that general misdemeanours on the street had gone down, because whilst I might see you there, I might not acknowledge you, but out on the street, I would think 'uh, I've seen that girl, I've seen her at the soup kitchen, so she's okay'... which we didn't realise... (informant seventeen).

The ongoing support of the local council had been instrumental in helping service four re-open, with the understanding that far from promoting violence through attracting marginalised people, the service was helping to diffuse some of the tension within that community. While the level of support from the local council was unclear, the kitchen coordinator with service one summarised the importance of soup kitchens to the local community:

If we weren't here, our people would probably be roaming Rundle Mall or hanging out at shopping centres being a public nuisance because that's the only way they get attention, whereas here, they come here and we know who they are, we respect who they are, we ask how they're going, we know their name... (informant seven).

Beyond the support of local councils and the police, the government had little involvement in any of the soup kitchen observed:

It's all self-funded by the church... So we don't rely on any government hand-outs or anything like that, or any other agencies... (informant ten).

For some, there was a belief that the charitable sector existed to provide services like soup kitchens, rather than the government: '[Charity is] very important, because the government is very stretched...' (informant two). For others, the lack of government intervention was a source of frustration:

It's a very difficult situation and I think myself – you know, we pay public servants big money now, big money, and, how many of them are involved in committees discussing this... you always read stories where the Salvos and I think it's Saint Vincent's, lost state government funding for their emergency housing... Why? We have a public servant on \$200,000, yet we can't get [\$200,000]... (informant ten).

Such despair perhaps acknowledged that soup kitchens really are a short-term stop-gap solution, one that aids a small number of people for a brief period of time. None of the interviewees saw soup kitchens as the domain of government, nor were they sold on American-style initiatives such as food stamps, but there was a sense that they were acutely, if not painfully, aware of the limitations of the soup kitchen model.

As identified in the literature (Berg 2008; DiFazio 2006; Johnsen, Cloke & May 2005; Poppendieck 1998), soup kitchens rely on external support to continue to operate. The soup kitchens observed for this thesis required a combination of individuals, businesses and not-for-profit organisations to maintain their service, with each accessing their own networks through volunteers, staff, coordinators and community supporters. This ability to make connections and to constantly be looking for new opportunities allowed them all to withstand losing previous sources of food or funding.

6.5. Conclusion

The soup kitchens observed existed along a continuum, sharing many of the same issues and practices, although dealing with them in different ways. From the point of view of the volunteers and staff, soup kitchens provided (generally nutritious) food, a place of acceptance and safety, a space for social interaction and an opportunity for attendees to be visible in the community. Many volunteers related seeing it as a stepping stone back into society, through increased self-esteem and purpose, and by providing referral pathways to other organisations. Volunteers avoided judgment of

attendees as much as possible and placed great emphasis on respect and recognition.

Flexibility and evolution in the operation of the services and continual innovation by key individuals (by providing other assistance) kept the soup kitchens relevant to attendees and helped foster continued support for the services. All the services were aware of the challenges faced around potential conflicts and the threat of violence, with fixed kitchens able to deal with it in a more controlled way. There were fluctuating needs for new volunteers, sources of food and money, requiring services to be adaptive and assertive within the community. The ongoing and changing needs of attendees (often for more than just food), the desire of volunteers to do good and the appeal of soup kitchens to (local) businesses with surplus food all kept soup kitchens operating. Even where supply and demand were unbalanced, none of the services reached a baseline where they were unable to operate in some form. These factors have all shaped and influenced the form and functions of the modern soup kitchen; at least from the perspective of staff and volunteers. The following chapter considers these characteristics through the experiences of the attendees, exploring why and how they access soup kitchens. Together the data provides a picture of how the modern soup kitchen operates, and more importantly, why it is still not only in existence, but still relevant in the 21st century.

Chapter 7

Attending the modern soup kitchen

7.1. Introduction

This chapter is a companion to the previous chapter's discussion of soup kitchen models and staff, providing another view of soup kitchens, through the eyes of those who attend. The two chapters create a comprehensive and rounded picture of how the modern soup kitchen operates in Adelaide, which may be applicable more widely. It provides a contrasting viewpoint to the experiences of volunteers, staff and coordinators as elucidated in the previous chapter.

This chapter explores the characteristics of the attendees of the four kitchens observed, as well as reasons for attending, patterns of attendance and challenges faced in accessing or utilising the services. It reports on semi-structured interviews with 15 attendees, as well as participant observation (see Table 5.1).

7.2. Social characteristics

Understanding the general characteristics of soup kitchen attendees was a key to discerning who the services were helping, and whether there was a disconnect between targeted and actual clientele. As discussed previously, the services were aimed at assisting people suffering from complex disadvantage such as homelessness and poverty, as well as having a tangential focus on those who were experiencing social isolation or social exclusion. From the previous chapter it could be seen that staff and

volunteers saw soup kitchens as a refuge, where attendees could be fed, be visible and have a gateway to accessing further, generally longer-term, assistance measures.

Each soup kitchen observed had its own unique mix of clientele that related closely to the service's catchment and location, the time and place the soup kitchen operated, and the nature of other services offered by the overseeing organisations – through the soup kitchen itself and separately. Adelaide occupies a relatively small urban area; as such, there was some crossover in attendees between the services studied. Table 7.1 shows the key characteristics of the four services during the observation period. The table provides the dominant characteristics of attendees.

The majority of the attendees in all services were Caucasian, with a small but notable population of Indigenous attendees at services one and two. There were more males present in the services than females, particularly in the city services. More women were observed in the suburban services. Almost all attendees were over the age of 18. All children attending were accompanied by adults. Attendees at the city kitchens appeared to be, or identified as, sleeping rough, with most attendees to the suburban kitchens living in various types of accommodation, both secure and insecure.

Table 7.1: Dominant characteristics of service attendees

	Service one	Service two	Service three	Service four
Age	40-70	40-60	20-50	30-70
Gender	Male	Male	Both male and female	Male
Race/ ethnicity	White European	White European	White European	White European
Income source	Government benefits	Unknown	Government benefits	Government benefits/ under-employed
Living arrangements	Boarding houses	Rough sleeping	Government housing	Boarding houses
Health	Disabled (mental/ physical health issues)	Mental/ physical health issues observed	Unknown	Mental health issues
Marital status	Single/ divorced	Unknown	De facto relationships	Single
Other	Drug and alcohol use	N/A	N/A	Social isolation

More men than women attended service one on the observation days, with most of them being aged between 40 and 70. No more than five women were seen during the observation period. Attendees appeared mostly to be Caucasian, although small groups of Indigenous people attended on two days. Attendees interviewed were on government benefits or were underemployed, undertaking seasonal or casual work. There were a number of people observed carrying extensive baggage, indicating that they were sleeping rough. Of the seven attendees interviewed from service one (see Table 5.1), four were living in a boarding house, and three sleeping

rough. Several people observed had pets with them. One female attendee had a dog that served as a companion, and also as protection, as she regularly slept in the parklands in a tent. Another attendee was seen with a pet guinea pig.

Attendees interviewed who identified themselves as sleeping rough or living in boarding houses, described experiences of cyclical homelessness, including periods of sleeping rough, being housed, or living in temporary accommodation such as caravans. There was some evidence of mental health issues and intellectual disabilities among attendees.

Attendees of service two were observed to be older men, with a number of younger men (aged less than 40). There were more women in attendance on the evening observed than at service one, although no more than five. One female attendee was in attendance with a child of approximately 11 years old. There was a small group of ten Indigenous people who stayed away from the other attendees, as well as two young Asian men. The rest of the attendees appeared to be Caucasian. There were attendees who appeared to be rough sleepers, carrying extensive baggage. As service two was a mobile soup run located in the CBD, serving time was limited and there were concerns about safety. Because of this, attendees were not directly interviewed.

Attendees of service three were younger than those seen attending services one and two (see Table 7.1). With the exception of two people aged in their

50s who were wheelchair users, attendees were in their 20s and 30s, and there were two young couples with small children. There was a roughly even mix of men and women attending. Volunteers and staff reported that some older people who were rough sleepers regularly attended, as well as other younger people living in low income housing. It appeared that the attendees lived near the service site, in government housing. There were however several attendees who had travelled to the site from the northern suburbs (the service being located in the southern suburbs), who also lived in government housing. The number of attendees present in service three was small on the evening observed. The staff and volunteers informed the researcher that attendance fluctuated considerably, and that some evenings had up to 30 attendees (although no more than 10 attended on the evening observed). All of the attendees appeared to know the volunteers. Due to the limited time in which service occurred (less than one hour), formal interviews with attendees were not conducted.

Service four had a broader age range among attendees, with people in their 30s through to several in their late 60s. More males attended than females, but more women attended on observation evenings than at services one or two. A couple with a baby attended on one evening. Of the eight attendees interviewed, one was living in a boarding house, while the rest were living in rented accommodation. Volunteers and staff reported that several regulars were known to sleep rough, particularly on the local beach. One attendee interviewed discussed their mental health issues, while others related having disability or physical health problems. The attendees

interviewed related experiencing social isolation or social exclusion, with two specifically mentioning it as a primary reason for attending service three.

Several demography-related issues emerged in relation to the attendees who used the services. These are discussed below.

7.2.1. Gender and family

The gender mix of the attendees at the soup kitchens observed was important, due to the feminisation of poverty – the increase in the incidence and scope of women’s financial disadvantage (Chant 2008; Kim & Choi 2013). Recent international literature identifies a large percentage of women – particularly single mothers – attending soup kitchens and other emergency food services: one study found the rate of female attendance was 66.2 per cent (Biggerstaff, McGrath Morris & Nichols-Casebolt 2002, p. 271), and another 65 per cent (Ford, JD et al. 2013, p. 974). Studies in Europe and Australia, however, have reported higher attendance rates of men, particularly single men (Mulquin, Siaens & Wodon 2000, p. 257; Wicks, Trevena & Quine 2006, p. 922). The latter was the case in all but one of the services observed for this dissertation.

Of the 15 attendees interviewed for the dissertation, only four were female, with all but one from service four, which had the most women attending during the observation period. This was an overrepresentation of women when compared with the generally observed attendance rates. A small

number of women observed attended with children, and one attendee interviewed had children who were not in her care:

I've got two children, two girls... I lost the kids in a custody battle, two years after I had my first daughter (attendee four).

One of the woman interviewed was divorced, and was using the soup kitchen as a buffer – to stretch her finances further – while she waited for the sale of the former marital home. Another women interviewed had experienced periods of being housed while in relationships, only to fall back into homelessness or insecure accommodation when relationships ended: 'The last three years I was settled down in a relationship and that didn't work out, so that put me back out on the street' (attendee four).

Of the 11 men interviewed, one explicitly mentioned being single. One interviewee had an ex-partner and adult children. One attendee identified as a widower: 'I was married, but I lost my wife. She had Alzheimer's, I lost her about seven years ago' (attendee eight). None of the men interviewed used their families as a resource, although some had friends who helped them get accommodation or employment. Several men with children were seen attending the soup kitchens, although they always attended with a female partner. There was no discernible difference between the gender balance of those attending the fixed soup kitchens and the mobile soup runs.

7.2.2. Age

The literature (both historical and more recent) on soup kitchen attendance identifies a broad range of ages among attendees, although most put adult attendees at least in their 30s. One older study in the United States found attendees at that particular soup kitchen were generally under the age of 35 (Bowering, Clancy & Poppendieck 1991, p. 915). Most studies, however, put the age range for attendees between 35 and 55 (Biggerstaff, McGrath Morris & Nichols-Casebolt 2002, p. 271; Ford, JD et al. 2013, p. 5; Wicks, Trevena & Quine 2006, p. 922). The literature suggests that younger people generally are more resilient, with more resources to draw on, allowing them to seek help early, perhaps preventing them from requiring emergency food services as frequently (Mallett et al. 2010).

The ages of attendees at the observed soup kitchens varied. A small number of children were seen attending with parents or guardians, with the youngest being a baby. Of the adult attendees, ages varied widely, with the youngest in their early 20s, and the oldest in their 80s. With the exception of service three, the majority of attendees in the kitchens observed were over 40. Services three and four had a comparatively younger demographic, coinciding with more family groups (see Table 7.1). The youngest attendee interviewed was 37. The oldest was 84. The median age of interviewed attendees was 50. This correlates strongly with much of the literature, particularly an Australian study that indicated the median age at a soup kitchen in Sydney was 51 (Wicks, Trevena & Quine 2006, p. 922). There

was a contrast between the age ranges of those attending the city services (services one and two) and those in the suburbs (services three and four).

7.2.3. Race and ethnicity

Race and ethnicity have been considered in the North American and Australian literature, generally in relation to the African American population in the United States, the Aboriginal (First Nation) population of Canada and the Indigenous Australian population. Immigrant races and Native Americans were not mentioned in the studies. In the United States soup kitchen attendees have been found to comprise high numbers of African Americans (Berg 2008, p. 37; Bowering, Clancy & Poppendieck 1991, p. 5), although some had either an equal or higher proportion of Caucasian attendees (Biggerstaff, McGrath Morris & Nichols-Casebolt 2002, p. 271; Glasser 1988, pp. 50-51). The Canadian study reported a high proportion of Aboriginal (First Nation) attendees (Ford, JD et al. 2013, p. 974).

Correlating with the findings of the North American research, one Australian study observed a relatively low attendance by Indigenous people (Wicks, Trevena & Quine 2006, p. 922). This was despite the much higher risk of homelessness and other (multiple) disadvantages among Indigenous people in Australia (Memmott & Chambers 2010).

Indigenous people made up a small proportion of soup kitchen attendees observed for this research. The management of service two reported a normally much higher proportion of Indigenous people attending than was

observed during the field research. Despite being situated next to the parklands in the CBD (where groups of Indigenous peoples are known to congregate), service one had relatively few regular Indigenous attendees. On two observation days a number of Indigenous families were observed attending together. They attended the soup kitchen for meals, but did not remain in the day centre.

Service two, by contrast, had a small group of approximately 10 Indigenous attendees (out of the around 40–50 attendees that evening) who, according to volunteers, attended regularly. The group was observed to keep to itself, and not mix with the other (largely white European) attendees. It is uncertain why this was the case. Neither service three nor service four had any identifiably Indigenous attendees, although again it was difficult to speculate on heritage outside making direct inquiries.

Apart from the Indigenous population, race and ethnicity were difficult to determine outside assumptions made in observation and self-identification of attendees interviewed. Two attendees interviewed had migrated to Australia. One was originally from Belgium, and migrated as an adult. The other came to Australia as a child:

I was born in Egypt, and Nasser was the President of Egypt... and being an Arab nation they didn't particularly like Jews in the first place and they decided to kick us all out. So, because my mother and father both have relatives in Australia we came to Australia (attendee one).

Only one interviewed attendee identified as Indigenous. None of the other attendees interviewed expressed a strong ethnic or racial background. From observation, it appeared that the majority of the attendees were Caucasian, but it is difficult to speculate on their specific heritage. Two young Asian men attended service two, but otherwise there was no obvious representation of people potentially of migrant backgrounds. Volunteers of service two related that a large group of Asian students had once attended, but this did not seem to be a regular occurrence.

7.2.4. Living arrangements

The housing circumstances of individuals were closely connected to their soup kitchen attendance. Housing costs are known to have a significant impact upon quality of life, with high housing costs lowering discretionary income and often resulting in a significantly lower standard of living (Demographia 2015, pp. 26-27). The residualisation of public housing has pushed more low income earners into the private rental market (Gilbert, T 2011b, p. 30; Tually et al. 2016). The international literature around living arrangements and soup kitchens was largely consistent regarding the housing conditions of soup kitchen attendees. Generally, attendees were either homeless or living in insecure, short-term or unstable accommodation, or in government housing (Ford, JD et al. 2013, p. 5; Johnsen, Cloke & May 2005, p. 328; Mulquin, Siaens & Wodon 2000, p. 257; Wicks, Trevena & Quine 2006, p. 922).

Of the 15 attendees interviewed for this dissertation, all but three had experienced periods of various forms of homelessness at one time or another. Four of the seven interviewees from service one lived in boarding houses, and identified having lived on the streets previously. The other three were currently living on the streets. Movement between various types of insecure or transient accommodation was a common theme among attendees. In particular, some interviewees moved due to the actions of others who were also experiencing cyclical homelessness:

Up until the middle of this year I was living in Glenelg... I had a spare bedroom, I had a friend that was living on the street, and I can't live in a unit with a spare bedroom and have a friend living on the street, so I invited him to move in. Um, unfortunately he earns his living doing things that are not legal. And rather than get involved in it all and end up in trouble I said 'look, mate, I can't live like this, I'm going to pay the rent up until the end of your next pay period, but I'm also going to tell the landlord to change the lease into your name, I'm not going to live here anymore'. And that's why I went onto the streets (attendee one).

Another attendee spoke of moving out of accommodation due to interpersonal problems:

I sort of got kicked out of where I was last week. I was sharing, sharing a place, but me and a guy weren't getting along, so I had to move out (attendee three).

A further attendee interviewed had been in a similar situation and had ended up sleeping in his car. Another interviewee reported being forced to move out of her home when she, her husband and child, were victimised by a neighbour:

Well, our neighbour was very violent, very dangerous. Always yelling abuse at us – we're not doing anything, just going to our letterbox, he yells all kinds of names, threatens to kill him, us, burn down our home. And when we finally left, he broke into our house, stole all our valuable items, even down to [our child's] cot (attendee nine).

Each of these situations forced the attendees into insecure and unstable accommodation, including motels (under the South Australian Government's emergency housing programme) and boarding houses, or into rough sleeping.

Several attendees interviewed (five out of the 15) were living in the city parklands. One attendee had been living on the street previously:

I was living in the parklands in a tent... Until the council come up and asked me to move within seven days. Lucky for me, Street to Home⁷ had just been to see me beforehand, then after I had an appointment with the Housing Trust a few days later. And I filled out some forms, for some homeless

⁷ Street to Home is a health and accommodation assertive outreach specifically targeting people sleeping rough. In South Australia the service is run by SA Health (South Australian Government 2016).

accommodation or to be bumped up the Housing Trust list, things like that (attendee four).

Another attendee had experienced previous episodes of sleeping rough: 'Yes, I've lived on the streets... First time I was on the streets I was only 13, and that was back in 1989' (attendee thirteen). Some attendees who were presently sleeping rough had previously been living in various forms of accommodation, secure and insecure. There was a pattern of moving in and out of different types of accommodation, usually caravan parks, boarding houses and emergency housing. Those who had periods of living in stable accommodation did so with partners or friends. Stable accommodation with partners was particularly true of the female attendees, although it also applied to some of the male attendees who had previously been married. Two attendees identified having previously owned houses with partners; both had lost their houses in divorce settlements.

Four of the attendees interviewed from service one and two from service four lived in boarding houses in walking distance of the kitchens. Those who lived in boarding houses reported having done so for long periods of time: 'I've got good accommodation in a boarding house with 40 people... I was in the old one before they knocked it down about 28 years...' (attendee five). All but one of the people interviewed who lived in boarding houses reported having lived in their current boarding house for at least a year (with the other having lived in their current boarding house for 11 months), with some having lived there for more than ten years. People living in boarding houses

tended to use that form of accommodation longer-term, even if they didn't stay in the same boarding house: '[I've] never really had my own place... More or less just boarded mainly' (attendee seven). One attendee reported paying \$293 per fortnight for their boarding house accommodation.⁸ Another found the boarding house costs restrictive:

I'm living in a boarding house at the moment. Most of my [money] goes on rent, that's why I come to these places for meals, because I can't afford to buy the food and [cook for] myself (attendee two).

7.2.5. Income and employment

The international literature suggests that soup kitchen attendees are generally either unemployed or underemployed (Biggerstaff, McGrath Morris & Nichols-Casebolt 2002, p. 272; Ford, JD et al. 2013, p. 5; Glasser 1988, pp. 50-51; Mulquin, Siaens & Wodon 2000, p. 257). Casualisation of employment has led to uncertainty in income for many people, due to the loss of stable wages (Saunders et al. 2006). Underemployment has increased in Australia over time, and has been particularly prevalent among women (Campbell, Parkinson & Wood 2013).

Few of the attendees interviewed were in any form of employment. Those who were employed were undertaking casual or seasonal work. One drove trucks on an irregular basis, while another had a part-time labouring job.

⁸ The maximum rate of the Newstart (unemployment) benefit for a single person without children as of January 2017 is \$528.70 per fortnight (Department of Human Services 2017).

Another attendee interviewed worked on a casual basis in his friend's business:

Um, a mate of mine owns [a food truck]... we cook the yiros and all the barbecues, and we do the soccer, the cricket, and do all that sort of stuff. So we sort of do entertainment things (attendee fourteen).

The few attendees who were employed were not receiving government benefits, and reported living solely off their wages. One of the attendees of service four was retired but working casually as an accountant. He was one of two attendees interviewed with a post-secondary school qualification.

Several attendees were looking for work as mandated by their receipt of Newstart, the government unemployment benefit. Those who were job seeking reported having difficulty securing employment for various reasons, including their age and physical incapacity due to injury or chronic illness. One attendee expressed particular dissatisfaction with his search for employment:

I'm getting a Centrelink benefit. Newstart... I'm not really happy about it. I'm not really happy with the job networks. So I'm coming to a realisation that I may not be able to get work at my age [53] (attendee seven).

Several other attendees were on the disability support pension or aged pension. One, who was living in a boarding house and was on a disability pension noted:

That provides me with just under \$1,000 a fortnight, and if you can't live on \$1,000 in Australia a fortnight then you don't deserve to live at all (attendee one).

It is of particular note that many of the people currently out of work were previously in physically demanding jobs, and were injured and subsequently unable to undertake their previous positions. There was a strong link between poor physical health and low income or issues with securing employment.

7.2.6. Physical and mental health

Attendees at the soup kitchens had a complex series of physical, psychological and intellectual disabilities. The literature identifies strong and complicated links between financial disadvantage, social exclusion, homelessness and poor physical and mental health (Baker et al. 2014; Bentley, Baker & Mason 2011; King et al. 2012; Robinson, E & Adams 2008; Saunders et al. 2006; Wells & Harris 2007). There was no way to determine whether physical or mental health issues caused, or were caused by, periods of homelessness and poverty, among the attendees interviewed.

Several attendees reported physical impairments or ailments, including severe dental issues – in one case, mouth cancer – chronic illness and long-term injuries. One attendee related a series of extensive physical injuries:

So, I was involved in a motorcycle accident when I was 18 and broke my back, had a fractured skull and a few other injuries. They're all things that have left me with permanent things like I'm blind in one eye and I've got a metal knee and my femur's got a metal rod in the middle of it. And – when I was younger it didn't matter but now that I'm in the last part of my life, arthritis gets you down again so you've gotta live in a warmer climate, um, and Adelaide's got the best weather in Australia, so... (attendee one, 60 years old).

Some interviewees noted having physical issues due to working in labour-intensive jobs, through accidents, or simply through advancing age. Several attendees were seen using wheelchairs or walkers.

Observation showed a number of attendees who demonstrated behaviours appearing consistent with mental health issues, and one attendee interviewed revealed a complex set of psychological concerns:

I've got manic depression, I've got schizophrenia, bipolar, and I've been given every single medication that the mental health system has ever offered... (attendee thirteen).

Another attendee interviewed reported symptoms of post-traumatic stress disorder, with his partner acting as his full-time carer. Volunteers also identified some attendees as having mental health issues. An attendee in service four was reported by a volunteer to have severe intellectual disabilities. This attendee identified to both the researcher and a volunteer as having several physical issues, and was also undergoing treatment for cancer.

7.2.7. Drugs and alcohol

The literature around soup kitchens contained anecdotal evidence of high levels of drug use and abuse among service users (DiFazio 2006, pp. 46-51; Glasser 1988, p. 59; Nwakeze et al. 2003, pp. 464-647). Attendees at the soup kitchens observed for this dissertation were not directly asked about alcohol or substance use, but the subject was raised by staff and volunteers, as well as by several interviewed attendees. Staff and volunteers had strict policies in place regarding the use of narcotics on the premises, as well as attendance by intoxicated persons. Two intoxicated people were observed in the adjoining day centre of service one. Overt drug use was not observed by the researcher in any of the soup kitchens during the observation periods.

In an informal conversation, one attendee mentioned drug and alcohol abuse by other service users, commenting that someone they knew was banned from several local supermarkets for purchasing large quantities of rubbing alcohol to consume. Two attendees formally interviewed admitted

to using or abusing drugs. One admitted that they smoked marijuana, and lived in South Australia because of the decriminalisation of the substance for personal use. The other interviewee discussed drug use within their boarding house:

But, whilst I was asleep [in the hospital Intensive Care Unit], the hospital contacted [the boarding house] where I was living, and told them I was in a coma and they should pack my gear up and I'd get in touch with them again when I got released. Well, [the boarding house] packed all of my gear. And in amongst all of my gear I had two brand new empty syringes. And one of their rules is, if you have syringes... you get banned for life... Okay, well after having been asleep for two and a half days and getting released from the Intensive Care Unit of [the hospital], I'd been back on the streets an hour and went back there and they said 'You're banned'... And I only had the syringes because the night that I moved in there I watched five people use the same syringe, and I thought 'these people are lunatics and they'll kill themselves', so the next day, because I had nothing to do all day, I went to a needle exchange and got 20 new syringes. And, to show you how popular they were, I gave away 18 the first night I was there (attendee one).

The attendees interviewed who lived in boarding houses or were rough sleeping knew of other people who used drugs, even if they claimed not to themselves. Attendees who lived in more secure accommodation rarely

mentioned drug or alcohol abuse, although one person with a history of both homelessness and mental health issues admitted to addiction:

I've got a drug addiction, and I can't help that I've got a drug addiction... I've had the drug addiction since I was like 12... When somebody asked me what I'm addicted to, I said I'm addicted to cocaine (attendee thirteen).

It was difficult to discern the level of drug use among the soup kitchen attendees generally (on or off the premises) without interviewing them, and information on alcohol consumption or other substance use was not often volunteered. It was uncertain whether there was a relationship between drug and alcohol use and the need to use soup kitchens.

7.3. Using soup kitchens

The primary purpose of soup kitchens, and one of the express purposes of starting the four services studied, was to provide food, specifically to people who were unable to otherwise source their own. Other motives included religious imperatives, and, over time, as a mechanism for linking attendees to other services. Commentary from attendees interviewed (and many coordinators, staff and volunteers) noted that attendees used the soup kitchens in one – and in most cases, at least two – of the three ways: as a source of food; as a source of social interaction; and as an access point for other services.

Patterns of soup kitchen use by attendees varied. The majority of attendees interviewed attended soup kitchens on a regular basis, either several times a week in the case of service one (open Sunday to Friday), or every two to three weeks in the case of service four (which served once a week). Several attendees interviewed report that they frequented the soup kitchen every time it was open, and one attended on a semi-regular basis. All attendees interviewed had been to their respective service previously, and no first time attendees or one-off attendees were interviewed.

Many of those interviewed attended other soup kitchens, on a semi-regular or occasional basis. Just over half of the attendees interviewed at service one noted using various services almost every day of the week, as their primary sources of food. Around half the attendees interviewed only used a single soup kitchen, whether they did so on a regular basis or not. There was some correlation between using soup kitchens solely for food and attending multiple soup kitchens (as opposed to those who attended for social purposes, as discussed later). Several attendees interviewed used two of the soup kitchens observed – service one and service two, both in the CBD – and some of the same attendees were seen at both services.

More than half the people interviewed had been attending the present soup kitchen for over a year, and all had been using the service for over a month. There were four attendees who had been attending soup kitchens for at least ten years, although not necessarily consecutively. Two to three months was the minimum length of attendance among those who were

interviewed. Given the limited time frames in which observation took place, it was difficult to tell how long attendees had been using the services, but many attendees were known by name by the staff and volunteers, indicating repeat and frequent presence at the service. A few were identified as having attended for several years. In the case of service four, one person who attended the service early in its life had become a volunteer, and was identified by other staff and volunteers as someone who promoted the kitchen to other people sleeping rough or living in local boarding houses. One of the attendees interviewed had been introduced to service four by this volunteer.

7.3.1. Food

Food is the most basic – and the most obvious – service provided by soup kitchens. As well as being the most important aspect of the soup kitchen for staff and volunteers, it was also observed to be one of the key reasons for attending. All soup kitchen attendees ate the food that was served, and all of those interviewed came for food, even if it not primarily. There were several attendees interviewed who ate almost exclusively from soup kitchens, with the exception of occasionally eating fast food or cheap Asian food from the Adelaide Central Market in the case of some city-based people. People attending multiple services reported that they ate at a variety of soup kitchens in Adelaide during the week, and purchased meals when they had the money.

Generally the attendees who used soup kitchens as their primary food source had no ability to prepare or store food themselves. Most of these people were sleeping rough. One attendee was living in what she alluded to was a sub-standard motel room with unclean kitchen facilities, and was unable to prepare or store food:

I've only got a fridge and the power's off at the moment, so if I had any food in it, it would be going [off] and I'd be really upset because I'd have spent money on it (attendee four).

Several attendees who were interviewed lived in accommodation with communal kitchens, mostly in boarding houses. Such facilities were adequate for cooking, but interviewees felt they did not have the time or the skills to cook, or simply chose not to. Other attendees – particularly those who attended service four – cooked for themselves often, or cooked when they had the facilities to. Only two attendees interviewed actively chose not to cook, despite having the facilities or capacity to do so – for most, the main barrier to preparing their own meals was a lack of adequate facilities.

Attendees were generally happy with the food provided by the soup kitchens. The international and national literature on soup kitchens has been divided on issues of food quality and quantity, although in North America in particular inadequacy and scarcity are the common themes in studies of services (Berg 2008; Dachner et al. 2009; DiFazio 2006; Poppendieck 1998). In Australia, a personal story from a soup kitchen attendee in other research sheds light on unpalatable food served in some

soup kitchens: 'To this day I still cannot comprehend what the services I used were thinking when it came to food provision. What we were served was not food' (Peterson 2016, p. 20).

Criticisms around food quantity and quality in the literature stand in stark contrast to the comments of attendees made during observations in this research. Most reported that there was more than enough food available:

The good thing with [the soup kitchens in Adelaide] is that they've all got heaps of food and there's never a shortage, you can usually have seconds at most places (attendee one).

There was a positive view overall of the food available at the soup kitchens, with one attendee noting 'you can't starve in Adelaide' (attendee one), and another agreeing that 'you can be homeless, but, you know, you don't go hungry' (attendee four). Another interviewee, who accessed various soup kitchen across the week, had a recent experience with being turned away from a service (although not at service one, which she was attending at the time of the interview):

Maybe at lunch time there's a waiting line. Like, they fill up the kitchen and then you've gotta wait, but that's alright, you expect that. [Service one is] not gonna run out of food. It's a bit different to like somewhere else I went for dinner the other night, and they actually ran out of food. And they had fed – because usually people go through the first time and then the

second time – well, yeah, this time they didn't even get to go through the first time (attendee four).

No other attendees reported being turned away from soup kitchens due to lack of food. This was consistent with the observations at the soup kitchens studied – service two and service three both gave away extra food to the attendees, and in the case of service three the volunteers and staff struggled to get rid of all their excess food. Service one, being more established, managed to strike an appropriate balance between providing food and minimising leftovers. They were less likely to have second helpings available. Service four was able to provide second helpings, especially of soup.

There were few complaints about the quality or quantity of food, and many, particularly at service one and service four, expressed pleasure at the volume of fruit and vegetables provided. Service four was known for its soup, with several flavours – notably pea and ham – being favourites among the regular attendees. Some attendees interviewed had dietary needs or wants that were accommodated easily within the kitchens they attended. Volunteers knew of several regulars of service four who were vegetarians, and had provisions available for them if they attended. One attendee interviewed was a diabetic, and self-managed their intake at the soup kitchen. Another had dietary requests for religious reasons:

The first time I went into the kitchen there I spoke to one of the ladies and I said 'look I don't eat pig of any kind, so if you have

sausages or something, I won't be eating them'. And she said 'is it alright if I just feed you vegies those days?', and I said 'yeah, give me a pile of vegies that's fine', and that's what I had today and it was great (attendee one).

None of the interviewed attendees had faced difficulty with their food requests being catered for, and were happy to accept substitutions, or more of other elements of the meal.

The international literature on emergency food services has argued that lack of choice is a significant problem with the emergency food system generally (Berg 2008; Poppendieck 1998; van der Horst, Pascucci & Bol 2014). In a study of food banks in the United Kingdom, one researcher noted that attendees were unhappy with the food received, but felt unable to complain or ask for substitutions (Douglas et al. 2015, pp. 307-308). None of the attendees interviewed for this study reported issues with the lack of choice in meals, although one attendee who regularly attended service two said he developed an aversion to sausages after attending that service for so long; sausages being a staple food there. Nonetheless none of the attendees were seen to raise issues about the food with volunteers.

7.3.2. Social interaction

Social exclusion has been a significant perspective in considering the complexities of the lives of people experiencing homelessness and/or poverty (Saunders, Naidoo & Griffiths 2008, p. 176). Early ethnographic

studies of soup kitchens internationally have touched on the social side of such services, with attendees finding respite from loneliness and isolation by attending them, even when direct interaction with volunteers or other attendees is limited (Glasser 1988; Mulquin, Siaens & Wodon 2000; Poppendieck 1994). Contemporary soup kitchen services stress the importance of the social element of their services, with one meal centre claiming that '[bringing] people together for a meal in a safe and welcoming place is a foundation point of community' (Middendorp 2016, p. 35).

Around half of the attendees interviewed expressed the desire for social interaction as one of their reasons for attending the soup kitchens. This was more pronounced in the fixed soup kitchens than the mobile soup runs. It was especially true in service four, where all but two of the attendees interviewed cited social interaction as one of their motivations for attending. Social engagement occurred in three ways: through interpersonal discussions between attendees and other attendees; discussions and engagement, generally cursory, between attendees and staff or volunteers; and by simply being in the soup kitchen environment.

Patterns of social interaction varied between attendees. With its adjoining day centre, service one had many who interacted with each other before and after meals, although there was a large population who came to eat and then left. A small group of regulars (around six or seven, although the numbers varied) played cards in the day centre, and they were happy to let others join in. Other attendees were seen sitting and talking to one another,

both in the day centre and at the tables in the soup kitchen. Services two and three both had many attendees who were served and then stood or sat nearby, often in small groups, talking to one another. Direct interaction between attendees and volunteers and staff was more noticeable at service three, with safety concerns giving staff and volunteers of service two less scope to engage attendees in conversation. The transitory nature of the operations also made it difficult for more extensive social bonding between attendees. Service four had many attendees who knew one another and sat together, with tables and chairs moved around so that small groups could be formed. There was also a dedicated staff member who engaged directly with the attendees. This was also the case with service three, and in both situations the staff member was a church minister.

Service four in particular had many attendees whose primary interest in attending was for company. For these attendees, interpersonal interaction was very important: 'It's not food, it's the socialising with other people... [it's] mostly the company' (attendee eleven). For others, it was less about the direct interpersonal interaction than it was the general atmosphere: 'It's great to – not to eat alone' (attendee ten). One attendee was pleased by the positive interaction with the staff and volunteers:

If I come once a week, I meet people and say hello to people here... I don't remember their names, but everybody here remembers my name... they get to know you (attendee eight).

Not all attendees interviewed, however, were comfortable with the social aspect of soup kitchens. Some rejected the notion of attending soup kitchens for social reasons: 'I'm not here 'cause I choose to be. As I say, I don't come here socially mate' (attendee three). Others simply did not want to interact socially, particularly with other attendees: 'Nah, nah I don't mix with them, it's just not a good situation. We're all in a difficult place, and it's not the right thing to do' (attendee four). There was a strong association between attendees who used soup kitchens as their primary food sources and those who did not engage with the social aspect of the services. The majority of people interviewed who fitted into both categories (using soup kitchens primarily for food and not socially interacting) were rough sleepers.

7.3.3. Access to other services

One of the key virtues espoused about soup kitchens has been their ability to link attendees into other services (Lindberg et al. 2015, p. 72; Poppendieck 1994, p. 362). In particular, soup kitchens have been seen to be an engagement point for marginalised people not otherwise involved with other forms of community services (Poppendieck 1994, p. 362). In explaining their soup kitchen in Fitzroy (Victoria), the CEO of St Mary's House of Welcoming argued that 'the meal service, while essential, was seen more as an "engagement tool", a stepping stone into addressing... other life issues' (McCosker 2016, p. 37).

As discussed in the previous chapter, the soup kitchens observed all had links with other organisations that provided assistance to people

experiencing disadvantage. Services two and three provided other goods besides food upon request, such as blankets and beanies (service two) and toiletries (service three). Services one and two operated under organisations that provide other emergency aid, including financial relief and personal advocacy. Service one, through its day centre, provided services from laundry access and showers, to art and sport classes, and medical and social services. One attendee interviewed had been linked with a doctor through service one:

My doctor comes here once a week, but I tend to go to her surgery. So what I do, I ring up my case manager and make an appointment, and she tells me when to come (attendee five).

Another, who lived in a nearby boarding house, had their medication held at service one: 'I do see the district nurse here... when I get my medication, I bring it down here to her and she hangs onto it' (attendee seven). Services two and three both had contacts with government and non-government services, and offered ministry for those who sought it.

There was no indication that people attended soup kitchens specifically to access the other services offered, although many made use of them. The soup kitchen itself was the primary reason for attending, but for some it was an access point to further services. According to the staff and volunteers, especially those who worked in the church's outreach arm, there was some crossover between attendees at service four and the use of the church's

other emergency aid services, but none of the attendees interviewed there had used any of them. Services two and three referred attendees to other organisations providing assistance measures, but also gave out non-food items.

While service one had medical services in its adjoining day centre, including doctors, podiatrists and a district nurse, most of the attendees interviewed, and specifically those on benefits (such as the Aged Pension or the Disability Support Pension), accessed medical treatment elsewhere. Two attendees interviewed regularly saw the district nurse on staff. Another two attendees had social or support workers who they saw regularly. Several of the attendees who slept rough used the day centre for showering, laundry and to store personal items. Attendees of service one who used other facilities had often been referred to the day centre first, and then attended the soup kitchen. In services two, three and four, the soup kitchen had been the focal point, which then became a gateway to further aid through referrals.

7.4. Concerns about soup kitchens

The majority of the interviewees were largely positive about their experiences with the services they attended and with soup kitchens overall. There were, however, three key issues that were identified by staff and volunteers, and, to some extent, by attendees themselves about using such services: religion; safety; and feelings of embarrassment and shame. It was notable that there were few complaints about the quality of food, or the

behaviour of staff or volunteers, in relation to either the kitchens they attended or those they chose not to attend. Of course, it would be difficult to speculate on what prevented people from using soup kitchens at all. Some attendees interviewed did acknowledge that certain issues kept them from attending specific soup kitchens.

7.4.1. Religion

Religion, specifically Christianity, was part of the background of each soup kitchen observed. As discussed previously, the religious element of the services formed the basis from which they operated, and two of the services engaged with the Christian ethos openly in the soup kitchens, although there was no observed evidence of proselytising. Although services three and four said Grace before meals, the religious aspect was not expressly pushed upon the attendees in either, and was not mentioned at all in services one and two.

How attendees engaged with the religious foundation of services varied. One of the attendees interviewed at service four identified as a Catholic. He discovered the service through its church connection: 'I've come to this church before, on a Sunday...' (attendee twelve). Another attendee was not religious but attended the church to sing. Some of the attendees did not engage with the religious aspects evident in the operation and ethos of services, although everybody was observed to be quiet and respectful at both services three and four while Grace was said.

While some coordinators, staff and volunteers raised religion as a concern or potential concern for attendees at services, there was no evidence that any of the attendees had problems with the religious aspect of the soup kitchens. As mentioned previously, one attendee identified as Catholic, and another as Jewish. Attendees happily engaged with ministers at services three and four, and with the nuns and monks who worked on staff at service one. In the confines of this thesis there was no way to determine whether the religious aspect kept people away from the services, outside anecdotal evidence from volunteers and staff, and speculation.

7.4.2. Safety

As noted in the previous chapter, safety was of primary concern for the coordinators and staff of the soup kitchens observed. Violence and conflict were also of concern for the attendees interviewed. Those in services one and two in particular were aware of violence in the soup kitchen environment. This kept some attendees away from specific kitchens known for high levels of conflict:

I like it here but the other ones can be a bit rough. I was always advised never to go [to another city-based soup kitchen]... by a lot of the people who come here, yeah (attendee five).

Older attendees in particular were concerned about the level of violence at city soup kitchens, and avoided a lot of the evening services and the mobile soup runs. One attendee had personal problems with a regular attendee of another soup kitchen, resulting in the two avoiding each other:

I've got an issue with somebody who goes to one of those places and I wanna avoid it becoming more than just a personal issue... one of us is gonna end up going to jail or end up killing the other one, and that's – I wanna avoid that (attendee one).

Another attendee, discussing (but not attending) service two, spoke of violence amongst the Indigenous attendees, and expressed a dislike for attending the particular service.

Despite service four having several violent incidents in its past, attendees interviewed expressed no concerns over the safety of the service, even those who had been attending before safety procedures and the operations of the service had been overhauled. Three attendees interviewed talked about other kitchens being 'rough' or 'rowdy', and they avoided them due to concerns about the behaviour of other attendees. Nonetheless, safety was not a major problem, and for the most part the attendees reported dealing with the threat by avoiding kitchens they knew or had been told were possibly dangerous.

7.4.3. Shame and guilt

In discussing the experiences of people using emergency food services, including (but not limited to) soup kitchens, the literature overwhelmingly reported that attendees expressed feelings of shame and embarrassment (Crawford et al. 2014; Douglas et al. 2015; Fothergill 2003; Frederick &

Goddard 2008; Purdam, Garratt & Esmail 2015). These negative emotions were associated with the alleged stigma of being unable to provide food for oneself, as well as perceived notions and stereotypes of poverty (Douglas et al. 2015; van der Horst, Pascucci & Bol 2014). Lack of choice and the quality of the food, as well as the power imbalance between service users and service providers also contributed to negative emotions (van der Horst, Pascucci & Bol 2014, p. 1515). Stigma and shame were considered to be the 'hidden costs' of using emergency food services (Purdam, Garratt & Esmail 2015, p. 8).

Feelings of embarrassment and shame were reflected on by some of the attendees. One expressed initial embarrassment at attending a soup kitchen: 'Well when I first come here I did [feel embarrassed]. But once you got used to it, it's alright' (attendee five). Another, when asked how they felt about attending a soup kitchen, expressed they were '[n]ot real happy about it' (attendee three). Two others spoke of their discomfort and displeasure about accessing the services. All of these attendees used soup kitchens as their primary source of food, and did not engage on a social level. Those who attended both out of necessity and also for social reasons did not express negative feelings about accessing the service. Those whose involvement was primarily social were positive towards using soup kitchens, particularly at service four. There was no evidence that attendees were made to feel ashamed. Indeed, the staff and volunteers were always observed to be welcoming and respectful to attendees, and as discussed in

the previous chapter, there was a deliberate effort on the part of staff and volunteers to be non-judgmental.

Two attendees expressed feelings of initial guilt about using soup kitchens. One of those attended mostly for social reasons, and was concerned with perceived notions of need:

I felt a bit guilty about coming to a soup kitchen, because it was [for the] homeless, and I'm not homeless, but when I come here, there are other people here, I won't say they're wealthy, I wouldn't say they've got that much money, but I can still see they're in reasonably good shape, and some of them, they look to me they're not poor people here (attendee eight).

Guilt was also expressed by an attendee whose circumstances fit the profile of targeted clientele, and who used the services primarily for reasons of need, rather than social reasons:

How do I feel about it [getting food from soup kitchens]? At the beginning I felt a bit guilty... I felt that I was using up things that should go to people who need them more. [One of the volunteers told me] 'well, when you stop and think about it, you're homeless, you're over sixty and you're hungry – who needs it more than you do?' (attendee one).

Both these expressions of guilt seemed to tie into whether people felt that they needed or deserved help through soup kitchens, which possibly related to any feelings of shame or embarrassment.

7.5. Conclusion

For all attendees, soup kitchens were a relatively stable source of food that filled a gap around being unable to prepare or afford their own meals. Attendance for social reasons was generally more prominent in the suburbs, with more interviewees reporting it as their primary motivation for using soup kitchens, and more attendees were observed interacting for longer periods of time with one another and with staff and volunteers. Access to ancillary services differed as well, although the relationships across geography were less clear here. Service one offered a variety of services in a space next to the soup kitchen, while the other three services had referral systems in place. Many attendees in service one came to the day centre and other services initially, rather than to attend the soup kitchen.

Contrasts were evident in the thoughts and experiences of attendees at the city based (one and two) and suburban (three and four) services. Such contrasts related to social characteristics, and patterns of service use closely correlated to location, rather than the nature of the services as either mobile or fixed. Overall, more men attended soup kitchens, and this was more pronounced in services one and two (as noted in Table 7.1). Suburban attendees were also comparatively younger (between 35 and 40). Services one and two had a higher proportion of people sleeping rough or in insecure

housing, although both services one and four had many attendees who lived in boarding houses. Attendees in the suburbs were generally in insecure or low-income housing.

Despite the concerns of coordinators, staff and volunteers, religion did not appear to be an impediment to attendees. It is difficult to tell whether people did not attend soup kitchens due to their religious foundations or practices. On the other hand, safety was a common concern expressed by attendees, especially at the city services where interviewees discussed it in relation to the soup kitchens observed and in other soup kitchens. It was clear that perceptions of safety influenced decisions to attend or not attend particular soup kitchens. Embarrassment and discomfort were expressed by some attendees, but for most, this was not an ongoing issue. Most of the attendees interviewed were happy or at least comfortable with attending soup kitchens, especially those who engaged socially. While two of the 15 attendees interviewed expressed feelings of guilt over attending soup kitchens, due to their personal situations, they reconciled these feelings quickly, with the support of volunteers and staff.

The final chapter of this thesis brings together all of the previous chapters, summarising the literature from chapters two, three and four, as well as the data presented in chapters six and seven. The chapter discusses the data in light of the literature and provides some conclusions about the nature of the modern soup kitchen, including a more nuanced definition.

Chapter 8

Continuity and change

8.1. Introduction

This chapter summarises the literature concerning welfare, disadvantage and charity, as well as the field research conducted for this thesis. It situates the soup kitchen model within the context of the welfare state and the third sector. It provides a discussion of how the research broadens the understanding of soup kitchens beyond the limitations of the existing literature, and explores further avenues for research and the next evolutionary phases for soup kitchens. The chapter concludes with a consideration of why soup kitchens have continued to survive as a unique service in the third sector.

The previous two chapters explored the different perspectives of those who work in soup kitchens (the coordinators, staff and volunteers) and the attendees in relation to the nature and evolution of the services. It is apparent from the data that while the modern soup kitchen has maintained the basic model of providing food free (or at a nominal charge), there has been a constant evolution behind the scenes. As explored in this chapter, there has been a deliberate attempt by coordinators and staff to ensure stability and consistency for attendees at soup kitchens. In doing so, the services have managed to avoid moves toward conditionality and individualisation that have characterised the third sector in the 21st century.

8.2. The literature

The international and Australian literature on soup kitchens is limited. There are very few comprehensive studies on how they operate. The extant literature generally places soup kitchens within the context of the expanding and professionalising third sector, trends relating to the outsourcing of government welfare to private entities and the rise of a more managerial way of providing services (Fairbrother, Svensen & Teicher 1997; Nicholls 2014; van Gramberg & Bassett 2005). Soup kitchens are both a product of, and the antithesis to, neoliberalism. Despite being part of the third sector, they are services that require no identification or proof of entitlement on behalf of those attending (Johnsen, Cloke & May 2005, p. 324). This puts them at odds with the movement towards so-called 'workfare' or mutual obligation that characterises the neoliberal approach to welfare (Jessop 2002; Morris, A & Wilson 2014; Peck 2001). The neoliberal view of traditional welfare is that it is passive, and dependence-forming for those who use it (Argy 2003; Shaver 2002). Neoliberalism has helped foster an individualist view of poverty, with the poor being seen as morally deficient or deviant, and employment the only way to correct these failings (Manning 1998; Mendes 2009; Peck 2001).

Neoliberalism has also forced the third sector to professionalise, basically requiring not-for-profit organisations to mimic the corporate sector in order to attract funding (Carey, Braunack-Mayer & Barraket 2009; Considine 2003; Hwang & Powell 2009). Again, this is a change that, on the face of it, soup kitchens have resisted; particularly in Australia, where they receive

little to no government funding (McCosker 2016; Sanders 2013). Today soup kitchens generally seek funding from businesses and private citizens, requiring a certain level of corporatisation, marketing and brand recognition to attract donors (Hwang & Powell 2009; Maier, Meyer & Steinbereithner 2016). While at the user level soup kitchens have not altered their core service model, as the field observations indicate, there has been significant professionalisation at the management level (discussed further below), partly in response to external pressures.

Soup kitchens are targeted to specific populations. They exist to provide food to people who are unable to store or prepare their own, such as those living on the street or in insecure or temporary accommodation (Dachner et al. 2009; Wicks, Trevena & Quine 2006). The literature, however, points to an expansion in their reach, to those who are housed but unemployed or underemployed, particularly people undertaking seasonal work. There has also been an increase in their use by families, particularly female single-parent households (Biggerstaff, McGrath Morris & Nichols-Casebolt 2002, p. 269; Ford, JD et al. 2013, p. 5). Moreover, there is an element of interpersonal interaction in soup kitchens that has attracted people experiencing social isolation or social exclusion (Glasser 1988, pp. 69-85; Mulquin, Siaens & Wodon 2000, pp. 260-264; Poppendieck 1994, p. 72). According to the literature, soup kitchens provide three interrelated services: they provide meals for people who are unable to prepare or store their own food; they help people experiencing financial disadvantage make

ends meet by freeing up resources; and they provide a measure of social interaction for those who are experiencing social isolation.

Although a part of the emergency food service sector, soup kitchens have evolved differently from their more contemporary counterparts, such as food banks and food pantries. As well as the move towards professionalism, third sector organisations have also become increasingly focussed on individualisation and choice in providing goods and services, away from standardised models. In the emergency food service sector, this can be seen particularly with food pantries, which have evolved from the provision of a standard set of grocery foods to a supermarket style system, where users select food from available items up to a particular value (Martin, KS et al. 2016; Martin, KS et al. 2013; Remley, Kaiser & Osso 2013). Soup kitchens have not followed this model, although similar food services have emerged with more choices, including community cafés which provide cheap meals and are generally run by churches or community groups, such as Adelaide's Side Gate Café (Marion Church of Christ 2016). There has also been a move towards subsidised café and restaurant meals, through programmes such as Geelong's Café Meals Club (in Victoria), which provides a 'loyalty card' system to insecurely housed youth that allows them access to cheap meals at participating food outlets (Barwon Child Youth & Family 2016). While taking food charity and food service in interesting directions, such initiatives are outside the soup kitchen model.

Soup kitchens have several problematic aspects that have been highlighted by the literature. First, the services are seen as primarily supply driven, being highly dependent on, and shaped by, their ability to source people, food and money (Frederick & Goddard 2008; Johnsen, Cloke & May 2005; Poppendieck 1994; Tarasuk & Eakin 2003; Wakefield et al. 2012). This makes them inherently insecure, perhaps more than other forms of charitable provision (Poppendieck 1998). Second, the lack of choice in food means that soup kitchen attendees are given what is available, and what can be sourced by staff and volunteers, rather than what they may want or need (Ford, J, Lardeau & Vanderbilt 2012; Friesen, Spangler & Altman 2009). Third, soup kitchens, and related emergency food services, have a reputation for being humiliating and disempowering for people already suffering multiple and complex disadvantage (Berg 2008; Douglas et al. 2015; Johnsen, Cloke & May 2005; Lane & Power 2009; Lindberg, Lawrence & Caraher 2016; Poppendieck 1998). Finally, there is a strong criticism that soup kitchens, and emergency food services generally, detract from the important work of advocacy and the pursuit of social justice (Berg 2008; DiFazio 2006; Poppendieck 1994). However, as domestic hunger advocate Joel Berg points out, charity may not be the distraction it is thought to be, as '[o]ften the personality and attitude of a charitable service provider is very different from that of a policy advocate' (2008, p. 207).

From the literature it seems that soup kitchens occupy an unusual space in the third sector. In some ways they are old-fashioned organisations that have not evolved in quite the same ways and to the same extent as other

charities. From the field observations, however, it is clear that soup kitchens have not been immune to the changes in charitable service provision. While evolving in different ways from other charitable endeavours, soup kitchens have nonetheless grown over time, whilst also managing to maintain their fundamental essence. They are also more resilient, and more client-focussed than the literature acknowledges. This retention of the core business of soup kitchens has not been by accident.

8.3. Field results

The field observation and interviews with 15 attendees and 19 staff, volunteers and coordinators highlighted several key themes in the study of soup kitchens. In particular, the results revealed differing attitudes between service providers and attendees in relation to: the quality of the food served; the role of religion in soup kitchens; the social role of soup kitchens; other services provided by, or through, soup kitchens; and safety. The results also revealed the differences between fixed soup kitchens and mobile soup runs, as well as the differences between city-based services and those in the suburbs.

The supply of food clearly remains an important element of soup kitchens. While this may seem like a self-evident statement, the importance of the food in soup kitchens cannot be overstated. Food was one of the primary reasons for attendance. Several attendees expressed food preference as reasons for attendance or non-attendance at specific soup kitchens. For volunteers and staff, the quality of the food served was important, with most

benchmarking appropriateness by whether they would eat it themselves (which many of the volunteers did). Choice was limited, but concessions were made for those with dietary or religious needs. Although not the only reason for people attending services, food was a lure for those who might otherwise not engage with more formal charitable or welfare services. As Benjamin and Farmer-Bowers (2013, p. 145, original emphasis) argue, attendees ‘may *need* support and counselling, but they *come* for the food’.

Nutrition, suitability and food quality were important considerations for the coordinators and staff of the soup kitchens observed. For the most part, changes in the type of food available (with regards to nutrition especially) appear to be unnoticed by attendees, but were an important contribution to the evolution of soup kitchens. Staff and coordinators were concerned that attendees were not provided with (nor should they expect) inferior products simply because they were receiving food for free (or at a nominal charge). If anything, their inability to source food elsewhere made nutrition and quality more important, as coordinators and staff were acutely aware that this was one of the only places some attendees would be getting food that was healthy or sufficiently filling.

For volunteers, staff and coordinators, religion was an important, and sometimes controversial, underpinning of the soup kitchens observed. All four of the soup kitchens had originally been overseen by churches, and Christianity was still a primary motivator for services three and four. Not all of the staff and coordinators agreed on the place of religion in the services

observed. Some sought to move away from such a focus. There was a feeling among some staff that the religious affiliation of the services kept some potential attendees away. For others, religion was an integral part of the services, with spreading the word of God through the provision of food their guiding purpose. Service three formed as a result of a division between volunteers and religion in another soup kitchen. There was a concerted effort across all four soup kitchens (but particularly in services three and four) to not let the religious foundations of services overshadow the primary purpose of the soup kitchens. It was important for staff and coordinators to avoid alienating attendees by proselytising.

Some of the volunteers formally interviewed, involved in informal discussions with the researcher and observed had religious backgrounds (specifically Christian), and this informed their decision to undertake soup kitchen work. The volunteers of service four had, until their re-opening (as discussed in chapter six) been sourced entirely from the overseeing church. Good witness and the expression of God's love through food were common motivators for volunteering among those assisting in services. For some volunteers, their involvement in kitchens was more about religious expression and compassion than it was about alleviating hunger. One coordinator felt that it didn't matter how much in need the attendees really were, because the religious aspect of this service was the important issue. While most volunteers spoke of empathy and wanting to help people in need, many also had religious backgrounds which seemingly guided their approach to volunteering and their reasons for undertaking soup kitchen

work. Attendees did not express concern with the religious aspects of soup kitchens. They were not directly asked about their religious beliefs or their views on the religious foundations of the soup kitchens. In the context of the field research it could not be determined if religion kept people from attending soup kitchens.

Social interaction was an important feature of the soup kitchens observed. For many volunteers, staff and coordinators, it was as significant as the provision of food. Within soup kitchens social interaction was both facilitated and supported by a focus on safety and security, as well as visibility and support for attendees. Coordinators and staff felt that soup kitchens were a place for attendees to be seen and recognised, and to feel that they could have connections with others in a relatively comfortable environment. This made it a very different type of service from most charitable organisations, as the main interaction was between attendees, rather than attendees interacting with volunteers or staff. There was, however, an effort by volunteers to interact with attendees, and service four in particular had a minister with mental health training whose role was to do this by spending time one-on-one with attendees.

The social side of the services was equally important for volunteers. They interacted with one another, and made friends. They also spent time talking to attendees, and in doing so learned a great deal about the lives of the people who attended soup kitchens, gaining insight into lifestyles they didn't previously understand. There was a limit to this interaction though –

volunteers were encouraged to talk to attendees, but their relationships remained professional. There was still a clear divide between the volunteers and attendees, shown not only through interaction, but with volunteers often working from behind tables or benches, physically separated from the attendees.

Attendees were divided on the issue of the social role of services. Some rejected the notion that they attended soup kitchens for social reasons. One interviewee in particular was insulted by the idea that they simply attended socially (as discussed in chapter seven). There was a strong association between being ashamed or embarrassed about attending soup kitchens and the rejection of the social aspects. For some it was simply that they did not want to associate with the kinds of people attending soup kitchens. This was particularly noticeable in service one. Other attendees were more positive about the social experience offered through soup kitchens. In service four in particular, many attendees came to that service more for social reasons than the actual need for food. The two were often linked though, with most experiencing a combination of low socio-economic status and social isolation. Such attendees went to soup kitchens primarily for social interaction, but they also possibly lacked the funds to undertake more expensive forms of interaction, for example joining clubs, or simply being able to eat in a café or restaurant with others.

The provision of additional assistance as part of the role of soup kitchens added another dimension to the role of the modern soup kitchen. As well as

providing food and social interaction, all of the services observed provided, or linked attendees to, other forms of assistance. Service one physically adjoined a day centre, allowing easy access to further services, while services two and three gave out extra items – blankets and beanies, and toiletries and swags respectively – and service three linked attendees in with other emergency services through the outreach arm of their overseeing church. Staff and coordinators noted that they are always searching for further assistance that can be provided to attendees. There was a feeling among staff and coordinators that it was not enough just to provide food for attendees without attempting to influence their lives in a positive way. This social justice aspect of soup kitchens was an interesting one – staff and coordinators, as well as many of the volunteers, expressed frustration with the lack of government services or solutions for the problems facing attendees. While endeavouring to help attendees fill such gaps through service linkage, there was an awareness that many issues faced by attendees were not being adequately addressed.

Ancillary goods and services provided by and through soup kitchens were targeted towards actual and presumed attendees, and some existed due to needs identified through discussions with attendees. The soup kitchen – as a non-judgmental and informal space – allowed staff and volunteers to come into contact with people who may not otherwise seek help from formal services. They could help link them with relevant organisations for housing, financial or other assistance. Attendees observed and interviewed used a variety of other assistance measures linked with the soup kitchens. This

was most obvious in service one, due to the adjoining day centre. In that case many attendees accessed the assistance provided by the day centre first and the soup kitchen incidentally. Attendees experiencing social isolation, especially in service four, were less likely to be using linked-in assistance.

Safety was an issue of primary concern for staff and coordinators. It fell to them to ensure that the soup kitchens were safe places for volunteers and attendees. They dealt with regulatory compliance and were aware of the key issues around safety. It was an ongoing issue for this group to manage and the risks posed by the complex needs of attendees were front of mind. Volunteers at the services studied, while aware of the risks, did not express fear or anxiety around safety. They were confident that any issues would be dealt with swiftly by staff/coordinators. Services one and four had a series of procedures in place for dealing with confrontation or violence, and, as fixed services, they were able to control their environment better than the mobile soup runs. Services two and three were more concerned about their inability to control situations (service two in particular) and had emergency procedures to leave the service area if violence were to occur.

Violence was of concern to attendees, and informed the choices they made about which soup kitchens they attended. Attendees generally reported feeling safe at the services observed, although many also identified soup kitchens which they actively avoided. Those who attended multiple soup kitchens reported more violence (and concerns about violence), and were

generally people who sourced food through the services by necessity. People who only attended one soup kitchen (rather than using multiple services) were less concerned about safety issues, although those people tended to attend primarily for social reasons.

The issues identified in the field observation demonstrated the differences between the mobile and the fixed soup kitchens in relation to safety, ability to control their environment and influences on who attended and what was served. While all had dedicated serving areas, the fixed kitchens had far more control over who entered the service area, when and how. Both service one and service four had designated entry areas for attendees, and had people who monitored entry. The open nature of mobile runs made potential incidences of violence more difficult to manage, and volunteers were advised how to protect themselves as the ultimate priority. While the mobile services allowed more flexibility and were perhaps less intimidating, the fixed services provided a safer and more controlled environment. Arguably, this made the fixed venues a lot safer than the mobile soup runs for staff, volunteers and attendees.

Another way in which mobile and fixed services differed was in relation to the food they were able to serve. While also reflecting the philosophies of the separate services, the difference in the quality and nutritional value of food between the fixed and mobile kitchens could also be related to the mobile kitchens' need to transport food to a service area. Staff and volunteers were limited in what they could make, serve and transport and

needed to have food that could be pre-prepared and stored. This may have precluded them from making the more elaborate meals that the fixed services provided. With their service and preparation area in the same place, the fixed kitchens were able to prepare and serve the meals contemporaneously, as well as compensate for any shortages.

Despite their ability to serve better quality food and control their environments, the fixed soup kitchens were not accessible to everyone. The mobile soup runs were able to target specific areas, such as where rough sleepers congregated or lower socio-economic suburbs, rather than being bound by the site where food was prepared. None of the services studied moved around to different locations. While service one had a dedicated soup kitchen specifically built adjoining a day centre, service four was located in a church, utilising an area that had been built for a café. Staff and coordinators noted that this location was problematic, and felt that being located in a church kept some potential attendees away. Service three had, briefly, moved their location to the preparation area in a church café but experienced a marked decrease in attendance. They attributed this to the service being based in a church. There was an increase in attendance when they moved back to their original service area (although this was also outside a church, as noted in chapter six, the attendees did not view it as such).

The fixed kitchens were able to provide more in the way of extended social services, although service one was uniquely attached to a day centre,

significantly bolstering its ability to provide a range of services to attendees of the co-located soup kitchen. The atmosphere with the fixed services was much more café-style, with attendees able to be seated, and in the case of service one, be served at tables. Additionally, the fixed kitchens had the advantage of being able to store excess food and reduce wastage by utilising any leftovers. During the observation period service three, a mobile run, was seen struggling to give away excess food that could not be taken back to the kitchen and stored.

Another contrast between the four kitchens was a product of geography: there were substantial differences between the city-based and suburban kitchens. Services one and two – a fixed and mobile kitchen respectively – were located in the Adelaide CBD. Services three and four – a mobile run, and a fixed soup kitchen – were located in suburban areas. Differences in attendee characteristics existed despite the different types of services they were.

The city locations had a higher proportion of attendees who were experiencing primary or secondary homelessness – either sleeping rough or living in insecure accommodation such as boarding houses (as noted in Table 7.1). From the interviews conducted more attendees frequented these kitchens out of a need for food, rather than for social reasons. There were more men attending the city services, and more single people. Attendees were also older, and there was a higher population of Indigenous

people attending. This was more noticeable in service two, but was also noted occasionally in service one.

By contrast, the suburban services had a higher proportion of people who were living in low-income housing. Service four had several people living in local boarding houses, and service three had a small number of people sleeping rough who regularly attended – according to staff and volunteers, around five to six, although none of the attendees formally interviewed at the service were sleeping rough. More women also attended the suburban locations, and more families with children. Attendees at the suburban kitchens were more likely to be socially isolated (as discussed in the previous chapter) and attending services for social reasons, rather than *needing* food. Arguably, it can be deduced that attendance (and the characteristics of attendees) was strongly linked to the location of the soup kitchen, rather than whether it was a fixed or mobile service. This difference was particularly noticeable between services two and three, which were both mobile kitchens that operated several nights a week, but had very different attendees in terms of their social characteristics.

8.4. Discussion

The field investigations for this dissertation reveal major gaps in the scant literature on soup kitchens. Fundamentally, soup kitchens need to be considered separately from the broader emergency food sector, as they are unique in their model and operation. Several key observations can be drawn from the field research. The lessons and conclusions presented here are

based on a small qualitative study in a relatively small city, and as such have their limitations. They do, however, begin to provide a more complete picture of the modern soup kitchen, broadening our understanding of such services by providing evidence regarding the challenges such services face. Importantly, the research did this by taking a multi-perspective view of the services.

Several conclusions about soup kitchens can be drawn from the field research. Soup kitchens are insecure, but also resilient and creative in compensating for shortages in volunteer labour, food sources and income streams. They offer limited choice at the individual level, but at the service and sector levels are adaptive and respond to broad, long-term changes in the need for aid. While it is claimed that attending soup kitchens can be humiliating and disempowering for attendees, the services can also create safe, non-judgmental spaces for attendees to interact with others. Soup kitchens encouraged advocacy by bringing volunteers and staff into contact with people experiencing disadvantage and with complex needs. While soup kitchens have professionalised internally, they have deliberately maintained an informal front for attendees.

As the literature suggests, soup kitchens suffer from issues of insecurity in food, money, and people. This is especially true in Australia, where government funding is not provided (Sanders 2013). None of the services observed received government funding although some, like service one, received government grants for projects linked with the overseeing

organisation. The four services studied were dependent on volunteer labour, corporate, philanthropic and personal donations, and, to an extent, donated food. All four services were, however, able to make up for any shortfalls. Service three had issues maintaining a steady volunteer force, but at the time of the observation was recruiting corporate volunteers from a real estate company with links to one of the overseeing churches. Service four historically had issues with a limited church-based labour force, but was able to convince their overseeing church to open roles up for non-church members. Services three and four sourced a significant volunteer base from local businesses by way of corporate volunteering. The shift to sourcing volunteers from local businesses and the corporate sector was a recent trend for services three and four, while service one had a longer history of corporate volunteering.

While two of the services observed relied almost entirely on donated food, all of the soup kitchens required cash donations to cover costs. For services one and three, this included money to purchase a substantial proportion of their food. Three of the four services had a variety of funding streams to purchase food or pay for other expenses, and service one in particular put considerable effort into fundraising. While coordinators and staff oversaw most of the management issues around funding, volunteers, and in some cases, attendees, helped link the services to new sources of food and money.

None of the services suffered a debilitating lack of money, labour power or food. Services two and three had excess food at the end of their shifts, and service one had a waiting list for volunteers. People were willing to give time, money and food to all four of the organisations, and, anecdotally, the organisations had the luxury of choosing preferred donors. One of the key coordinators of service four was able to turn down unsuitable food from one bakery and source another for more appropriate goods. These changes were not without difficulty, or risk, but all of the services observed were able to find new donors and volunteers when they needed to.

All four soup kitchens provided limited choices for attendees in terms of food. Those that depended on donated food provided what they were given, which limited their ability to offer a variety of foods to their attendees. Services that purchased their food created specific meals – in the case of service three, there was a set menu that was duplicated weekly, with some minor variations. Service one had the most variety in their food, with the menu changed daily. Considering the impacts for individual attendees however, there was standardisation, with some scope to remove unwanted ingredients due to preference, or for dietary or religious reasons. Service four had several attendees who were vegetarian, and the volunteers and staff had non-meat meals in storage in case they were requested. Attendees at service one commented that volunteers and staff were happy to provide slightly modified meals upon request.

In a broader sense, services one and four both responded to the needs of attendees in terms of nutrition, and general preferences. Volunteers and staff of services two and three were aware of nutritional issues around their food, but responded mostly to the preferences of attendees. In an informal conversation one of the coordinators of service three indicated that she made vegetable soup, as a more nutritious alternative to what was served, but it was unpopular among attendees, so she stopped serving it. Services one and four were more successful in providing nutritional meals, despite some initial backlash, particularly in service four. Service one participated in a study conducted by several university students looking at the nutritional content of their food, and responded with a focus on fruits and vegetables in their meals. Likewise, service four removed cakes from their initial menu, replacing it with fruit salad. There was no indication that attendees requested these changes, but there was a broad sense that nutrition was important to them. There was however a paternalistic edge to the ways in which services (one and four in particular) chose the food to serve.

A sense of paternalism forms part of the problem inherent in soup kitchens, with shame and embarrassment coming from the desperation of attendees and lack of choice offered (Berg 2008; DiFazio 2006; Poppendieck 1998). Attendees expressed some initial shame and embarrassment at attending the soup kitchens observed, but generally did not hold onto such feelings in the longer-term. Those who had used the services for a longer period were generally comfortable, and were made to feel that way by staff and volunteers. While the need to access soup kitchens was a shameful

experience for some, this was not deliberate on the part of the services, and efforts were made to combat this feeling. Volunteers spoke of dignity and of recognition, and they saw soup kitchens as a place where attendees could feel that they mattered.

The modern soup kitchen, particularly in its fixed form, seeks to create a safe space for attendees, to allow them to interact without shame around their behaviours or situation. How these aims were met by the mobile soup runs was less clear, but attendees were never made to feel ashamed for attending, and the atmosphere was welcoming. What is unique about soup kitchens, and was demonstrated in all of the services, is the lack of personal information required by the service for a client to seek aid. Attendees were not asked to provide their names, or any proof of need or 'entitlement'. Volunteers and staff approached individual attendees and sought information casually, only as a way of getting to know them. Failure by attendees to provide information or engage with volunteers was never a barrier to getting food. The relationship between attendees and volunteers/staff was informal – attendees were not pressured to provide information about themselves. If they were known to volunteers or staff as regulars, they were greeted warmly. Volunteers and staff often made an effort to know small details about regular attendees, such as which football team they followed, or what hobbies or interests they might have. In addition, they made a conscious effort to not judge attendees, or speculate on whether they were in genuine need.

One of the more political arguments against soup kitchens, advanced in particular by sociologist Janet Poppendieck, is that such services, and related emergency food services, distract from advocacy to end food insecurity and inequality (1994, p. 74). This is a point of view that is not without its critics, with hunger advocate Joel Berg arguing the value of such services as a political tool: 'millions of Americans, most of whom are *not* low-income, volunteer at pantries and kitchen nationwide, [and] they are able to learn about poverty firsthand' (emphasis in original) (2008, p. 207). There are two competing ideas here: first, that soup kitchens are seen to be a 'stop-gap' measure that prevents people from undertaking food and hunger advocacy; and second, that soup kitchens make poverty visible to those who are not experiencing it.

Among the coordinators, staff and volunteers of the services observed, there was frustration around the lack of government help for many attendees, particularly those who were sleeping rough. Many of these frustrations were shared by the volunteers. However, none of the staff or volunteers were engaged in advocacy, and there was no overt evidence that they would be if they were not volunteering or working for a soup kitchen. There was, however, a sense that many of them understood poverty better due to their work, and had developed more empathy for the plight of the attendees. Most of the 19 volunteers and staff interviewed had never experienced poverty, and had learned much from their role in the soup kitchen.

In some ways the observations contained in this dissertation accorded with those of the soup kitchen literature. There was evidence that the nature of soup kitchens had not, on the face of it, changed substantially. But behind the scenes there has been an evolution occurring that has not been captured in the literature, happening at the managerial level specifically. Soup kitchens are, in their operations, becoming more professional, as they navigate increased red tape and bureaucratic requirements, but there has also been a conscious effort on the part of those running the services to keep professionalisation from interfering in the day-to-day activities of the kitchens. From the field observations it was apparent that there is a hierarchy of change in soup kitchens that has allowed the model to continue, unchanged at its core.

8.4.1. Revisiting how soup kitchens are defined

Before considering their evolution and issues of hierarchy, it is worth revisiting the definition of soup kitchens in light of the field data. The definition of soup kitchens synthesised from the limited literature – and presented earlier in this thesis – contains four key elements. Such services:

- are run by charitable, not-for-profit or community based organisations;
- serve pre-prepared meals, hot or cold (to be consumed on the premises, or to be taken away);
- provide food for free or for a nominal charge; and
- make their food available to the general public.

These four elements are basic and practical in nature, framing the model so that soup kitchens can be identified and studied. The elements are drawn out of several different streams of academic study: broad political and social studies of the emergency food sector (Berg 2008; DiFazio 2006; Poppendieck 1998); ethnographic studies of single soup kitchens (Dachner et al. 2009; Glasser 1988); nutritional and medical studies of soup kitchen populations (Eppich & Fernandez 2004; Nwakeze et al. 2003; Rosenblum et al. 2005; Sisson & Lown 2011); and those more broadly focussed on the needs and backgrounds of attendees (Miller, Creswell & Olander 1998; Wicks, Trevena & Quine 2006). While the definition presented at the beginning of this thesis is adequate for locating and identifying soup kitchens, it does not provide a real insight into the working model that is the modern soup kitchen.

A key contribution to original knowledge from this thesis is a much more definitive and nuanced understanding of the 21st century soup kitchen model. This understanding is informed by the evidence and conversations in the limited extant literature around such services, but more importantly from the evidence base this research has generated from the field research undertaken. From the insights gained by observation and interviewing coordinators, staff, volunteers and attendees, a more comprehensive and holistic view of the modern soup kitchen has emerged. The modern soup kitchen, therefore, is a service that:

- is operated by a charitable, not-for-profit or community based organisation (*or several such organisations in conjunction with one another*);
- *provides a space for social interaction and visibility for attendees;*
- serves pre-prepared meals (for free, or for a nominal charge) *and, increasingly, provides ancillary goods (such as toiletries, blankets et cetera)*;
- *creates a pathway for attendees to access other assistance (through referrals and advocacy); and*
- makes its food available to the general public, *by maintaining an 'open door' policy that does not require attendees to provide proof of entitlement or need.*

The new elements (italicised above) are significant in understanding the evolution and resilience of soup kitchens in the 21st century.

From the field observations it is apparent that soup kitchens are a collective effort, both in terms of individuals working within an institutional framework, but also with organisations pooling resources to operate a service together. Service three consisted of three different church organisations that worked together to oversee the soup kitchen (as shown in Table 6.3). It should also be noted that soup kitchens rely heavily on help from outside organisations such as businesses, which are invaluable sources of food, money and labour power for soup kitchens.

As well as providing food, soup kitchens are also a place for attendees – many of whom experience social isolation and marginalisation – to spend time with other people and potentially to form social connections. The data collected for this thesis show that many attendees use soup kitchens as points of interaction with others. Coordinators, staff and volunteers recognised and praised the positive impacts of the soup kitchen environment for social interaction and in the creation of community. Soup kitchens were seen as a way to combat not only isolation, but also violence among attendees who recognised one another outside the soup kitchen environment.

The third new element introduced to the soup kitchen model is the increasing tendency for these services to provide goods beyond pre-prepared meals. Services one and four both offered take away food such as vegetables (service four) and canned or packaged items (service one). Service two provided blankets and beanies on request, and service three regularly gave attendees toiletry packs. In each of these cases, service coordinators and staff identified the needs of their attendees and sourced extra goods accordingly.

Another way that services are increasingly responding to the needs of their attendees is by creating pathways to additional assistance. This was well established in service one through their day centre, and service four with the outreach arm of their overseeing church. Informal pathways were provided in services two and three. In service three, there was burgeoning

interest in linking attendees with further assistance. Links to other organisations and assistance are evidently becoming more important as soup kitchens professionalise. This can be seen, for example, with service three, which at the time of observation was looking to expand its service times and provide more services and links as part of reaching more people to provide a wider range of services.

The final new element of the soup kitchen model is that attendees do not need to prove need or entitlement. While the literature establishes that soup kitchens are open to the general public, the field data reveals that there has been a deliberate attempt on the part of the coordinators of services to ensure that conditions are not imposed upon attendees. Lack of conditions were seen to make soup kitchens more welcoming and less intimidating for attendees, and to remove distinctions between people deemed 'deserving' and 'undeserving' of aid.

Together, the new definition captures the nuances around services that have evolved, become more formal and professionalised, while maintaining at their core three key attributes that make it appealing to attendees: the provision of food, the creation of a space for social interaction, and linkage to other assistance.

8.4.2. Hierarchy in the evolution of soup kitchens

There are three levels at which soup kitchens have evolved. At the top level are the coordinators. These people may be employed specifically to

coordinate (such as the head cook of service one), or undertake their role as part of a broader portfolio of responsibilities in their positions within the parent organisations overseeing soup kitchens (such as one of the coordinators of service three). Some long-term volunteers with services may also take on coordinator roles (such as one of the volunteers of service four who was given a role as a team leader). Not all paid staff, however, assume coordinator roles – the ministers at services three and four, for example, provided counsel, but did not manage volunteers or donations.

Coordinators (whether paid or involved in the service as volunteers) are the key actors in the soup kitchens. They make the main decisions about the services, logistics and scope of the activities undertaken. They are also the intermediaries between the soup kitchens and their overseeing organisations. At the middle level are the volunteers, who work at the coal face. Their jobs are usually routine and well defined. Volunteers may have some input into the workings of the soup kitchen, but are only largely involved in the day-to-day routines of the services. At the third level are the attendees, the people who use the soup kitchens. They are the reason for the existence of the services, and the structure of the kitchens are, to some extent, built around them. Each of these levels has evolved in different ways and to different degrees.

At the coordinator level, soup kitchens have changed significantly. There has been an increase in skills and professionalism required for those who manage such services. In services one and four, their overseeing (parent)

organisations, with some help from existing coordinators, had actively sought people with specific skills – including restaurant experience in one service and mental health training in another – to work in a full-time capacity in their kitchens. The role of the coordinators has expanded, from overseeing food preparation and the volunteers, to organising first-aid, food safety and mental health training, as well as coordinating volunteer roles, ensuring that paperwork is completed and that proper procedures are instituted and followed.

Alongside the trends discussed above, it is pertinent to note that there has been a move towards streamlining the way soup kitchens operate, with coordinators responsible for ensuring that all volunteers involved with the services are able to perform their jobs; that there is adequate food; and that food service is fast and efficient. It is the people at this coordinator level who find the majority of the new donors, organise replacement funding streams when others dry up, make connections with supermarkets, bakeries, food banks, *et cetera*. Coordinators are also the source of the majority of new initiatives within, or aligned with, the services. The key coordinator of service four, for example, organised mental health training for volunteers. The coordinator of service four and the head cook of service one both responded to nutritional issues in the food served, sourcing healthier alternatives to that which was being provided. One of the coordinators of service three organised distribution of the ‘street swag’ kits for people experiencing homelessness. These people – the top of the hierarchy – are both effecting and affected by change. They are the key drivers keeping the soup kitchens

constant in the face of change, and relevant in a neoliberalised social support sector.

At the middle level, the role of volunteers has both expanded and narrowed. It has expanded in the sense that volunteers now need to be aware of more – food safety, mental health issues and first-aid are all expectations that have been placed upon them. Training was provided for volunteers in the four services observed, and they were given information to guide them in their behaviour. While their skill sets have expanded, volunteers have been given a more regulated set of tasks, as a more rigid safety and compliance focussed system of operation is imposed. In service one, volunteers were assigned tasks by the head cook, relieving them of most of the decision making. In this way, the roles of volunteers have narrowed; away from the decisions around what food to serve and resource management, to undertaking set tasks.

Despite the changes in their responsibilities, volunteers conducted their tasks with enthusiasm, and all expressed similar reasons for working in soup kitchens. The values of good witness and human empathy – and the understanding that they could one day be in the same position as attendees – were explicit and implicit in their reasons for volunteering. Although their tasks were more regulated than those of the coordinators, the volunteers could also be drivers of change, providing links with new donors, seeking out friends to also volunteer with services and offering advice to volunteers, staff and coordinators. Volunteers saw their work as easy and routine,

perhaps with the exception of interpersonal interactions with attendees. The change in their roles over time has been less noticeable for volunteers, partly due to the effort of coordinators to not overburden them.

At the attendee level, very little has changed, and deliberately so. People attend soup kitchens and are given a meal for free (or at nominal charge), as well as a chance to interact socially and the potential for links to other support organisations. They may have other things available to them – toiletries, spiritual counsel, blankets – and the volunteers or other attendees may change, but the core service continues. There remains no need to provide personal information, no proof of need, no specific tasks to undertake to ‘earn’ their meal. They may feel able to ask for their meal to be slightly different to everyone else’s, and they may be treated better by staff and volunteers than they have in the past. For longer-term attendees, the change is barely noticeable. Their needs are met, as they have always been.

8.4.3. What is different about Adelaide soup kitchens?

As discussed above, there are several key differences between the existing literature and the results of the field study, as well as some consistencies. There may be several reasons for these differences. The literature on soup kitchens is limited; much of the discussion centres on the emergency food sector as a whole, with such studies encompassing soup kitchens, food banks, and food pantries. Consequently, the system is taken as being relatively homogenous, which it is not. As has been discussed in the latter

half of this thesis, soup kitchens are unique in the emergency food service system. They offer social interaction along with food, as well as having no requirements for entry. On the other hand, some of the ethnographic studies consider soup kitchens alone, but do not place the services within the broader context of emergency food, charity, or welfare. The services need to be considered separately, but with reference to the broader systems that inform and alter them.

One of the key reasons for the differences between the soup kitchen literature and the outcomes of the field research may also be the differences in the welfare systems they sit within, particularly differences between the United States and Australia. As discussed in chapter two, Australia has a unique welfare system, the so-called wage earners' welfare state (Castles 1994, 1997). This system has seen tight regulation of the minimum wage, superannuation, and other entitlements (Castles 1997; Fenna 2015; Wilson, S et al. 2013). The deregulation and neoliberalisation of the welfare system has not been to the same extent as in the United States, and Australia is still, in many respects, a welfare state (Fenna & Tapper 2012; Wilson, S et al. 2013). What this means is that there are fewer people attending soup kitchens in South Australia who fit into the category of 'working poor', a key group attending services in the United States. In the field observation this category was quite small, compared especially with the proportion on government benefits.

The final key difference between the literature and the field observations is related to time. The majority of the robust literature on soup kitchens emerged from the late 1980s to the early 1990s. As has been discussed in chapter four, the third sector has changed considerably since the 1980s. In the United States, the era during which soup kitchens expanded coincided with the rise of welfare, although the latter was not widespread until the late 1990s (Handler 2004, p. 230; Peck 2001, p. 9). The spread of welfare, as well as the transformation of the third sector in Australia (and abroad) has had a significant impact on the operation of soup kitchens, influencing the challenges they have faced in sourcing food, volunteers and donors. Economic, cultural and social changes have altered the backgrounds of attendees as well.

8.5. Future directions

What is the future for soup kitchens? There is no indication that the model is struggling, failing or likely to disappear – quite the opposite. Soup kitchens, however, are not immune to the impact of external changes in the service environment and the environment in which they operate. Consequently, there are several possibilities for the future of such services. The way in which the services operate will continue to be shaped by: the changing social characteristics of attendees; changes in the philosophies of coordinators and parent organisations, and the ethos of volunteers of soup kitchens; the shift to individualisation and consumer choice in welfare and the third sector; an increased focus on health and nutrition; and changes in the ways in which food is sourced for soup kitchens.

Demographic changes will, to some extent, change the way in which soup kitchens operate. It was notable in the field observations that staff and coordinators made decisions around food partly based on the actual or presumed needs of clientele. Australia, like many developed nations, has an ageing population (Productivity Commission 2013, p. 61), and this is going to have an impact on the demographic structure of soup kitchen attendees, with a likely increase in older people using services. An increase in older attendees has the potential to change the food served, with services needing to cater to changes in nutritional demands as well as practical considerations, such as dental issues, diabetes, *et cetera*. These impacts were discussed by some staff and coordinators during interviews and observations. Changes in the ethnic and religious backgrounds of the population will also alter the mix of attendees, and more requests or needs will be based on religious or cultural grounds. The impact of such changes can already be observed, for example with the opening of Australia's first Halal food bank in Western Australia (Delalande 2016). As well as changes in attendees, the ageing population and increase in certain ethnic groups will impact upon the volunteers and staff of soup kitchens. An ageing population may lead to uncertainties in volunteer populations, as people are in paid employment longer, or as an older volunteer labour force is not replaced with a sufficient number of younger volunteers.

Change in the ethnic and religious backgrounds of attendees, and an increase in the size and scope of soup kitchens, may also have an impact upon the place of religion in the services. As was seen in the field

observations and interviews, religion was a contentious issue among some staff, volunteers and coordinators, and this is unlikely to change. More professionalised soup kitchens may abandon their religious roots. However, service three was a soup kitchen formed out of dissatisfaction with the move away from the religious element of another soup kitchen, so it is possible that volunteers will choose to break away from less religious services, forming their own, religiously based, soup kitchens. Soup kitchens are still closely associated with *caritas* and the idea of good witness, and there is no indication that this will change for many services, but there may be a corresponding increase in non-Christian based soup kitchens (for example, run by Buddhist or Muslim associations), as these groups increase and their populations age.

The potential for further change in the modern soup kitchen is tied up with issues of 'choice' in services. Some of the services studied have already begun to embrace a more individualised way of serving attendees, and their focus on attendee autonomy and dignity may mean an increase in choice for those accessing food in soup kitchens. How this will happen is unclear, but there has been a move away from standardisation as volunteers and staff introduce more variety into meals, and are more willing to provide substitutions on request. It is possible that larger and more established soup kitchens will be able to provide a small selection of meals or food stuffs (including to take away) for attendees.

The increasing prominence of 'choice' in services has also been perpetuated (or supported) by a move towards heightened interest in health and nutrition in soup kitchen meals; something which has become more prevalent, partially because of the rise of academically-based nutritional studies on soup kitchen meals (Eppich & Fernandez 2004; Koh, Bharel & Henderson 2016; Sisson & Lown 2011; Wicks, Trevena & Quine 2006). Actions supporting 'choice' for attendees were noticeable in the two fixed soup kitchens studied, but remains an emerging trend.

The source of food is another shift in the operation of soup kitchens likely to continue to have an impact on their operations into the future. In each of the soup kitchens observed there was a move towards directly purchasing food, rather than relying solely on donations of goods. The services had also moved towards using intermediaries such as Foodbank and SecondBite to source rescued food from supermarkets, rather than making discrete arrangements with particular businesses. It has been documented that donated food is often unusable or inappropriate, and that dealing with useless goods can take time away from the core jobs of food charity (Davis et al. 2016). Intermediaries can help take on the responsibility of ensuring that food is fit for purpose. Directly purchasing food, rather than relying on food rescue, can also be a way for soup kitchens to control what is served, and allow them to serve fresher and more nutritious meals.

A further development, both in soup kitchens and separately from them, has been the rise of community gardens. Generally used to grow food,

community gardens have emerged as a means of solving local food shortages – known as food deserts – as well as a means for fostering social interaction (Guitart, Pickering & Byrne 2012). In Australia and in the United States, community gardens have become well-received additions to soup kitchens, providing fresh fruit and vegetables for meals, as well as for attendees to take away (Anglican Parish of St Mary's 2016; Cultivating Community 2016; Slow Food Saddleback 2016; The Garden Project 2016). The marrying of soup kitchens with a fresh and nutritious food source through community gardens seems likely to continue for many services. It also presents new opportunities for volunteers.

There are many potential ways in which soup kitchens can change, with emerging trends in charity, food and demographics. At its core, however, there is no indication that the fundamental nature of soup kitchens, nor their key attributes, will change. Having stood the test of time, they seem likely to continue to adapt to the environment around them and the needs of attendees, fulfilling their fundamental role to serve a hungry and marginalised population.

8.6. Limitations and opportunities for further research

No field study is without its limitations. There are several ways in which the field observation could be reconfigured or expanded to provide a more comprehensive picture of soup kitchens. Due to time, budgetary and safety limits, the field component of this dissertation was qualitative and point-in-time, combining short-term participant observation with semi-structured

interviews. As discussed in chapter five, this has limited the amount of information gleaned, particularly around long-term trends. The data gathered and its analysis, particularly in the context of the information available from the scant literature around soup kitchens in Australia in particular, nonetheless provides a platform from which further research can be undertaken. Additionally, utilising other methods of enquiry or theoretical lenses – for example, examination of soup kitchens through a lived experience conceptual framework or lens applied around attendees – would likely have resulted in a differently nuanced picture of services, their value and role which departs from the particular objectives of this study.

There is scope to undertake a larger study in Adelaide on the nature and operation of soup kitchens. This research covers just four kitchens, in a city that may have upwards of 50 such services, of various sizes and visibilities. Observations and interviews at a variety of soup kitchens may provide correlating evidence for the data presented here, as well as uncovering additional information. There is value in studying kitchens in low socio-economic areas or those with significant immigrant populations, to compare the differences in attendee characteristics and needs. Undertaking research at a range of soup kitchens in Adelaide would also provide some further insight into the different histories, philosophies and operational elements of services. In particular, it would be useful to look at mobile soup runs that, rather than having a specific place to serve, directly seek out people sleeping rough, taking food to individuals who are clearly very vulnerable and marginalised.

The field study, as mentioned above, is point-in-time, and there is benefit in undertaking a more longitudinally-focussed study, to see how the services change over time, including in terms of turnover of staff and volunteers, changes in donors, fluctuations in attendee numbers and backgrounds. Some staff and volunteers alluded to increases and decreases in attendees over the seasons and through certain holidays. Key informants also suggested that travellers attend their services during the March festival season in Adelaide, and it would be worth looking at the impact this has on attendances at the services, the types of people attending and the experience of all attendees during these times.

Limitations exist in undertaking this study in Adelaide: a smaller city than most of the other capital cities in Australia. Adelaide also has a relatively small rough sleeper population. These factors impact on attendee rates and demographics. With the soup kitchens observed all overseen by churches of Christian denomination, it would also be useful to see the different philosophies and practices of non-Christian soup kitchens. Other states may also provide for people from a wider range of socio-economic backgrounds and housing circumstances. Scope also exists to undertake research in rural areas, a highly underresearched area in the literature.

Finally, it is important to note that there was no way to determine why people choose not to attend soup kitchens, particularly those who meet the traditional target population characteristics for services: falling into the categories of rough sleeping, insecure housing or social isolation.

Interviews with staff and volunteers of the four services led to speculation that people in need might not be attending, with some consideration of why that might be the case. The literature consulted discussed shame and embarrassment as barriers to seeking food aid and other charity. Some attendees interviewed for this dissertation expressed initial reluctance and shame about seeking aid, as well as citing issues of violence or dissatisfaction with food as reasons for not attending *particular* soup kitchens. A study looking at those who do not utilise soup kitchens, and their reasons for doing so, would round out this research.

8.7. Final comments

Soup kitchens are an old model, and a simple one. People attend and receive a meal at either no cost or for a nominal fee, which may be waved. The model soup kitchens work by is one that has existed since at least the middle of the 19th century. It is a model that has been revived by the emergence of the neoliberal state. For those who receive the food, it has not changed substantially over time.

Soup kitchens are, somewhat deceptively, simple in their execution. The services observed ran their kitchens at minimal cost – food was often donated; money was donated to buy some food or to cover transport costs; they were run either by volunteers or by people paid by overseeing organisations; and food was prepared in kitchens owned and paid for by overseeing organisations. The simplicity of their execution however, masked a complex series of compliance issues as coordinators and staff

sought to keep up with training in food handling, mental health, first-aid, and knowledge of linking into other, more substantial and long-term services for attendees.

Although highly dependent on the provision of food, money and people's time and labour, soup kitchens are resilient and adaptable, with staff and volunteers working hard to find alternative food sources, as well as sourcing funding and linking with ancillary resources as needed. Part of their ability to source goods successfully comes from the identifiable and sellable nature of soup kitchens. People know and understand what soup kitchens are, and are willing to support what they do. The basic need for food is universal, and feeding people is relatively easy to do and has an immediate personal pay off. The goal of soup kitchens is not to end hunger in a social justice sense – they are about meeting immediate needs. They are an old model, and one that works, and for these reasons will continue to work into the foreseeable future. There has been a concerted effort by those at the highest levels of coordination within soup kitchens to ensure that attendees can receive food the way they always have, by adapting to the new bureaucratic needs of government and the wishes of donors, while also maintaining the simple model of operation experienced at the front door (or side of a van in the case of mobile runs).

The role of the soup kitchen has expanded over time. At the core of the 21st century soup kitchen model remains providing food to those in need – however, such need is conceptualised and determined by individual

services. Increasingly though, soup kitchens are also a forum for facilitating social inclusion; for individuals to be socially connected, albeit within their own parameters for comfort. The modern soup kitchen service also plays a key role in linking attendees with a wider range of services – housing, health, community and social supports. They also offer attendees a means by which they can make ends meet financially – a stop gap measure augmenting the resources individuals have to purchase food. In this respect they are an important part of the food security picture for households. Thus, the modern soup kitchen is an indicator of the entrenched issue of poverty in Australia. Notably, over time the soup kitchen model has maintained its core function – meeting immediate and basic needs without reciprocal obligations on the part of attendees. It is the identification of these shifts in the soup kitchen model that is a key finding and contribution of this thesis.

So why do soup kitchens still exist in the 21st century? There are several reasons. First, there is a continuing need for food. Even in a strong welfare state, there will always be people who fall through the cracks – people who are homeless, people who are in poverty, and people who simply cannot make ends meet for whatever reason, whether over the short- or longer-term. Those who do not *need* the food as a necessity may still have a need for social interaction, and the soup kitchen model continues to provide food and a sense of community for people who are poor, disadvantaged or disenfranchised. Anecdotally, people in the community still want to do good for others – either for religious or secular humanist reasons. Soup kitchens provide a way for them to serve others. They help people fulfil their spiritual

needs in a way that is cost effective and provides immediate gratification. Simply, soup kitchens still exist because they work, and they have continued to work against the many tides of change.

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Appendices

Appendix A

Interview themes/questions: Soup kitchen staff



‘Our Daily Bread’: The role of soup kitchens in the lives of the homeless population in Adelaide

Interview themes/questions

Soup Kitchen Staff

A. Operation of the soup kitchen

1. How often do you volunteer in [this soup kitchen]?
2. How many hours do you spend preparing and serving the food per mealtime?
3. How long have you been volunteering in this kitchen? Have you worked in other soup kitchens before?
 - a. How do other kitchens differ? Are they better/worse/about the same?
4. How busy is this soup kitchen, on average?
 - a. Do you find that you need to turn people away, or that you run out of food?
5. How is the soup kitchen run? Is it businesslike or more informal?
6. (*If a nominal fee is charged*) what is the philosophy behind charging small amount of money for the meals? Is it financial, psychological (*eg feels like it's not charity*)?

- a. How strictly do you stick to the payment rule? Do you turn people away if they cannot or refuse to pay?
7. How do you feel about your fellow volunteers?
8. What do you find is the attitude of the other volunteers towards the service users?

B. Charitable work

1. Do you undertake other charitable work, and if so, what?
2. What motivates you to volunteer generally?
3. What motivates you to volunteer in a soup kitchen specifically?
4. What do you think is the importance of charity:
 - a. For you?
 - b. For the people receiving charity?
5. Do you think soup kitchens are the best way to feed people who are hungry?
6. What do you think about the food you serve in the soup kitchen? Do you think it's nutritious, good quality?

C. Relationship with service users

1. How would you describe the general atmosphere of the soup kitchen?
2. How do you get along with the people you are serving? Do you talk to them?
3. Do you believe that the people who come here need the food?
Why/why not?

4. (*If people have been turned away*) How do you feel about having to turn people away?
5. How safe do you feel working in the soup kitchen? Do you worry about violence?

Appendix B

Interview themes/questions: Service users



‘Our Daily Bread’: The role of soup kitchens in the lives of the homeless population in Adelaide Interview themes/questions

Service Users

A. Housing and personal situation

1. Can you please give me a bit of background about yourself? (*eg age, life, education, family*)
2. Where are you living at the moment? (*eg house, with friends, on the street*)
 - a. How long have you been living there?
3. Have you been homeless before?
 - a. Have you had a house before?
4. Are you getting any money from work, the government or anywhere else?
5. How did you find out about [soup kitchen service]?

B. Use of soup kitchens

1. How often do you use [the soup kitchen service]?
 - a. Do you use other soup kitchens? What ones? How often?
2. Do you like this soup kitchen?

- a. How are the people who serve you?
 - b. What about the other people using it?
3. Tell me about what you do when you come to the soup kitchen? (*eg just eat, talk to people, use other services*)
4. What do you like most about the soup kitchen?
 - a. What do you like least?
5. Have you ever been turned away from a soup kitchen? (*eg because it was full*)
6. Do you like the food you get at the soup kitchen?
 - a. Does it taste nice?
 - b. Does it make you feel full?
7. Where else do you get food from when the soup kitchen is closed?

C. Receipt of charity

1. How do you feel about getting food from soup kitchens?
2. How do the people serving the food treat you?
3. Do you get other things from other services? (*eg clothes, shoes, money*)
 - a. Does it feel different to getting food? Is it better, worse, about the same?
4. Do you use other support services, like for housing or health?
 - a. Are these services useful for you?
5. What other services do you need that you aren't getting at the moment?

Appendix C

Letter of introduction: Service staff



Department of Geography, Environment and Population
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Faculty of Humanities and Social Sciences

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Wednesday, 31 May 2017

Letter of Introduction *Service Staff*

PhD Project: 'Our Daily Bread': The Role of Soup Kitchens in the Lives of the Homeless Population in Adelaide

Dear Sir/Madam

This letter is to introduce Ms Victoria Skinner, a PhD student from Adelaide University. Victoria is conducting a research project exploring the uses of soup kitchens by people who are experiencing homelessness. This research will answer three key questions;

- Are soup kitchens still important in the lives of people experiencing homelessness;
- Specifically, what role do they play in the lives of people experiencing homelessness; and
- What can be done to improve the services provided to the homeless population through the soup kitchens?

We are seeking your assistance with this project. This letter is being provided to you on behalf of the researcher to invite you to participate in a research project. As someone working in a soup kitchen/run, Victoria would like to talk to you about your experiences and involvement with the service.

Your opinions will help us to understand what works best for people experiencing homelessness in terms of soup kitchens, and what can be improved.

If you agree to participate in the project, you will be asked questions regarding the operation of the soup kitchen/run, the amount of people who use the service, and what other services are provided with or by the soup kitchen or organisation running it.

Your participation in this study is voluntary.

Please be assured that Victoria will treat any information you provide as part of this project in the strictest confidence, and none of the participants interviewed for this project will be individually identifiable in any documents resulting from this research.

We will protect your privacy and confidentiality at all times. Please also note that you are free to discontinue your participation in this research at any time, and you can also choose not to answer any particular question(s) asked in the interview.

If you wish to know anything further about this research, you can contact the researcher, Victoria Skinner on Telephone (08) 8313 5806; or Email victoria.skinner@adelaide.edu.au.

We hope you will participate in this research and thank you in advance for your assistance.

Yours sincerely

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This research project has been approved by the University of Adelaide Human Research Ethics Committee.

Appendix D

Letter of introduction: Service users



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Wednesday, 31 May 2017

Letter of Introduction *Service Users*

PhD Project: 'Our Daily Bread': The Role of Soup Kitchens in the Lives of the Homeless Population in Adelaide

Dear Sir/Madam

This letter is to introduce Ms Victoria Skinner, a PhD student from Adelaide University. Victoria is conducting a research project designed to explore the uses of soup kitchens by people who are experiencing homelessness.

We are seeking your assistance in this project. This letter is being provided to you on behalf of the researcher to invite you to participate in a research project. As someone who uses a soup kitchen/run, Victoria would like to talk to you about your experiences.

Your opinions will help us to understand what works best for people experiencing homelessness in terms of soup kitchens, and what can be improved.

The research is entirely voluntary and will be done in partnership with the University of Adelaide, to answer three main questions:

- Are soup kitchens still important in the lives of people experiencing homelessness;
- Specifically, what role do they play in the lives of people experiencing homelessness; and
- What can be done to improve the services provided to the homeless population through the soup kitchens?

If you agree to participate in the project, you will be asked questions about your current and past housing situation, your use of soup kitchens, and your access to and use of other services and alternative sources of food.

Your participation in this study is voluntary. You do not have to participate if you do not want to.

Please be assured that Victoria will treat any information you give in the strictest confidence, and none of the participants interviewed for this project will be individually identifiable in any documents resulting from this research.

We will protect your privacy and confidentiality at all times. If you choose to be involved in this research and then later change your mind, that is okay. You can also choose not to answer any particular question(s) in the interview.

If you wish to know anything further about this research, you can contact the researcher, Victoria Skinner on:
Telephone (08) 8313 5806; or
Email victoria.skinner@adelaide.edu.au.

We hope you will participate in this research and thank you in advance for your assistance.

Yours sincerely

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Appendix E

Information sheet: Soup kitchen staff



Information Sheet

Soup Kitchen Staff

PhD Project: 'Our Daily Bread': The Role of Soup Kitchens in the Lives of the Homeless

Introduction

A PhD student from the University of Adelaide, Ms Victoria Skinner, is conducting research exploring the ways in which people who are experiencing homelessness use soup kitchens across Adelaide. The focus of the research is on people who use soup kitchens and who are sleeping rough, living in temporary accommodation or who are without a permanent residence.

The project aims to answer three main research questions:

- Are soup kitchens still important in the lives of people experiencing homelessness;
- Specifically, what role do they play in the lives of people experiencing homelessness; and
- What can be done to improve the services provided to the homeless population through the soup kitchens?

Your opinions will help us to understand people's experiences of soup kitchens, how they can work better and what other services people use or would like to access through them.

The researcher will also be talking to people experiencing homelessness about the importance of soup kitchens in their lives.

What the research will involve

Staff choosing to participate in this research will be interviewed by a PhD researcher from Adelaide University, Ms Victoria Skinner. During this interview, the researcher will ask about the workings of the soup kitchen, as well as your thoughts and experiences around clients and use of the soup kitchen.

It is anticipated that interviews will take no longer than 30 minutes.

The questions asked in this interview will involve your participation in soup kitchens, how you feel about the atmosphere of the soup kitchen and your feelings about the service users.

As with all the questions, please note that they are voluntary and you are not required to answer if you do not want to.

Confidentiality

The information collected from this project will be published. Please be assured that any information provided by you for this research will be treated in the strictest confidence. None of the participants in this research will be individually identifiable in the reports or other publications resulting from this research. Please note that the interview discussion will be taped. Information collected will be stored securely within the University for a period of five years and will be destroyed after this time.

If you chose to be involved in this research and then later change your mind, that is okay. You can also change your mind about participating in the research at any time during the interview and you can also choose not to answer any particular question or questions during the interview.

Time frame for the research

The interviews for this project are planned to occur between December 2012 and March 2013.

Further information

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Thank you for your assistance with this research

This research project has been approved by the University of Adelaide Human Research Ethics Committee.

Appendix F

Information sheet: Service users



Information Sheet *Service Users*

PhD Project: 'Our Daily Bread': The Role of Soup Kitchens in the Lives of the Homeless

Introduction

A PhD student from the University of Adelaide, Ms Victoria Skinner, is conducting research exploring the ways in which people who are experiencing homelessness use soup kitchens across Adelaide. The focus of the research is on people who use soup kitchens and who are sleeping rough, living in temporary accommodation or who are without a permanent residence.

The project aims to answer three main research questions:

- Are soup kitchens still important in the lives of people experiencing homelessness;
- Specifically, what role do they play in the lives of people experiencing homelessness; and
- What can be done to improve the services provided to the homeless population through the soup kitchens?

Your opinions will help us to understand peoples' experiences of soup kitchens, how they can work better and what other services people use or would like to access through them.

The researchers will also be talking to volunteers and managers of the soup kitchens as part of this project.

What the research will involve

People choosing to participate in this research will be interviewed by a researcher from Adelaide University, Ms Victoria Skinner, about their current and previous periods of homelessness, as well as their use of soup kitchens and alternative sources of food. You will also be asked about other services you have accessed, either in soup kitchens or elsewhere.

It is anticipated the interviews will take no longer than an hour.

The questions that will be asked in this interview will be about where you are living, your use of soup kitchens and how you feel about receiving charity.

As with all the questions, please note that they are voluntary and you are not required to answer if you do not want to.

Confidentiality

The information collected from this project will be published. Please be assured that any information provided by you for this research will be treated in the strictest confidence. None of the participants in this research will be individually identifiable in the reports or other publications resulting from this research. Please note that the interview discussion will be taped. Information collected will be stored securely within the University for a period of five years and will be destroyed after this time.

If you chose to be involved in this research and then later change your mind, that is okay. You can also change your mind about participating in the research at any time during the interview and you can also choose not to answer any particular question or questions during the interview.

Time frame for the research

The interviews for this project are planned to occur between December 2012 and March 2013.

Further information

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Thank you for your assistance with this research

This research project has been approved by the University of Adelaide Human Research Ethics Committee.