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# Food Insecurity in Northwest Arkansas: In-Depth Interview Summary

Report Prepared by Thomas Tessmer: Integrative Insights

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We also want to acknowledge the professional and thoughtful work of Mr. Thomas Tessmer of Integrative Insights. As the primary interviewer, Mr. Tessmer worked with our team for nearly a year in developing a comprehensive and thoughtful assessment of individual's experiences with food, food insecurity, and the mechanisms that compound the difficulty in getting access to food throughout Northwest Arkansas.

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Finally, we want to express our appreciation to the anonymous participants who spent hours being interviewed by Mr. Tessmer and were willing to share their stories about food, food insecurity, and the every day complications of accessing food in Northwest Arkansas. Our work is dedicated to improving their lives, changing the way we access food, and moving the needle on food insecurity in the NWA region.

# Participating Service Providers:

Feed Communities
Salvation Army
Arkansas Children's Research Institute, UAMS
Brightwater Foods
Tri-Cycle Farms
Seeds That Feed
City of Fayetteville: Office of Sustainability
Samaritan Community Center
EasyBins
Genesis Church
7Hills Homeless Center

# **Project Outline**

This project and the findings discussed in this document are part of a larger funded project on food insecurity in Northwest Arkansas; we focus our attention here on food insecure residents living predominantly in Washington County.

Participating service providers recommended individuals/clients as candidates for interviews and we randomly contacted them from the lists that they provided for us. Persons had already agreed to participate in the project and answer a series of questions about their experiences regarding food, their nutritional history, and their current assessment of food insecurity/risk. We made every effort to make sure this sample of food insecure clients was diverse across gender, racial, ethnic, and age categories. Women were overrepresented in these interviews but we knew that women tend to be the decision-makers when it comes to food, cooking, and nutrition in the family. The details of these conversations (n=20), insights, and recommendations for addressing the food insecurity problem are provided by the research team and found in the following pages.

# ASSESSING FOOD INSECURITY IN NORTHWEST ARKANSAS

#### **BACKGROUND AND METHODOLOGY:**

This summary is based on 20 face-to-face interviews among individuals selected by local service providers that were representative of clients in Northwest Arkansas that have previously been, currently are, or may be at risk to experience food insecurity. The interviews were held throughout Northwest Arkansas, often in the participant's home, at restaurants, Genesis Church, or 7 Hills Homeless Center, during June and July 2018. Participants were compensated \$100.00 for completing a 60- to 90-minute interview. As with all qualitative research, the following insights should be taken as directional in nature and not as measurable, objective facts. However, observations that are consistent across a small, unbiased sample often extrapolate to a larger population.

#### **CAVEATS:**

The method by which participants were identified and recruited likely produced a sample that is not perfectly representative of all people struggling with food insecurity in Northwest Arkansas. Most participants were individuals that had sought and received help from a local service provider to address their food insecurity issues. All participants also either lived near or were able to get to central city locations to participate in the interviews.

Additional and potentially very different perspectives might be gained by interviewing individuals that do not interact with these agencies or services, live a greater distance from city centers, or lack access to transportation to get to these locations. It is possible that these groups are more likely to experience greater struggles (lacking the help other participants have found), be less aware of available solutions, have greater constraints related to transportation, or have found other solutions to cope with their food insecurity.

#### **OVERALL CONCLUSIONS:**

Based on the individuals recruited and interviewed, the systems that exist in Northwest Arkansas to address food insecurity are viewed as largely successful. Only 7 of 20 participants identified "having enough food to eat" as a challenge they are currently facing, and none ranked it as their top challenge. In a similar manner, 10 participants indicated "having the right kinds of food to eat" as a challenge, but only two ranked it as their top challenge.

While most interviewees regularly struggled with scarcity of food in some form, just one indicated any consistent or significant issues with actually going hungry (and she knew there were many sources for food...she just lacked transportation to access them due to extreme social isolation). Despite painful experiences (many interviews included tears), most (but not all) participants were accepting of their reality and were living with as much routine and stability as possible, even if they knew more challenges awaited them in the future.

The faces of food insecurity take many forms, including young single mothers, the unemployed or disabled middle-aged persons, chronic homeless persons, and seniors living on fixed incomes with failing health. While each one has a different set of catalysts that trigger food insecurity, participants were consistent about having more interest in getting help to address the issues that cause them to become food insecure. This included finding ways to get or stay healthy (a challenge among 14, and the top issue among 5), and having enough money to pay their bills (a challenge 12 are facing, and the top issue among 6).

Each participant had their own personality and perspective, but there was a consistent sense of over-confidence in their knowledge and abilities, which suggests educational resources may struggle to attract an audience and convince them to implement what they learn. At the same time, there is a great deal of self-awareness (recognizing their own choices have led to their situation) and appreciation for the help and support that people were receiving.

While serving an important purpose, food solutions are primarily treating the symptom, and not the disease, causing the majority of participants to view these resources as a regular and long-term (chronic) solution to incorporate into their 'budget' or routine. It was less common to view these resources as a temporary (acute) safety net, even among individuals that claimed to be taking steps to improve their circumstances.

Ultimately, solutions for food insecurity cannot operate in isolation of other services designed to address the bigger issues related to food insecurity. People know that they need to seek out food because they recognize the cause (lack of food) and feel the immediate consequence (hunger). People are less likely to see other types of help because the cause or the consequence are not as immediately or clearly evident.

Clearly, there still is room to improve how food insecurity is handled in Northwest Arkansas. This includes finding ways to improve freshness, variety and access. It also includes a number of possible interventions and partnerships to improve the efficiency and effectiveness of the overall system.

## **KEY QUESTIONS**

While research should answer many questions, it typically raises new ones. This project was no different, with four areas deserving some discussion that may arrive at different conclusions or potentially require further research to answer:

- What, if any, segments of the population were unintentionally excluded from this research, and may represent different perspectives or different needs? Specifically:
  - Are there individuals or groups that would not believe there is sufficient food available in Northwest Arkansas?
  - Are there groups that face significantly greater challenges to access the food that is available?
- How should resources be allocated to address food insecurity in a manner that acknowledges it as a symptom and not the disease?
  - Can services be designed to address acute (temporary) needs, but not become long-term (chronic) solutions attracting people intending to become permanently dependent on?
  - Can access to supplemental food be combined with other programs that help individuals feel like they have a purpose and are contributing to solve the issues that made them food insecure initially?
- Is "transportation insecurity" (access) another important issue worthy of developing specific programs to address?
  - o How much does lack of access actually contribute to food insecurity?
  - o Is the access about getting food to people or getting people to transportation (that gets them access to more than food)?
- How can we respectfully challenge an individual's self-perception and convince them that new knowledge and better habits could create a far better reality? Beyond convincing them, how can we help people to actually experience the better reality that can result from making better decisions over a longer period of time? (i.e., How is someone persuaded that the effort to quit smoking or lose weight is worth the benefit when there is delayed gratification?)
- What are effective communication channels and resources to connect those in need with service providers? Is additional training of volunteers needed to improve the personal connections and trust many participants placed such a high value on? Do volunteers need to be equipped to provide more than food or are these skills naturally present?

#### PARTICIPANT SUMMARY

- 1. Participants can be categorized along a spectrum related to how free food or subsidized sources are utilized, but three profiles tended to consistently emerge: Each one of these leads to very different expectations and patterns of dependence on free food:
  - a. Those that rely on free or subsidized sources for 100% of their food: These individuals essentially never shop for food (or at least never with their own money), but rely on a mix of groceries and meals (sometimes with a donation). For these, the ready availability of free food has taught them that it would be "silly" to spend their own money on food when there are so many other expenses it can go toward.
  - b. Those that have a system that includes subsidized food as a core component to their monthly food budget: These individuals limit their grocery spending to the amount of their food stamps and/or a specific cash amount they know is never enough to buy all the food they will need. They end every month with the expectation that they will tap into network of additional sources of food to address any remaining needs.
  - c. Those that seek to be self-sufficient and only turn to subsidized food if and when it is necessary: While food stamps are often part of their budget, this profile does not want to and does not expect to regularly utilize supplemental food sources. They view these sources as a temporary safety net to turn to in times of need, not a regular solution.
- 2. Almost all participants projected a strong sense of self-confidence: While many acknowledged bad decisions in the past (often associated with drug or alcohol abuse), most still maintained an "above average" perception of themselves. This included viewing themselves as an extra hard worker (which may currently be hindered by a physical disability), extra generous or giving to others, as well as viewing their kids (and even their pets) as gifted and extraordinary in their own way. As one described it, "I've been alive long enough to know how to take care of myself."
  - a. This self-perception limits the perceived need (or motivation) to learn or change. While not categorically wrong, it is unlikely that these perceptions are accurate for all participants, yet they define what each viewed as their reality.
  - b. This self-perception also is likely to drive the belief many had (including those that are currently homeless) that "others are worse off than we are, so they should be getting more help than we do." As an aside, it is interesting (and perhaps ironic) to note that more affluent Americans seem to be more likely to compare themselves to people they view as better off than them, while these participants were more likely to compare themselves to people they view as worse off.
- 3. Regardless of their upbringing, all participants believe they have learned essential life skills related to shopping, cooking and understanding (but not necessarily making) healthy choices. This self-perception leads to the rationalization most individuals have that they are already doing everything right, though a few acknowledge there is always room to grow. The common perception is that they are spending their money wisely, they are picking the right foods, and they are preparing the right meals. In reality, it is likely that everyone has ways they waste money, ways they could be buying better foods and ways they could be preparing better meals (i.e. healthier, less expensive, etc.). Unfortunately, this translates to

few appearing open or eager to learn about and ultimately change or improve these habits because they do not perceive a significant gap in their own knowledge. Along these lines, several participants made different variations of the statements "If you're in poverty, you're in poverty...education will only go so far."

- 4. Few participants have very sophisticated grocery shopping or buying habits: Most have no more than three stores they buy groceries from (many only use one), with convenience being almost as likely to determine the destination as price perceptions. However, most participants typically have a clear understanding of which items are best bought at which store (based on differences in quality and cost). Of note, there is a particularly strong appreciation for the lower costs offered at Aldi or 10Box compared to Walmart, but there is very limited use of sales, promotions, coupons or other price-sensitive activities beyond choosing to buy less expensive store brands over national brands. Despite limited budgets, many participants made some surprising and unexpected choices:
  - a. One homeless lady had four dogs, and shared the challenge of carrying 50-pound bags of dog food back to her campsite while making sure it did not attract rodents once there.
  - b. Another single mom was still able to regularly buy a variety of meats from Richard's Meat Market (presumable at premium prices) despite being dependent on food stamps.
  - c. A grandmother vented about how her daughter made more frivolous and convenience-based spending decisions when she was spending the grandmother's money compared to her own money.
  - d. Few participants stick to shopping lists or have a systematic approach to make sure they are getting the most food for their money.
  - e. Spending money on drinks (including bottled water) was still common, despite the fact that they were avoidable expenses and typically provided little more than empty calories and caffeine.
- 5. Regardless of skill level, participants tend to credit themselves with the ability to prepare a variety of foods, and most indicate a wide variety of groceries are typically in their home: However, further probes suggest that reality may be more limited, with fewer participants claiming to actually have the time, energy and resources to consistently source and serve new or different dishes, with most establishing a menu of staples or favorites that become the central and consistent part of their diet. While there was lukewarm interest in learning about new foods or recipes, the broader context across interviews suggested this was not a priority and there was limited motivation.
- 6. While they may feel in control, participants consistently summarized their current condition as one of "waiting": Most felt they understood and had taken all the necessary actions they could to improve their situation (i.e., looking and applying for jobs, seeking out assistance, etc.), but had arrived at a point where there was nothing left to do but wait. This may be waiting for their name to move up a list or waiting to hear back about getting approved for a job, a grant, or other assistance. This waiting phase appears to shift the sense of responsibility to other people, other systems or other organizations.

- 7. Many participants are searching for purpose and a sense of being needed: Regardless of their situation, it was clear that participants still had the desire to both wake up with a purpose, to having meaningful interactions and relationships with others, and to feel like they are making a valuable contribution to the world. The actual realization of these desires varied widely. Most individuals found purpose in providing for their family or serving others in some form, but a few were clearly isolated. Disability or schedules filled with work and child- or adult-care tended to create a perception of being 'stuck in a rut' and unable to make contributions beyond fulfilling immediate obligations.
- 8. Every participant owned a cellphone, with most having a smartphone: This has clearly become a basic necessity for all thanks to numerous benefits it provides, though few viewed themselves as tech-savvy. Smartphones are primarily utilized for the phone, email, online search and YouTube. A few also utilized social media apps like Facebook, Instagram or Pinterest both to follow friends and family and to access information. Most also tended to be on relatively expensive individual plans, typically costing around \$50 per month.
- 9. **Food scarcity does not equate to material scarcity**: With the exception of two sparse apartments and one homeless man, participants were generally still surrounded with a significant number of other belongings. While these items may not be of great value or usefulness, it was apparent that people generally do not struggle with filling their life with 'stuff.' This even applied to numerous homeless individuals that were paying up to \$85 per month for a self-storage unit containing things they either didn't want to part with or they held onto in anticipation of eventually having a home to move them into.

#### **DEFINING THE PROBLEM AND CAUSES**

- 10. With just one exception, all research participants felt there was no shortage of food available in Northwest Arkansas: People did not view themselves at risk of regularly "suffering hunger". While there were definite concerns related to having the quantity and variety of food desired, and plenty of participants had fairly bare or empty cupboards, they were not starving or malnourished. Parents in particular recognized that they would always be able to find some way to keep their children fed because the idea of neglecting kids was simply not an option.
  - a. As a homeless participant summarized the view that many had, "If a man lives in Fayetteville, he can't go hungry. If you are, it is your own fault."
  - b. Another overweight female described it as "Yes, maybe I struggle to have enough food, but I sure don't look like it."
  - c. Yet another participant described her concerns as one that did not relate to abundance, but to choose. She didn't worry about going hungry but thought "it would be nice to buy pork chops instead of ground beef once in a while."
- 11. Several common stories were retold related to how participants got into the food-insecure situation they were in: These included a mix of big events and the compounding impact of small events:
  - a. *Disability*: A considerable number of participants are legally disabled which has become the key barrier to having a job and living a more productive or independent life. Several were also further burdened with providing care for a family member (typically a spouse or parent) that was also disabled or chronically ill.
  - b. Bad decisions culminating in a negative life event: Many participants could trace their current situation back to a specific date when a specific event happened that shifted the trajectory of their life. This event was often the result of drug or alcohol abuse that led to an accident or a crime.
  - c. *A costly unexpected event*: For the most part, participants all live paycheck-to-paycheck, with little or no savings or retirement funds. Unanticipated medical bills or car repairs were repeatedly identified as triggers that caused a cascade of added fees and costs that ultimately led to a shortage of money to buy food.
  - d. A good decision or sacrifice done in pursuit of a better future life: Several families had intentionally chosen a lifestyle that prompted food insecurity. These participants were focused on longer-term benefit from choosing a more flexible, but lower paying job (to minimize childcare expenses and have time with family), getting out of an unhealthy situation or enrolling in school to get a degree. A better future was worth the (temporary or short-term) sacrifice and consequences.
  - e. *The "collision" of multiple monthly bills*: Particularly true among renters, the need to juggle and prioritize which bills are paid and which are not inevitably leads to a point in the future when final notices arrive or multiple bills come due at the same time. As described by several participants, electric bills are the common culprit here because they can vary dramatically during hot or cold months and they can grow quickly when additional \$35 late payment fees get added. Unfortunately, it can only take a few months to go from a previously balanced budget to shutoff notices and evictions, as \$50 shortfall can quickly become a \$500 debt.

- f. Being financially taken advantage of by someone else: Several participants shared varying stories of "theft" as the source of their current financially-tight situation. This most often involved a family member or close friend having an unpaid loan, running up credit card bills or withdrawing money from their bank account without their permission.
- 12. **Most participants felt secure enough that they were rarely forced to eat food they really didn't want to:** Most still enjoy the ability to avoid foods they dislike and just a few mentioned consistently having to consume unappealing meals (with examples including ketchup sandwiches and serving pasta too often). As one described it, "by the end of the month, we may not have the food we want, but it is there (in our cabinets) so we will eat it." Several also shared how they accept free food, but will return or redistribute the items that did not appeal to their household.
- 13. While it is a combination of choice and circumstance, few participants had the ability to recognize situations before they became issues or problems (at which point they also became harder to solve): Most describe cyclical events in their life (i.e., food runs out before the end of the month, electric bills go up in summer, cars require maintenance or repair), yet they have no plan to prevent or prepare for them. At best, most plan to react once the issue arrives, with that reaction often be significantly more costly and ineffective compared to taking preventive measures.
- 14. For participants purchasing a significant share of their own food (either with cash or food stamps), the money typically runs out before the end of the month: Participants consistently anticipated the day their paycheck or assistance arrived so they could immediately go on a shopping trip. Some took a single trip spending their entire budget to buy all the food they could for the month while others planned multiple, smaller, weekly trips. In either case, it was common to wait for the money and food to run out before seeking assistance, resulting in a spike in demand during the end of the month which likely created inefficiencies and supply constraints at food providers. No participant recognized the potential benefit of shifting their habits to use subsidized food during the first week of the month, when demand is likely significantly less (and supply or selection may be better).
- 15. Solving one's transportation needs falls between the stability of having a home or apartment (as long as the rent is paid) and having the constant need to replenish food: Few had significant complaints related to transportation issues, but many had concerns of future "transportation insecurity". Almost all participants had found their own solution that was meeting their needs, though each had limitations they had to adjust to. Those limitations included sacrifices like having added expenses (of owning a vehicle), not being able to pursue a better job (that required a vehicle to get to), and not being able to access food resources or get to desired grocery stores as often as they would like. These solutions included:

- a. *Owning a vehicle*: While this provided the greatest freedom, most owners felt they were not able to provide the maintenance their car needed, their car had existing issues they couldn't afford to fix, they feared the "check engine" light could take away their reliable transportation at any moment, or they were struggling to afford gas.
- b. *Accessing third-party systems*: These individuals have built their routine around places they can reach by using the free annual bus pass or taxi voucher system, though many acknowledge a variety of destination they would like to, but cannot easily reach.
- c. Having a friend or family member with a vehicle: This was not a very common solution, with those relying on it sharing disappointment and frustration with how often they are let down or feel neglected by their friends.
- d. *Defining their world by how far they are willing to walk or bike*: This was more applicable to homeless individuals, but also shaped the habits of others not wanting or able to rely on the above options.

## **ASSESSING SOLUTIONS**

- 16. Participants primarily discover organizations through recommendations from individuals or printed resource lists: The individuals are almost always friends or close acquaintances that are able to recognize, and have personal concern for the participant's unstable situation. Awareness is still very low-tech and primarily word-of-mouth, and typically not done through self-directed discovery (i.e., through online searches, communication boards, etc.). Just one participant gave himself credit for discovering resources on his own. The rest referenced either of two sources:
  - a. The majority of participants became aware of available services through a personal recommendation or introduction from a compassionate individual concerned about their situation.
  - b. The remaining participants generally referenced documents they received upon acceptance into a program like a HUD housing unit or a service provider like 7 Hills or Salvation Army. While impersonal, these documents provided the basic information necessary to direct them on their first steps.
- 17. Participants evaluate organizations based on the intangible value they receive as much as the tangible value: While meeting practical needs like hunger are important, participants spent more time talking about other benefits they got (or wished they would get). These included:
  - a. *Having someone take time to understand their needs*: Many people arrive at organizations only after multiple levels of failure and frustration. While it may have little impact on what help is actually provided, huge trust was established when one felt they were heard and their particular situation was understood.
  - b. *Feeling a personal connection*: Praise for an organization was typically focused on praise for an individual within the organization. For many, connections were built by being recognized and welcomed by one person. For one participant, a significant amount of pride was associated with simply being given a nickname (Riff Raff).
  - c. *Being given self-confidence*: Several participants realized that the real value given by organizations wasn't new tools or solutions, but simply rebuilding one's confidence and motivation that they already know what they need to do, they're capable of doing it, and someone wants to see them succeed.
  - d. *Being given stability and predictability*: While most participants felt in control of their situation, many are searching for a sense of stability and predictability. Separate from filling a moment-in-time need, participants are looking to re-establish a situation where they can start to make progress, not spend all their time and resources fixing problems that keep reappearing.

- 18. The completely free, no-accountability, no-obligation nature of food banks may have several negative consequences: Participants are aware of how the system can be manipulated, and many compared their honorable efforts to others that they felt were taking advantage of resources. However, those that did view supplemental food sources as something they have a right (not a privilege) to use as often and as long as they want also did not seem overly-concerned with rationalizing or justifying their behavior. Individuals that were attempting to avoid or minimize reliance of supplemental food sources voiced several concerning observations about the system:
  - a. *It trains people to be dependent*: As one participant observed about people at 7 Hills, they have been "trained like a dog that lays on a porch all day, knowing food and water will always be provided." This was one of several individuals that believe services like 7 Hills can become an enabler that allows people to perpetuate their bad decisions and not take any steps to solve their problems.
  - b. *It rewards those that have time to play the game*: Like any activity, those that practice it the most tend to become the most skilled at it. There were some concerns that a limited number of 'professionals' enjoyed the best benefits while those trying to limit their use miss out. For example, individuals with the most flexible schedules can respond faster to the text messages announcing free food at the Yvonne Richardson Center, while those working jobs or with transportation constraints are less often able to take advantage of these first-come-first-served offers.
  - c. It takes away the recipient's sense of contributing or earning: About half of those interviewed had no desire to seek out or accept handouts. Several took comfort in the belief that they were pursuing opportunities to volunteer their time or provide other forms of value in exchange for the food they received.
  - d. *It creates a hording mentality*: Several participants either personally demonstrated or shared observations about how free food "buffets" resulted in individuals taking significantly more than their fair share or at least more than they would consume before the food spoiled.
  - e. *It blurs the definition of being wasteful*: At one interview site, a significant amount of fresh produce remained after everyone had taken their share. When asked what would be done with the extra food, a staff member commented "Oh, that will be thrown into a compost pile...we don't waste anything around here." As an outside observer, turning edible food into fertilizer feels wasteful. Several participants also shared how they frequently throw away food that they've gotten tired of or has expired (commonly including larger quantity items donated from Sam's Club).

# 19. The primary shortcomings related to food sources in Northwest Arkansas do not appear to be ones of quantity, but relate to four other areas:

- a. *Freshness*: Fresh food donations from local stores were consistently viewed as arriving a day or two late. That is, they were either already starting to show signs of spoilage or they were so close to expiration that people did not have enough time to consume them before they started to spoil. While less common, a few participants had similar concerns related to getting shelf-stable or packaged foods that are approaching their expiration dates.
- b. *Variety*: While "beggars can't be choosers", many participants shared frustration with the repetitive nature of the same items always available while others were

- noticeably missing. In particular, canned foods were polarizing (some were convinced they are unhealthy and therefore should be avoided while others value the shelf-stable nature and ability to store them until needed). Others were also surprised with the lack of basic cooking staples like flour, sugar or oils.
- c. *Self-selection*: The ability to use a point system to select individual items was almost universally preferred over pre-configured boxes or bags. Several confessed the guilt of wasting food they received because it simply wasn't what their household liked to eat, while others had developed a network to exchange unwanted food with others.
- d. *Lack of protein*: While not completely unavailable, meat was the most common item individuals wished they had better access to. Of course, many addressed this by simply allocating more of their own food budget to this (with Harp's 5 for \$25 meat special being mentioned often).
- 20. While shelters provide a safety-net, they also strip away any sense of control: Those that have experienced this are quick to emphasize how much they felt the urgent need to get out of that environment. They felt both a psychological impact of the loss of control as well as the increased exposure to and interaction with potentially damaging or negative influences on their life. A few also felt these environments attacked their health as they came in contact with people, sickness and unsanitary situations that dramatically increased symptoms associated with sickness.
- 21. Participants recognize that help is more available to fix problems once they exist, but not to prevent the problems from happening in the first place: As an example, participants have learned they can get help to keep their electricity on only after they get a disconnect notice. They cannot get help to prevent a disconnect, and more than one learned that they actually get "punished" for setting up a payment plan that avoids the disconnect. In this situation, people have learned to simply wait for the electric company to provide the disconnect (or actually contact them to request it) as the best solution.
- 22. Many participants recognize food insecurity as an effect from other problems or decisions. It is rarely viewed as a cause or creator of current problems: Participants thought that greater good would come from organizations helping address the issues that caused a shortage of food (typically, due to a shortage of money to buy food) versus just finding ways to provide more or better food. In fact, most did not view their food insecurity as actually creating in specific health problems or causing them to have insufficient energy to do the things they want to do.
- 23. Participants are looking for help beyond free food to avoid the situations that result in the need for free food: With the exception of permanent disability, participants consistently viewed the underlying issue as one that would not have been that hard to fix, but may be well beyond fixing now. Prevention or early resolution of these small problems could have stopped them from compounding until they were out of control and far more difficult, if not almost impossible, to resolve. Types of solutions that could have helped include:
  - a. *Short-term micro-loans*: One participant said she needed just \$300 to get back on her feet while another shared multiple experience where an overdue electric bill led to her

- getting evicted from her apartment, forcing her to move back to Little Rock to live with her family, and lose her job in the process.
- b. *Hygiene solutions*: Several participants discussed how important maintaining a good appearance and clean wardrobe were to not look like (and be treated) like they were homeless. To them, simply being able to use a washing machine, having a secure place to store clothes, and having access to a shower when they are done with work would allow them to maintain a better job. This, in turn, would provide income to fund a better life.
- c. *Reliable transportation*: For several, access to a reliable vehicle would provide the necessary mobility to work better jobs and to reach available sources of food. While many have solved this with the bus system or friends, others need to get to locations not accessible or serviced by buses.

## UNDERSTANDING THE CONSEQUENCES

- 24. For many participants, food is no longer something that brings families and friends together, but is actually causing the exact opposite...embarrassment and isolation. Many participants had deeper philosophical beliefs or memories related to how food has brought people together or been central to sustaining relationships. Now, individuals often have as much hunger for healthy, meaningful interactions with others as they do for having more food on the table.
- 25. Many participants are hungry for community and compassion as much as they are for food: The communal experience of preparing and sharing food together has become rare, though places that serve free meals tended to develop small groups that regularly eat together. It is more common that the embarrassment of food scarcity also isolates people from their family and friends as they attempt to hide that reality. While numerous stories were shared about growing up in the kitchen and around the dining room table, the experience today was summarized by one participant as "eating at home alone or sharing a table (with people you may or may not like) at a center serving a hot meal." This, in turn, causes many to compound their social concerns as they lose out on the enjoyment they used to have 'breaking bread together" and seeing how meal time can "facilitate goodness".
- 26. The barriers to access food sources were significantly more likely to be emotional than physical: Seven participants indicated having reliable transportation as a challenge. It was commonly ranked one of the lower challenges, and the concern mainly related to maintaining their existing vehicle or being able to afford gas. A few mentioned transportation as a barrier to being able to access food resources. More common barriers included:
  - a. *Embarrassment*: Many waited as long as possible to seek help because they could admit that they actually needed it. Those that are doing all they can to remain self-sufficient may be the ones least likely to pursue or accept it due to their own pride.
  - b. Sense of (not) belonging: Participants almost always entered an organization feeling like an outsider. For one, this meant not feeling she could utilize a church-based food pantry because she assumed it was intended to only serve members of that church.
  - c. *Baggage*: Most participants have experienced a variety of negative, and even traumatic, events in their life that have taught them to be defensive and question the motives of others. As one person described, "I walked in with a boulder on my shoulder and it took time to realize these were good people."
- 27. Healthy foods are battling several negative perceptions that limit prioritizing them on a shopping list: Most participants can share past negative consequences associated with healthy food. These combine to limit how much effort or money is put into getting fresh food, compared to the ease and comfort associated with less-healthy foods.
  - a. They have a limited shelf life, creating a narrower window when they need to be consumed and increasing the amount of waste when they are not consumed fast enough.
  - b. When served in meals (such as school lunch), fresh or healthy foods are often proportioned in insufficient quantities to satisfy one's hunger, particularly compared to the portions of less healthy foods.

- c. They do not "stick to the ribs" and provide a satisfying, sustained sense of being full.
- d. Often, they are not prepared in a manner that matches the taste or flavor preferences many have. Of course, many recognize that healthy foods *can* be made to taste good (but that tends to eliminate or offset the healthiness).
- 28. Participants are prisoners to only knowing their own reality, which is a result of their past choices and habits: Throughout the interviews, it was clear that a limited number of participants believed a change in their diet would dramatically change their life. People are unaware of how their diet may be compromising their quality of life, with one participant admitting she was unaware of the severity of her malnutrition earlier in life until she experienced her skin literally tearing open because it had become so weak. While less severe, it is likely that many other participants are also struggling with known or unknown health issues that are rooted in their poor eating habits. This would include issues due to not eating the right foods, and surviving on too little food, both of which may be masked by the fact that participants do not perceive they are going hungry. Some participants shared beliefs that other significant unrecognized consequences come from lack of physical and mental activity and always turning to cheap foods that satisfies their hunger, not better foods that provide fuel.
  - a. A few participants shared stories of changes they made and how they finally recognized the difference only after committing to better decisions. The consistent storyline was "I had no idea how much better things could be after <decision X> until I experienced it myself. I just wish I had done it sooner."
  - b. Even homeless interviewees tended to accept their reality as normal. When asked to describe the experience, only one (recently homeless) made his situation sound like he was suffering. While certainly not a pleasant existence, individuals seemed to almost be content or accepting of their situation, with the biggest complaints being insects, noisy neighbors, and occasional summer days that get too hot (but less concerns about being too cold in winter).
- 29. Defining a healthy diet is vague, leading to most participants concluding they are doing fairly well, even if they know they could be doing better: With the exception of pure junk food, participants were consistently able to look at any other food they liked and rationalize how it had some type of nutritious content that justified eating it. Several even believed that fairly unhealthy foods could still be considered healthy as long as they are consumed one serving at a time.
- 30. The concept of healthy eating is primarily at the food-type level, not the nutritional-content level: Few participants are reading labels or making decisions based on what that label says. It is more common to evaluate how healthy one's diet is (or to justify choices) based on the following:
  - a. For some, healthy eating is measured by how much food is consumed (serving size). As one rationalized, "I know we don't overeat. No matter how much I make, we each only eat one serving so I know we're eating healthy."
  - b. For others, healthy eating is based on the form of the food. Several had the perception that canned vegetables were significantly less nutritious than fresh or frozen. Others

- trusted food companies to formulate foods the right way (like breakfast cereals that contain "10 essential vitamins and minerals").
- c. Others felt they were eating healthy as long as they were maintaining a variety of foods in their diet. They were aware of the 'food plate' recommended in schools, and assume their diet is healthy enough as long as they're regularly incorporating each type into it.
- 31. While it was the unique perspective of just one participant, she seemed to have insightful observations about some shortcomings of how Americans have been trained to view food: This individual articulated how Americans turn to unhealthy, cheap, caloriedense foods when money is tight while those in Mexico would view this as completely irrational. When money becomes tight, Mexicans are more likely to focus on getting fresh, nutritious, healthy foods and not just options that simply fill up the belly. In a similar vein, she also observed how many Americans would be put off by the appearance of fresh meat markets in Mexico, but locals actually embrace the experience and presentation as evidence of how fresh the meat is. Summarizing the situation in her own words, "food in the U.S. is trash."

#### ADDRESSING THE PROBLEM

- 32. People may rationally understand and acknowledge that their life may be a result of their own choices, but conversations indicated this did not translate to consistently making the right or best choices to improve their situation: Participants generally did not blame their situation on others, but were willing to take ownership and be accountable. Even when one's downfall was due to an unexpected accident or health condition, they typically recognized how their lifestyle might have contributed to the accident. At the same time, most acknowledge that it would be difficult for them to relive their life and make significantly different or better choices. Individuals have regrets, but those regrets often offset by a sense of acceptance that they were destined to experience the journey they have.
- 33. Almost all participants held to the belief that they would eventually get to a better place in the future: This consistent sense of optimism was a source of hope that contained the unpleasant parts of one's life to being viewed as temporary, even if they had remained in the same state for years. It appears common to fixate or rely heavily on a single event (like getting approved for disability or getting accepted into HUD housing) to suddenly alter one's path.
- 34. **Having a strong support network of friends or family is critical**: Fortunately, the majority of participants had this need met, but those that were struggling the most lacked it. The value of this network was not as a direct source of food, but one of moral support, information and access that all work together to ensure needs are met. Those without a network were more likely to lack transportation, have lower awareness of various organizations that offer help, and have no safety net to provide various forms of help that prevent a small issue from spiraling into a big one.
- 35. It is common for individuals to struggle through transitions, feeling like they are taking two steps forward and one big step back: Many examples were shared where a responsible decision, like taking a slightly higher paying job or having a boyfriend move in to save rent, resulted in an immediate and negative consequence (often related to the reduction or loss of food stamps) that significantly offset the benefit of the good decision.
  - a. As one participant described her reaction to losing \$200 in food stamps after declaring her \$9 per hour job, "so I guess I need to decide if I want to get a slightly higher paying job and lose my support or stay low income just to keep that support."
  - b. Several other participants discussed how transitioning from being homeless to renting an apartment brought a wave of new monthly bills that were difficult, if not almost impossible, to immediately adjust to. As one said (paraphrased) "while I really want to have my own place I don't know how I'm going to suddenly be able to pay a whole bunch of new bills."
- 36. Participants consistently talked about the need for support through this transitional phase, and not having a significant or sudden elimination of that support: Participants shared how good changes like getting a higher paying job or moving into safer (but more expensive) housing also cause disruptions, new responsibilities and new expenses. Simultaneously losing or significantly reducing other forms of support (like food stamps) sets

some up for failure as the benefits from the improved situation are not fully or immediately gained. Instead, they initially become even more vulnerable as the support that allowed them to reach that better situation is removed. While these events are steps in the right direction, they also represent periods when individuals may need even more or different support as they establish their new normal.

- a. One participant was fortunate to get a grant that phased-out over 6 month which allowed her time to adapt her budget to her new bills. Without that grant, she believes she would not have been able to establish her new life.
- 37. While additional education would most likely be needed and beneficial, it might be difficult to convince individuals to participate: While each participant likely has many areas where they could benefit from developing better habits or gain more knowledge, most also have a self-perception that will hinder their willingness to attend or engage with these educational opportunities, and the typical barriers to change that are common among all people. Participants also indicated limited willingness or ability to commit to attending events and several recognized that there is plenty of information already available online if they ever felt compelled to learn about a particular topic. Based on the interviews, specific areas where training or resources or peer-sharing could be most beneficial include:
  - a. *Shopping*: While each individual had a routine that worked for them, the simple nature of these routines would suggest there are ways to introduce new habits that help individuals save money on items they currently buy and discover better, healthier items would appeal to their household.
  - b. *Recipes and meal planning*: Here too, while each individual has go-to recipes that are easy to make and they know their household enjoys, there are most likely plenty of new recipes that could introduce healthier foods, still be enjoyed by everyone, and potentially cost less.
  - c. *Resource networking*: Individuals tended to seek out resources proportionate to their need, with some finding a single food pantry to fill the end-of-the-month gap while others utilized a dozen organizations at different times and in different ways. There are likely many situations where individuals are not aware of additional resources that are a good fit for their needs.

#### **OTHER INSIGHTS**

- 38. Participants, like most people, let their expenses expand to consume their available resources: Unlike those in better economic situations, this results in more difficult consequences when unexpected, or at least undesired "things happen" that disrupt the delicate balance many are surviving on. "Having enough money to pay the bills" would likely continue to be a challenge to the 12 participants facing it today even if their income increased, as evidenced by other individuals using a better paying job to quickly get into a better (more expensive) apartment.
  - a. More than one story was shared about an unexpected, premature or incorrect charge hitting one's bank account and causing it to go negative. This almost always cascaded into difficulty with other charges and a prolonged period before the charge was reversed.
- 39. Participants were split between those that just maintained knowledge of basic technology (like having a cellphone, email and Netflix subscription) and those that embraced using tools like Google, Facebook or Pinterest to stay connected, discover and learn. Like broader perceptions of knowledge, participants generally felt comfortable with the level, and limitations, of the amount of technical-savvy they have chosen to acquire. Ultimately, participants settled on the belief that they were as tech savvy as they needed to be, happily unaware of other ways they could learn to use technology to address their issues. Only a few seemed to really embrace the empowerment and freedom they could gain through access to more information and knowledge.
- 40. Getting or staying healthy was a significantly more common concern compared to having health insurance: 14 participants were concerned with their health while only 5 were concerned about their health insurance. Consistent with this, very few participants (primarily older individuals with failing health and fixed retirement income) described the dilemma of having to pick between paying for health-related expenses or having enough food to eat.
- 41. **Most participants view food as a flexible resource that is very malleable and can be 'stretched' when needed**: They recognize how their preparation and eating habits can be modified when necessary, but they also strongly believe unhealthy foods can go much farther than healthy foods (as one summarized it "the worst foods can stretch the farthest"). Many intentionally plan to prepare larger meals that will provide leftovers to be consumed over several days. However, participants were more likely to indicate the use of strategies to stretch food during the last week of the month, with few comments about managing food from the first of the month to anticipate and avoid severe scarcity at the end.

## IMPLEMENTING CHANGE (RECOMMENDED ACTIONS)

- 42. Consider developing subsidized solutions that fit between the 'full retail' price of buying products from stores and the '100% free' handouts through organizations: The majority of participants have monthly budgets they manage, with most including a food budget. A symbolic charge for food could not only create a greater sense of ownership, but potentially enable services to provide a greater variety of items, perhaps including meats or other items less likely to have a consistent free source.
- 43. Encourage expanded use of points systems and self-selection food banks: Participants consistently preferred the ability to pick their own food items versus having a pre-packed assortment given to them. This ensured they go home with food their household will actually eat. It also appeared to deliver an intangible sense of empowerment and satisfaction closer to a retail shopping experience.
- 44. Experiment with ways to help people feel like they are contributing to reducing food insecurity. This may be some form of symbolic co-pay, volunteer hours or other contributions based on each individual's skills and abilities, or opportunities to earn additional credits or points redeemable for food. It may also center on using gamification to create artificial incentives or rewards (like digital badges earned from exercise apps) that motivate desired behaviors. Based on interviews, many individuals would likely embrace programs designed as two-way relationships, where they are presented the opportunity to offer something in return for the help they receive: This type of symbiotic relationship can likely increase to overall amount of value or resources available to distribution within the community. Examples could include:
  - a. Having those with reliable transportation provide delivery or shuttle services to those without.
  - b. Having a forum for individuals to share their "tips and tricks" with others.
  - c. Compensating or incentivizing people for time volunteering or providing other services.
- 45. Explore ways to stagger what week is viewed as the "end of the month" for individuals: While peaks and valleys of supply and demand may not be recognized as an issue today, a variety of efficiencies could be realized by "scheduling" or "coordinating" when needs exist that allow for better distribution of resources through each month.
- 46. Work with local stores to learn how to better identify food that is approaching its expiration date and will most likely go unsold: The current system often delivers perishable food too close to the expiration date, with it either already spoiling or quickly spoiling before it can be consumed. Perhaps efforts could be made to help stores recognize value between an item being sold at full retail when fresh to being worthless once spoiled and allow organizations to purchase items at a discounted price prior to the items becoming spoiled.

- 47. Leverage the cumulative buying power of individuals to take advantage of bulk, clubsize discounts: While some participants made bulk purchases at 10Box, there was almost no utilization of Sam's Club. Budget and convenience made it more likely for participants to buy individual, and often smaller sizes that cost significantly more per unit of volume. In addition to free food, perhaps food pantries could sell portions of common items that are heavily discounted when sold in bulk. For example, instead of individuals buying 2-pound bags of rice at \$1.50 per pound, an organization could buy a 50-pound bag from Sam's Club at \$0.50 per pound and resell it at \$0.75 per pound. Participants get a substantial savings, while the organization more than offsets their costs to remain self-funded.
- 48. Coordinate 'fill the freezer'- style group cooking events: To bring a social dimension back to food, explore the potential to have a commercial kitchen host events where recipes are made in large quantities and divided among participants to take home for gradual consumption. This could simultaneously address multiple opportunities, including the desire for social interactions, the opportunity to share favorites and discover new recipes, being able to reduce the cost-per-meal, and helping households have more and better ready-to-eat meals on hand for future situations where time and money are scarce.
- 49. **Develop 'demo days', cooking classes or other techniques to let people learn about and sample better foods**: Retailers have long known the value of live demonstration and samples to capture interest and overcome barriers such as the fact that "people like to eat what they like to eat" (and aren't interested in the unknown). This same technique would likely be successful at teaching people how to incorporate healthier foods into their meal planning, discovering healthy recipes that are faster or easier to prepare or making meals stretch further or cost less per serving without becoming less healthy.
- 50. Be careful not to invest heavily in solutions that primarily improve convenience: While some people do need better access to food sources, easier access will likely increase how often and how much more mobile individuals take advantage of it. In the end, the vast majority of the benefit from more convenient solutions may go to people already accessing existing sources. Ideally, solutions should be designed to specifically improve access to those not able to utilize existing resources.
- 51. Study how other organizations motivate and allow people to do new habits long enough to experience a new reality: Change is only made when one believes the benefit outweighs the cost. Many techniques, like gamification (earning badges or rewards), progress trackers (fitness records), and controlled experiments (fixed diet plans and regular weigh-ins) help individuals see a clear benefit to motivate their ongoing commitment. Many that are food insecure have never had a healthy enough diet for a long enough period to see what it does or how it is better for them. Creating this experience is perhaps the best way to gain their interest and motivation to commit to permanently change habits.
- 52. Create an Ambassador or mentor program that connects those that have gone through difficult situations with those just starting to experience them: Participants consistently criticized the well-intended attempts from volunteers or advisors to show empathy and claim to "understand what you're going through." This would take advantage of the expertise and

- self-confidence many people shared regarding how to navigate support systems, facilitate socialization, and give ambassadors a much-needed sense of being a contributor.
- 53. Create communal "insurance policies" or "savings accounts" that require participants to regularly make contributions to (in money or other forms) and then have access to temporarily withdraw from the fund when needed: This self-insurance could then distribute micro-loans to address needs that typically amounted to a few hundred dollars or less while potentially creating greater self-regulation and accountability.
- 54. Pilot a program that allows people to pool expensive individual cell phone bills into group contracts to significantly reduce the cost-per user: While controls would need to be put in place and there could be risks associated with this, wireless access was clearly a necessity for all participants and one that most were paying a relatively high price for. This arrangement could include working with a local provider to configure others solution that benefit everyone.
- 55. Work with local electric companies to develop and test new ways to prevent or manage overdue bills: The current system is broken, creating unnecessary costs for everyone. Instead, a system that was designed to prevent bills from getting too high, going unpaid, having huge non-payment fees and disconnects should be better for all.
- 56. Work with local mechanic shops to set up discounted repair or maintenance services that absorb excess capacity: While transportation was not a common issue for most today, it was a frequent concern for the future. Many participants depend on having fuel be the only cost of car ownership, with little ability to address a check engine light, replace tires or perform other repairs.
- 57. Engage the startup community in Northwest Arkansas to explore developing an app that can connect those in need of food with those that have excess food: This could reduce the friction between sources of food and those needing it, while providing better coordination and tracking. It could be designed to provide scheduled exchanges or instant opportunities when ready-to-eat food is left over from events. This could include the use of commercial apps like Switcharoo (which happens to be based out of Bentonville) that already exist to connect supply and demand for other resources.
- 58. While food insecurity is a regional issue, its solutions may be more local, neighborhood focused. Creating points of access to food, food education, etc. for individuals in specific neighborhoods may be more sustainable, less expensive, and most cost-efficient, while simultaneously eliminating barriers created by lack of transportation. Points of distribution that are local may also indirectly improve social networks and social capital for those individuals that are lacking community and connectedness because of social, physical, or other related barriers.