



“Let’s Talk About Food”

“Food is the Glue”: Community Centres in the Illawarra and Shoalhaven Use Food as a Gateway to Supporting Wellbeing & Connection

RESILIENT & SUSTAINABLE FOOD SYSTEMS RESEARCH GROUP | UNIVERSITY OF WOLLONGONG

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SUMMARY

This evidence brief presents a comparative analysis of the "[Let's Talk About Food](#)" survey results, examining the differing responses from individuals who engaged through community centres versus those who responded online or via postal methods. Community centres act as key referral hubs, linking individuals with a wide network of support that extends beyond immediate food relief.

The data presented highlights that people attending community centres experience a higher severity of food insecurity (73% of adults and 73% of children), poorer diets and deal with more serious health issues than the wider community. Despite these challenges, they report a higher level of community support—likely a reflection of their direct engagement with these centres.

The pivotal role of community centres in supporting individuals facing these challenges is highlighted, demonstrating that **"food is the glue"**. Despite being under-resourced in their efforts to provide food relief, community centres find that food paves the way for connecting people to other critical support services, including healthcare, employment resources, education, and mental health care.

In response to these findings, **the Illawarra Shoalhaven Food Futures Taskforce was established**, bringing together stakeholders from local government, community organisations, health services, and food relief agencies to collaborate on integrated strategies addressing food insecurity and its associated health impacts across the region.

THE LET'S TALK ABOUT FOOD SURVEY

The "Let's Talk About Food" survey, conducted in the Illawarra and Shoalhaven regions, aimed to explore food insecurity, dietary habits, and health outcomes among residents. Community centres played a pivotal role by helping the [UOW Resilient and Sustainable Research Group](#) collect data from the individuals who walked through their doors, ensuring that the diverse range of community voices were heard. This brief compares the survey results of people who engaged via community centres with those who responded online or by post, revealing key differences in food security, health status, and dietary quality.

Thank you to all community centre staff and volunteers who helped to collect survey data and who tirelessly support their communities, and to every survey respondent.

COMMUNITY CENTRES IN THE ILLAWARRA AND SHOALHAVEN

Community centres are local organisations, often run by non-profits, government, religious groups, or community associations, that provide support services, resources, and programs to meet community needs.

Community centres throughout the Illawarra and Shoalhaven often provide a range of food relief services, including emergency food relief and hampers, low-cost groceries and community pantries, and free or low-cost community meals such as breakfasts, lunches, and dinners. Many centres also offer specialised services like youth-focused programs, student pantries, and mobile food vans to reach vulnerable populations. **However, many of these programs are un- or under-funded, limiting their capacity to meet growing demand.** Despite this, these services play a crucial role in addressing immediate food needs and act as gateways to broader health, social, and educational support.



WHAT IS FOOD INSECURITY?

It is a fundamental human right for all people in the Illawarra and Shoalhaven to be able to put healthy food on the table every day.

Just as access to clean water or shelter is considered essential, having healthy food is recognised by the [Universal Declaration of Human Rights](#) as a core component of a dignified, healthy life. Food insecurity occurs when individuals or households do not have reliable access to enough nutritious and affordable food. In line with definitions by the [World Health Organisation](#) (Figure 1), food insecurity is considered to range in severity from the experience of anxiety that food will run out (marginally food insecure), to a reduction of the quality, variety and amount of food consumed (moderately food insecure), or regularly skipping meals or at extremes, going days without any food at all (severely food insecure).

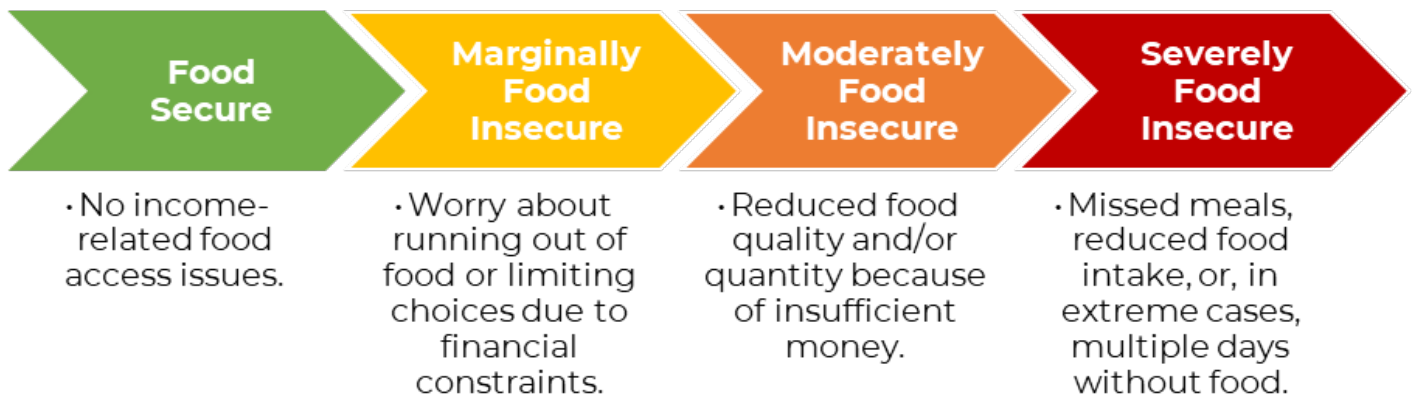


Figure 1

FOOD INSECURITY IN PEOPLE ATTENDING COMMUNITY CENTRES

Figure 2 shows that total food insecurity is much higher and more severe in respondents from community centres compared to online/postal respondents. Overall, **73% of households from community centres experienced food insecurity**, more than double the rate of 35% for online/postal respondents. Notably, severe food insecurity, where people report skipping meals and experiencing **hunger is much higher in respondents from community centres**, affecting 38% of households compared to 9% in the online/postal group.



Proportion of Households Experiencing Food Insecurity in from Community Centres vs Online/Postal Surveys in the Illawarra and Shoalhaven (n=666)

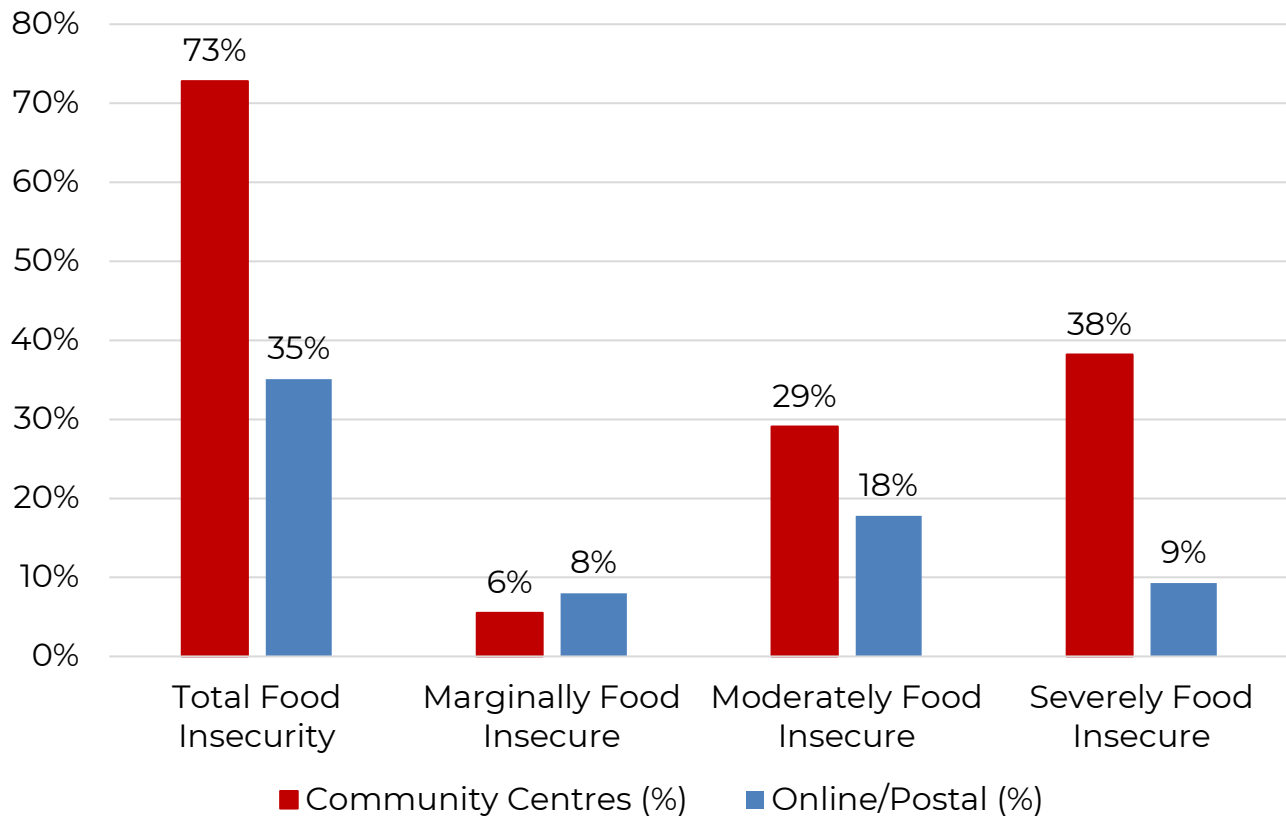


Figure 2

One person said:

“Due to the Cost of Living it has been many months since I purchased fresh food to live on. Fresh Veggies are through the roof & power bills are killing me.”

(Male Albion Park)

Another said:

“I put a lot less items in the trolley, cannot afford to go out for meals anymore, struggle to pay bills”

(Female, Lake Illawarra)



Food insecurity doesn't affect all household members equally. Parents often shield their children from the worst impacts by skipping meals, eating less, or making other sacrifices to ensure their kids have enough to eat. However, when food insecurity becomes severe, children are inevitably affected.

Figure 3 shows there is also a higher burden of food insecurity in the children from community centre participants versus online/postal respondents. Overall, 73% of children in households linked with community centres experienced some form of food insecurity compared to only 27% of those reached online or by post. While severe food insecurity—characterised by skipping meals and experiencing hunger—was relatively low in both groups (7% versus 2%), there is a high prevalence of marginal and moderate food insecurity. A third (33%) of children in households linked with community centres were marginally food insecure and another 33% were moderately food insecure, underscoring that a substantial portion of these households face challenges feeding their children healthy balanced meals.

Proportion of Children Experiencing Food Insecurity from Community Centres vs Online/Postal Surveys in the Illawarra and Shoalhaven (n=123)

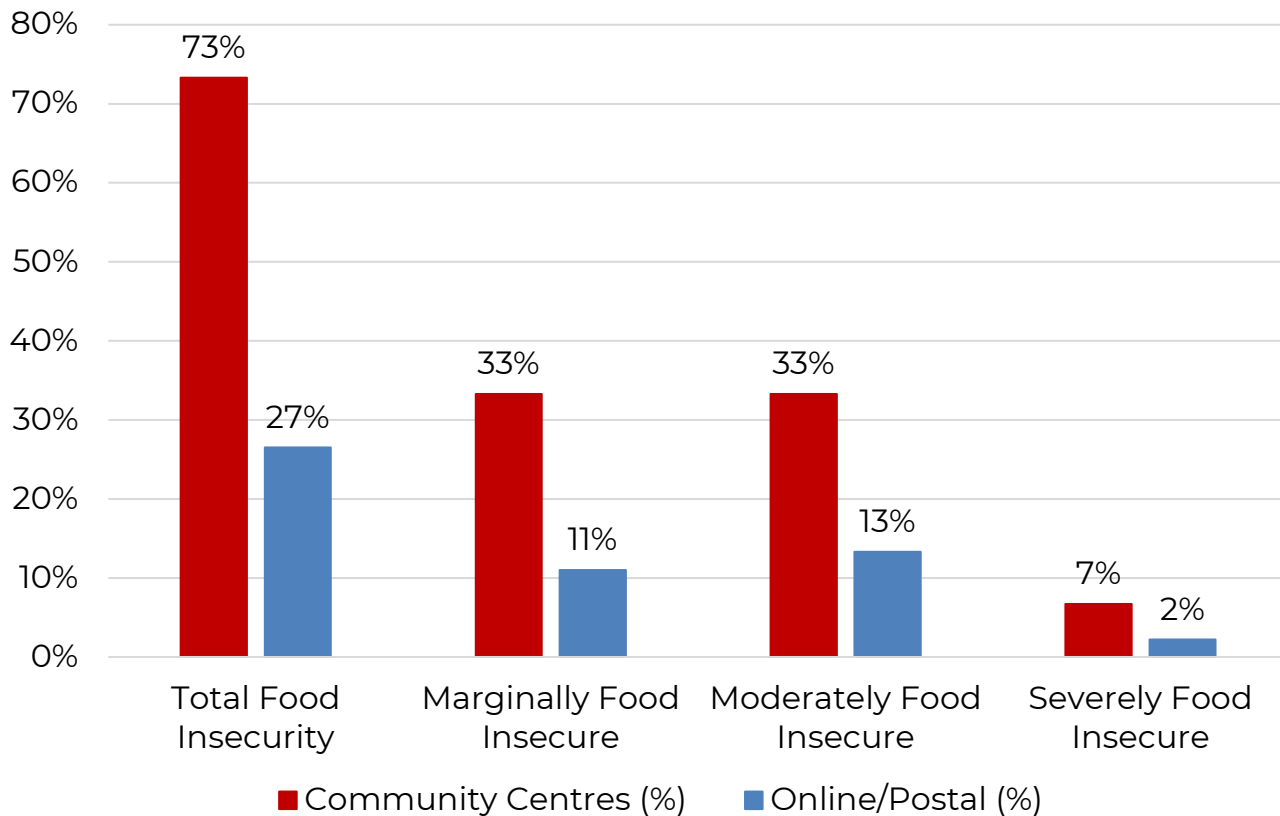


Figure 3

Quotes illustrate the difficult choices and compromises made by families facing economic pressures. Many respondents described the need to prioritise children's needs and essential bills over purchasing a full range of food, leading to reduced quality and quantity in their groceries. This has not only affected the nutritional value of the food they buy—shifting from fresh fruits and vegetables to more affordable snack foods—but has also impacted their social lives, as some avoid inviting friends over due to the strain on their limited resources.



“We prioritise kids needs ... then bills... then food”

Father, Warrawong

“I don't ever do a 'full' shop anymore, my daughter and I just get by with whatever we have and try to make it stretch. It puts a strain on friendships because I don't want my daughter to have friends over because we don't have enough food to share.”

Mother, Port Kembla

“With having 2 young kids we have to sacrifice other things so they can eat fresh fruit and veg”

Father, Bellambi

THE HEALTH OF PEOPLE ATTENDING COMMUNITY CENTRES

Community centre survey respondents report significantly higher health challenges compared to those reached online or by postal methods (See Figure 4). A greater percentage report a health condition or disability affecting daily activities (42.9% vs. 28.3%), alongside higher rates of fair to poor physical (37% vs. 20.8%) and mental health (38.9% vs. 20.3%). Additionally, diagnosed conditions such as high blood pressure, mental health issues, and type 2 diabetes are markedly more common among community centre attendees (see Figure 4).

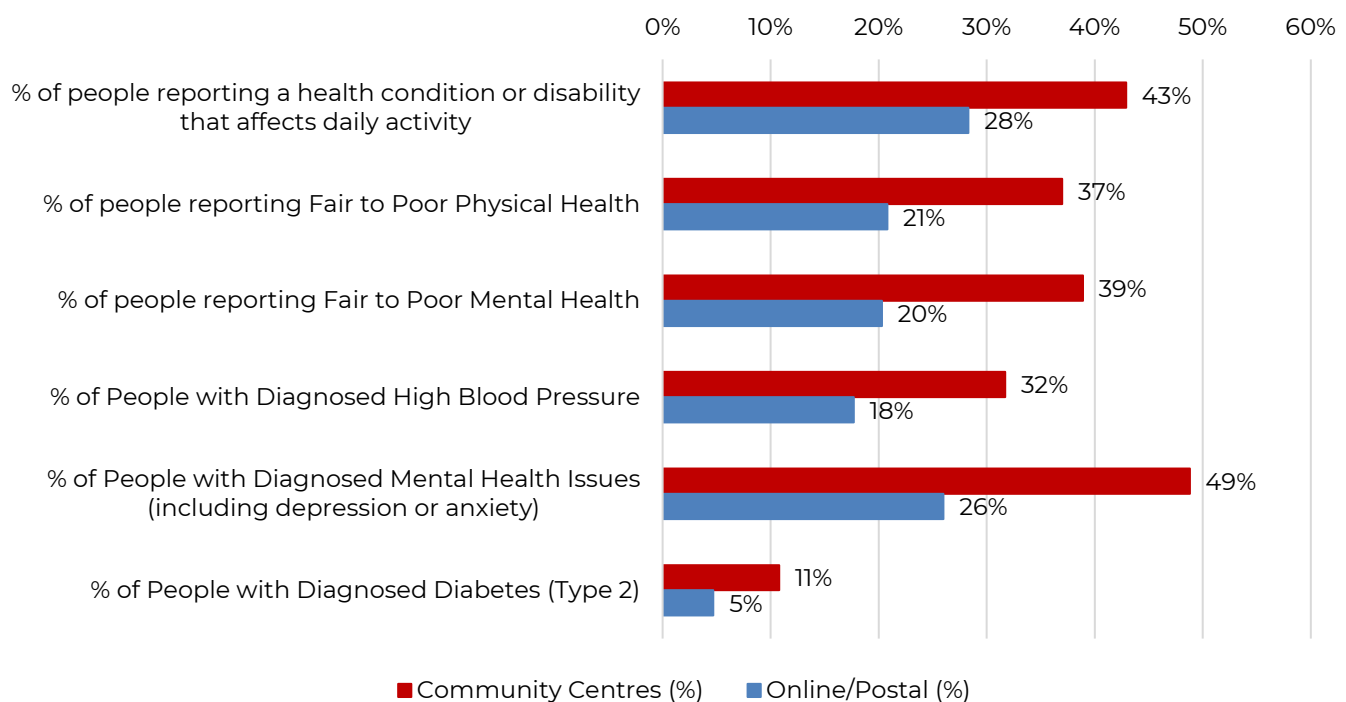


Figure 4



THE DIET OF PEOPLE ATTENDING COMMUNITY CENTRES

According to the [Australian Dietary Guidelines](#), a healthy diet should include a variety of nutrient-dense foods—especially fruits and vegetables—while limiting discretionary choices like sugar-sweetened beverages. In our study, a greater proportion of individuals attending community centres reported poorer diet quality (Table 1). Nearly all faced cost barriers to achieving a healthy diet, with 78% acknowledging cost as a hurdle, compared to 59% of online/postal respondents. Only 6% of community centre users consume the recommended 5+ servings of vegetables versus 14% of online/postal respondents, while more than a third (35%) of community centre respondents reported consuming less than one serving of fruit daily, as opposed to 17% of the online/postal group. Moreover, individuals using community centres are more likely to consume higher quantities of soft drinks.

Table 1 Comparing Dietary Factors Between Respondents from Community Centres vs those recruited Online/Post

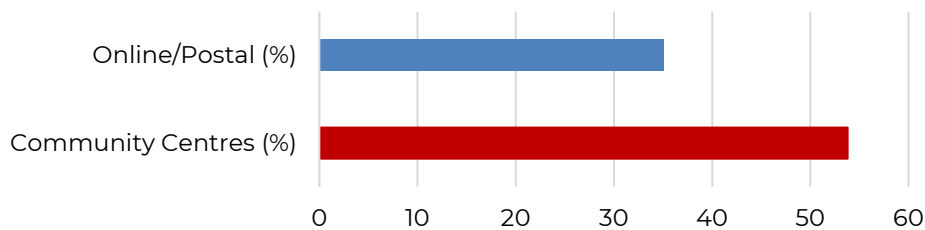
| Category | Subcategory | Community Centres (%) | Online/Postal (%) |
|---------------------------------|--------------------------|-----------------------|-------------------|
| Diet Quality | Excellent/Very Good/Good | 65% | 88% |
| | Fair/Poor | 35% | 12% |
| Barriers to Healthy Diet | Cost of Food (Checked) | 78% | 59% |
| Vegetable Consumption | I don't eat/ <1 serve | 11% | 5% |
| | 1-2 serves | 63% | 39% |
| | 3-4 serves | 20% | 43% |
| | 5+ serves | 6% | 14% |
| Fruit Consumption | I don't eat/ <1 serve | 35% | 17% |
| | 1-2 serves | 50% | 65% |
| | 3-4 serves | 15% | 17% |
| | 5+ serves | 2% | 2% |
| Soft Drink Consumption | 0-<1 cup | 54% | 82% |
| | 1-2 cups | 24% | 14% |
| | 3-4 cups | 13% | 3% |
| | 5+ cups | 9% | 1% |



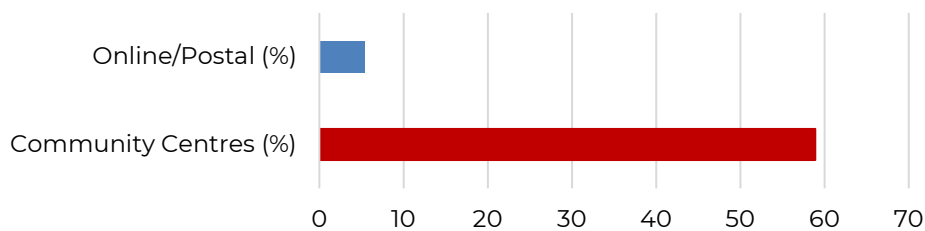
FOOD RELIEF PROVIDED TO PEOPLE ATTENDING COMMUNITY CENTRES

The data indicate that community centre users are significantly more likely to feel a sense of community involvement (53.8% vs. 35.1%) and to have used the [FFI Low cost and free meals directory](#) (59% vs. 5%) than online/postal respondents. This suggests that attending a community centre helps people form stronger social connections and stay informed about food security resources. By offering direct support and linking individuals to tools like the meals directory, community centres play a critical role in fostering both community engagement and improved access to nutritious meals.

% of people who feel part of the local community



% of people who used the Low-Cost and Free Meals Directory



STAFF PERSPECTIVES OF FOOD RELIEF IN COMMUNITY CENTRES

Community centre staff report an urgent need for both health and dietary support within the populations they serve. Despite receiving minimal direct funding for food relief, these centres often act as a vital first point of contact for people seeking broader assistance. By providing meals, staff can connect community members with essential health and social services, helping them address underlying challenges. However, inconsistent funding limits the capacity to plan, expand, or sustain these programs—even as demand grows. Staff consistently advocate for more reliable support to effectively meet rising needs and improve overall health outcomes.

One community centre manager said:

“Food is the gateway to relationship building, and relationships are the gateway to early intervention. We cannot expect a community to feel safe enough to address the hard stuff if their basic needs aren’t met.”



“Food insecurity cannot be viewed in isolation—it’s a doorway to deeper, life-changing support.”

**COMMUNITY CENTRE
VOLUNTEER**

*“I once met a young man who avoided mental health services for years due to childhood trauma. **Over shared meals, conversations when providing a bag or groceries, and laughter about odd-looking fruits, he built the trust and capacity to seek help.** He has now engaged in eight solid months of mental health support, improving his health, housing stability, and overall wellbeing.”*

COMMUNITY CENTRE MANAGER

*“It is heartbreaking that entire food operations remain unfunded, under-resourced, and reliant on donations, volunteers, and week-to-week deliveries. **The need is undeniable, but without permanent resources, sustainable impact remains just out of reach’***

COMMUNITY CENTRE MANAGER

“Food is the glue that brings us together.”

COMMUNITY CENTRE VOLUNTEER

WHERE NEXT?

The findings from the *“Let’s Talk About Food”* survey underscore the urgent need for a multifaceted approach to address the disparities in food security, health, and dietary quality revealed between community centre participants and the wider population. Ultimately, breaking the interlinked cycle of food insecurity, poor diet, and compromised health will require coordinated efforts across funding, policy, and programmatic fronts. In direct response to these findings, the **Illawarra Shoalhaven Food Futures Taskforce** has been established bringing together a diverse coalition of stakeholders, including representatives from community centres, food relief agencies, local government, health services, researchers and community advocates. The Taskforce aims to develop regionally tailored solutions that strengthen local food systems, improve food access, and promote community wellbeing. Specifically, the data calls for:

1. **Enhanced Funding Models:** There is a critical need for consistent and sustainable funding models that can support the ongoing provision of food relief and other vital services offered by community centres. These centres play a pivotal role not only in alleviating immediate food insecurity but also in facilitating access to health and social services, which are essential for long-term wellbeing.
2. **Integrated Health and Nutritional Programs:** Given the higher rates of health issues and poorer diet quality among community centre users, integrated programs that offer both health services and nutritional education should be prioritised. These programs can help improve health outcomes and empower individuals with the knowledge to make healthier dietary choices.
3. **Policy Advocacy:** UOW researchers, in partnership with the Illawarra Shoalhaven Food Futures Taskforce aim to advocate for policies that address the root causes of food insecurity and health disparities. This includes lobbying for changes in food policy, health care provision, and social services that directly affect the populations served by community centres.