



The Unrealized Health-Promoting Potential of a National Network of Food Pantries

Marlene B. Schwartz & Hilary K. Seligman

To cite this article: Marlene B. Schwartz & Hilary K. Seligman (2019) The Unrealized Health-Promoting Potential of a National Network of Food Pantries, Journal of Hunger & Environmental Nutrition, 14:1-2, 1-3, DOI: [10.1080/19320248.2019.1569819](https://doi.org/10.1080/19320248.2019.1569819)

To link to this article: <https://doi.org/10.1080/19320248.2019.1569819>



Published online: 28 Jan 2019.



Submit your article to this journal [↗](#)



Article views: 132



View Crossmark data [↗](#)

INTRODUCTION



The Unrealized Health-Promoting Potential of a National Network of Food Pantries

Marlene B. Schwartz^a and Hilary K. Seligman^b

^aRudd Center for Food Policy & Obesity, University of Connecticut, Hartford, CT; ^bDivision of General Internal Medicine, University of California San Francisco, San Francisco, California

A food pantry distributes free grocery items to individuals who cannot afford to purchase enough food to meet their household's needs. There are estimated to be 49,000 food pantries across the country that receive food from approximately 200 food banks associated with the Feeding America network. Food pantries have extraordinary reach, not only because there are so many of them but because they exist in every community and can be found in such varied places as churches, community centers, social service agencies, and schools. The only generalization that you can make about food pantries is that it is hard to make generalizations – some resemble small, full-service grocery stores and are open every day with the support of paid staff; others offer a pre-packed box of shelf-stable foods from a closet in a church basement that is opened by a volunteer for a few hours a week. What they have in common is their unique capacity to reach vulnerable households.

To date, the role of food pantries in providing food for millions of people a year has been virtually invisible in studies of the larger food ecosystem. As food pantries become increasingly important sources of food for many families, their relevance needs to be recognized. The number of households that turn to food pantries has increased in recent years, with many people using pantries for greater amounts of food and for longer periods of time. These trends are in part due to erosion of the social safety net, the declining real value of minimum wage, and the rising cost of other necessities (such as housing) in many communities. These trends are also related to limitations of the Supplemental Nutrition Assistance Program (SNAP). Although SNAP is the country's largest food assistance program, many food insecure people in the United States are not eligible for SNAP benefits, and many who are eligible either do not enroll or enroll but receive inadequate benefits. Food pantries fill in these important gaps. For example, pantries can provide food to SNAP households at the end of the month after benefits have been spent or provide food to households that are experiencing food insecurity but do not meet the SNAP eligibility requirements.

The rising prevalence of obesity and diet-related illnesses has become a national health crisis. To meaningfully address this crisis, substantive changes in food availability in every setting and at every level of the food system are

needed. To this end, over the past 15 years, researchers, policymakers, government regulatory agencies, health professionals, advocates, educators, and even some food manufacturers and retailers have been engaged in ongoing efforts to promote better nutrition. As a result, there have been meaningful improvements in nutrition messages and policies in all the federal food programs, and encouragingly, also evidence of changes in schools, workplaces, hospitals, restaurants, and retail grocery stores.

Food pantries and the broader charitable feeding system, however, have been mostly overlooked. Why? One reason is that nutrition and health researchers have lacked awareness of the size and scope – and therefore the potential importance – of the charitable feeding system. Another is that the system itself was focused on other priorities. The mission of food banks and food pantries is generally to end hunger (i.e. provide calories), not to improve nutrition, transform the food environment, or prevent diet-related illness. Thus, food bank and pantry performance have been traditionally measured by the number of pounds distributed and the number of people served, not the quality of that food.

It is now well established that food insecure individuals are at higher risk of poor nutrition and diet-related illnesses than those who have enough money for food. Therefore, continuing to leave the charitable food system out of sync with national efforts to improve nutrition and prevent diet-related chronic disease is likely to exacerbate income-based health disparities. As researchers turn to this topic, there are many unanswered questions about how clients experience food pantries, and the potential for these community resources to have a measurable impact on the health of the individuals served. Distributing food to people who are food insecure may seem straightforward, but there are multiple layers to these interactions. Are clients given a prepackaged bag of food, or are they given choices? Does the pantry connect clients with other social and health services? Do clients feel respected by the staff and volunteers? How healthy are the food options, and are the items culturally and nutritionally appropriate for the community served? How prepared are the staff and volunteers to go beyond handing out bags of food? We believe there is tremendous potential in engaging pantries in the work of improving nutrition and health in the populations they serve. However, to do this effectively researchers need a clearer understanding of how pantries operate and where there are opportunities to work together. The first seven articles in this issue of the *Journal* were collected as part of a special series of papers in an effort to build this knowledge base.

The papers in this series fall into four broad categories. First, there are two studies (Bomberg et al. and Cooksey-Stowers, Martin et al.) that focus on understanding more about clients – their health concerns, how they feel about the nutritional quality of the foods they can access at pantries, and how going to food pantries fits into their overall food acquisition patterns. Second, there are two papers (Wetherill et al. and Cooksey-Stowers, Read et al.) that examine food pantries as organizations, with specific attention to staff beliefs about the

importance of nutrition in pantries, how confident they are about delivering nutrition information, and the types of nutrition promotion strategies that they think would or would not work in their pantry setting. Third, one paper takes on the question of what food pantries can do to better meet client needs. Martin and colleagues describe a model called “More Than Food” that addresses choice, connection, and culture, and provides evidence that this model helps clients decrease food insecurity, increase self-sufficiency, and improve diet quality. Finally, the last two papers (Parks et al. and Chiappone et al.) provide examples of how people coming to food pantries for food can contribute to efforts to improve the food ecosystem by sharing their perspectives about federal food programs, highlighting the importance of listening to the voices of the people who are most affected by policy changes.

Food pantries are a gift to the communities they serve, but they have largely been unexamined by health researchers. We hope that all the papers in this special issue of the Journal inspire others to examine how food pantries can be leveraged to promote health equity in our society.