

5.

Material deprivation and food insecurity: perceived effects on mental health and well-being

Vasco Ramos

Nádia Salgado Pereira

INTRODUCTION

According to the Food and Agriculture Organization FAO (1996), “food security exists when all people, at all times, have physical and economic access to sufficient safe and nutritious food to meet their dietary needs and food preferences for a healthy and active life”. Original conceptualizations, dating from food crises of the 1970s, linked food security with supply, availability, and price stability of foodstuffs at the national or regional scale. Further understandings, namely Sen’s (1982) work, showed that famines and food poverty were not necessarily the result of supply failures, but derived from distribution problems and specifically from a lack of entitlement to food within a given context. Over the last decades, debates about food security broadened what was originally a more restricted concept, centred on food supply, availability, and stability (Borch and Kjærnes 2016). Additionally, researchers have also considered food security as encompassing access to nutritionally balanced and socially acceptable food, aimed at achieving an active and healthy life (Truninger and Díaz-Méndez 2017). Current conceptualizations regard food security as an ideal situation on a continuum. On the other hand, food insecurity occurs when one or more of the aforementioned criteria are lacking. Thus, this phenomenon may differ according to its severity.

A shift of scales also occurred from the aggregate level (global, national, or regional) to the individual/familial level, and current definitions of food (in)security include subjective indicators. Regarding the household level, food security is a proxy of welfare, which exists whenever there is an availability of nutritionally adequate and safe food or the ability to acquire acceptable food in socially acceptable ways (Anderson 1990). Furthermore, food security entails that all members have access to food that satisfies their needs: intra-household distribution of resources may not ensure enough food for all, a facet of food insecurity less frequently assessed (Carletto, Zezza and Banerjee 2013).

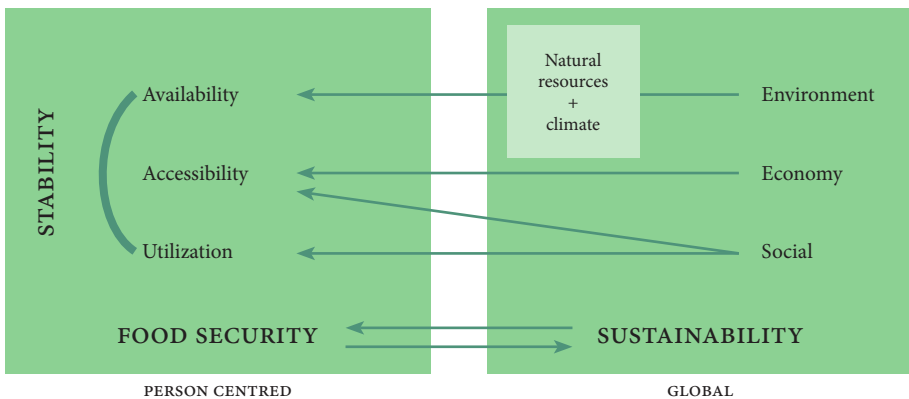
By incorporating a forward-looking dimension, reconceptualizations of food security have expanded the range of relatable issues and incorporated notions of sustainability (Redclift 2005; Berry et al. 2015). Additionally, the concept of sustainability as addressing *needs* strongly echoes Sen’s position that food security means *entitlement* to food. Despite efforts to bridge these concepts, the place of sustainability within the food security framework (or vice-versa) is still under debate. Some argue that sustainability is a feature of an enduring global system or process(es), while food security is ultimately a

person-focused concern (Berry et al. 2015). However, both frameworks share similar concerns regarding intergenerational justice and distribution. In fact, intergenerational justice is central to discourses about sustainability, since its initial definition as “development that meets the needs of the present without compromising the ability of future generations to meet their own needs” (Brundtland et al. 1987).

Notions of sustainability have been adopted by institutional actors and organizations, paving the way to different, sometimes even competing, discourses and agendas for sustainable development (Redclift 2005). A more comprehensive approach has been taken by the UN with the Sustainable Development Goals, adopted after the 2012 Rio+20 Conference. Poverty eradication (“in all its forms everywhere”) was considered as the foremost priority for sustainable development. Specific objectives were established and agreed upon by national governments, considering a multidimensional approach to poverty that included achieving food security, improving nutrition, and promoting well-being, among others. While many objectives seem to address issues more prevalent in the Global South and to foster changes in the global aid architecture, organizations such as the EU and all of its member-states also made commitments to achieving these goals within their borders.

In fact, food poverty and insecurity in the Global North have emerged as urgent social and moral concerns, increasingly recognized as central issues in the field of health inequalities (Dowler and O’Connor 2012). However,

Figure 5.1 *The interrelationships between food security and sustainability*



Source: Berry et al. (2015).

while food insecurity and poverty are sometimes mentioned interchangeably, differences do exist and these are not necessarily overlapping phenomena. Poor households can be food secure if they self-consume food crops or use reciprocity mechanisms. Conversely, high-income families are not inherently food secure: a large share of their income may be compromised by mortgages or personal debt. Moreover, while poverty is measured on the basis of income over time periods, food insecurity accounts for “periodic food shortages that may reflect transient income shortfalls and/or shock expenses” (Borch and Kjærnes 2016, 137). Thus, food insecurity may be transitory (periodic or seasonal) or permanent, when there is a long-term lack of access to sufficient food (Pinstrup-Andersen 2009). Notwithstanding these caveats, strong evidence shows that poor families are much more likely to be food insecure and resort to emergency help, even in high-income countries (Riches and Silvasti 2014; Pfeiffer, Ritter, and Oestreicher 2015).

POVERTY AND FOOD INSECURITY IN PORTUGAL

Even before the global financial crisis, Portugal ranked amongst the most unequal countries in terms of income distribution within the EU. But austerity measures adopted by the government, in return for a bailout loan from the IMF-ECB-EC troika, had a significant impact. According to Eurostat’s Standard Income and Living Conditions Survey, the Portuguese population at-risk-of-poverty, after social transfers, increased from 17.9% in 2011, to 19.5% in 2014, slightly subsiding in 2015 (19.0%). Severe material deprivation rates, which include eating a meal with meat, chicken, fish, or vegetarian equivalent every second day, increased from 8.3% in 2011 to a peak of 10.9% in 2013, falling to 8.4% in 2015.

Poor households were hit the hardest: income decline was steeper for families and individuals with lower incomes (Farinha Rodrigues, Figueiras and Junqueira 2016, 25-30). The crisis exposed the frailty of standardized measures to assess poverty. Falling family incomes drove the median income down and lowered the poverty line. Many families, once considered as poor, were artificially deemed as non-poor and thus non-eligible for social support, even when their income decreased or remained stable.¹

1 In Portugal, the median equalized income fell 10% between 2009 and 2014, while mean income dropped 12.2% during the same period (Farinha Rodrigues et al. 2016, 23).

Differences in risk of poverty mostly relate with family structure and age. Single parents with dependent children, single individuals, and couples with children are most at risk of poverty. During the economic crisis, families with children suffered a hard blow, with poverty rates increasing considerably (Leitão et al. 2016; Wall et al. 2015). According to Farinha Rodrigues et al. (2016), cuts in social transfers, namely in Family Benefits and Social Insertion Income had a decisive effect in increasing the level of poverty and in worsening the living conditions of poor families.

During the 2008-2012 period there was a surge in the number of individuals applying for emergency food aid across Europe (European Commission, 2012 cited by Davis and Geiger 2017).² According to the Portuguese federation of food banks, 232,754 individuals were provided with food aid in 2007, peaking at 436,418 in 2015.³ Data on food bank usage, however, is at the very best a rough proxy for the severity of food insecurity. Discussions about food aid and specifically food banks are increasingly politicized and ideologically contentious (Williams et al. 2016), a strong reminder that figures from such sources can suffer from double measurement issues and be over-estimated, for a number of reasons (Riches 1996).

As elsewhere in Europe, in Portugal there is a dearth of trend data on food insecurity. A handful of point-in-time surveys have sought to measure food insecurity in the Portuguese context. A recent survey (IAN-AF)⁴ concluded that in 2015-2016, 10.1 % of Portuguese families struggled to obtain sufficient food for all individuals due to low financial resources. Prevalence is higher among households that include minors (11.4 %). As much as 17 % of all families reported fearing running out of money before being able to buy more food. Additionally, 11 % claimed that they could not buy more food, while 15 % said that they could not afford to buy balanced and nutritious ingredients and meals.

2 Among others, emergency food aid initiatives include NGO food banks, canteens, and home-based meal provision, etc.

3 Data retrieved on October, 24, 2017 from <http://bancoalimentar.pt/article/24>.

4 IAN-AF – National Survey on Food Intake and Physical Activity was conducted by the U. Porto and DGS on a representative sample of 5819 individuals. The survey consisted of several modules and included a food security protocol, which adopted the Radimer et al. (1990) proposal. Food insecurity was assessed considering four dimensions: availability, access, use, and stability.

EFFECTS OF MATERIAL DEPRIVATION AND FOOD INSECURITY ON MENTAL HEALTH AND WELL-BEING

It is well established that populations' living conditions are negatively affected by material deprivation resulting from unemployment, low paid work, and job insecurity, with negative effects on both physical and subjective well-being (Marmot et al. 2012; Quinlan and Bohle 2009). Increasing social inequalities also exacerbate health differences between social groups, namely the prevalence of health problems and diseases. Individuals with lower socio-economic status seem to be more vulnerable not only to physical health diseases but also to mental health problems. Material deprivation and poverty have been associated with an increasing risk of common mental disorders that include non-psychotic disorders such as depression and anxiety. This relationship has been observed not only in developing countries but also in high income countries (Fryers et al. 2005; Lund et al. 2010; Weaver and Hadley 2009).

These findings are particularly relevant considering that mental disorders are a leading cause of individuals' disability in both low and middle-income countries (Lund et al. 2010; Whiteford et al. 2013). In fact, suicide and material deprivation appear to be linked to some extent. A study on social and material disadvantage and suicide mortality found a positive association between the two variables, especially for individuals not employed, not married, with low education, and low income (Burrows et al. 2011). In another study, unemployment was positively associated with suicidal ideations and behaviours (Iemmi et al. 2016). This relationship was also studied in the Portuguese population. Results from recent studies (Santana, Costa, Marí-Dell'Olmo, et al. 2015; Santana, Costa, Cardoso, et al. 2015) suggest a positive association between material deprivation and suicide rates during the period of economic crisis in Portugal.

Other negative events that have been associated with material deprivation such as physical health diseases, difficulty in accessing health services, and social stigma may enhance mental health problems (Saraceno, Levav and Kohn 2005). This also seems to be the case of food insecurity. Families' uncertainty in acquiring food in sufficient quantity and quality has been associated with an increased risk of common mental disorders including depression and anxiety as well as alcohol abuse (Jones 2017; Lund et al. 2010). Gender differences point to a higher prevalence of depressive and anxiety disorders in women, and higher alcohol abuse in men (Fryers et al. 2005).

The studied impact of food insecurity on mental health may be related to the psychological distress experienced by families lacking food in adequate quantity and quality. Stress levels related to ordinary tasks, such as preparing family meals on a daily basis, may be heightened when access to food supplies is scarce, uncertain, or if supplies are plentiful but monotonous. In fact, some studies have revealed that food insecurity positively associates with stressful life events and post-traumatic stress disorder (Weaver and Hadley 2009; Mugisha et al. 2015).

Therefore, it is not surprising that food insecurity seems to negatively influence subjective well-being, defined as the evaluation of life in terms of satisfaction and balance between positive and negative affect (Keyes, Shmotkin and Ryff 2002). In this regard, a recent study revealed that food insecurity explained lower emotional well-being beyond other measures of living conditions (Frongillo et al. 2017).

A possible explanation for the previous findings may relate to the burden of social expectations regarding parental roles such as being able to satisfy children's basic needs, and to provide children with food in sufficient quantity and quality. Caregivers have to deal with the insecurity with respect to future plans as well as with feelings of inability and helplessness regarding their parental roles. Feelings of shame, guilt, exclusion, resignation, and helplessness have been reported by parents experiencing food insecurity which seem to be similar across different cultures leading to severe distress in the house ecology (Bernal, Frongillo and Jaffe 2016). Some of these feelings may also derive from socially unaccepted practices to acquire food such as resorting to food banks or depending on social or family financial support. Individuals may experience distress because they are not eating in a culturally appropriate way even if they eat an adequate amount of nutritious food.

The negative impact of food insecurity on emotional well-being helps to explain why a higher prevalence of common mental disorders was found in families experiencing food insecurity, as stated above. In fact, several studies stress the relationship between food insecurity and depression and anxiety in mothers caused by psychological distress related with feeling unable to provide healthy food to their children (Kruger and Lourens 2016; Hadley and Patil 2006). Although a greater number of studies were conducted with women on account of being seen as families' primary caregivers, the same psychological effects were also found in men (Jones 2017; Althoff, Ametti and Bertmann 2016).

A less explored topic is the relationship between mental health and physical problems in individuals experiencing food insecurity. Some findings include

reports of physical symptoms associated with negative emotional experiences such as sleep disorders, headaches, and nausea (Weaver and Hadley 2009). This suggests that some physical problems may refer to somatizations of psychological nature. However, this connection would need further analysis.

In this chapter we address the relationship between food poverty and mental well-being of low-income parents in Portugal, drawing on interviews carried out with individuals in areas of the Lisbon Metropolitan Area experiencing food insecurity.

THE PRESENT RESEARCH

This chapter stems from the *Families and Food Poverty (FFP)* project, an ERC-funded research project, coordinated by Rebecca O’Connell (Thomas Coram Research Unit – UCL-IOE).⁵ The *FFP* project examines the extent and experience of food poverty among low-income households in Portugal, the UK, and Norway in an era of austerity.

This study drew upon a subsample of the Portuguese participants. The key aims were to explore the lived experiences of food insecure parents, and also to assess how these experiences relate with emotional well-being. First of all, we aimed at understanding how parents frame the issue of food insecurity in their life story, and which dimensions of food insecurity impact individuals the most (availability, access, utilization, stability). Another aim was to apprehend the extent to which the experience of food insecurity affects parents’ emotional well-being, and how this may relate with their perceptions about their parental roles.

METHOD AND PARTICIPANTS

Fieldwork took place in three areas within the Lisbon Metropolitan Area. While the research project does not seek representativeness at the national level, we sought a “contrast of contexts” and diversity in choosing study areas. Several criteria were taken into account considering their link with food insecurity,

5 The research is funded by the European Research Council under the European Union’s Seventh Framework Programme (FP7/2007-2013)/ERC grant agreement 337977. The project is coordinated in Portugal by Monica Truninger and Karin Wall.

namely levels of social deprivation, ethnic diversity, population density, and degree of urbanization. Amadora (municipality, suburb of Lisbon) was chosen for its ethnically diverse population and middle to high level of poverty; Marvila (borough of Lisbon) was chosen for its high level of social deprivation; São João das Lampas and Terrugem (rural parish council of Sintra) was chosen for its lower level of population density and middle to low level of social deprivation.

Participants were recruited using surveys sent to schools and through NGO's Screening information from surveys and NGOs enabled a purposive selection of parents facing hardship and food insecurity.⁶ A total sample of 45 cases was obtained, split equally between the three areas. A level of emotional distress was present in the interviews of most cases, sometimes expressed through facial expression, and other non-verbal communication (e. g., crying). However, the lack of emotional well-being was seldom verbalized explicitly and directly by the participants. Since the main objective of the present chapter was to assess and explore possible implications of food insecurity on parents' emotional well-being, a subsample of four cases was selected to portray this relationship. Thus, emblematic case-examples in which adults (parents, all mothers) directly expressed and verbalized being emotionally affected were purposely chosen by researchers. Fictional names were attributed to the participants in order to ensure confidentiality. Table 5.1 contains a brief sociodemographic description of the subsample.

Table 5.1 *Participants' sociodemographic description*

CASE IDENTIFICATION	GENDER	AGE	FAMILY STRUCTURE	EMPLOYMENT STATUS	LOCATION
Sara	Female	29	Mother, father, children: 11(f), 2(f)	Part-time store operator	Favela outside Lisbon
Carla	Female	39	Mother, children: 15(m), 5(f)	Unemployed	Flat in urban area (rented)
Eva	Female	46	Mother, father, children: 12(f), 10(m), 2(f)	Bakery assistant	Detached house in rural area (mortgage)
Ana	Female	42	Mother, father, grandmother, children: 13(f), 10(m), 2(f)	Unemployed	Flat in urban area (mortgage)

6 All individuals were contacted after giving consent. Participants were compensated with a €50 voucher for their participation.

MATERIALS AND PROCEDURE

In-depth interviews were carried out with food insecure parents who are responsible for providing food to the family. Out of 45 cases, 41 mothers were the main caregivers. Interviews were set up by phone and took place in locations agreed with the participants. The interview script included six major themes: current family circumstances; life history; eating patterns and food preparation; food shopping; income and expenses; food and wellbeing. Responses were recorded and fully transcribed. Interviews lasted between one and a half and three hours.

Interviews were analysed by researchers using a model of thematic analysis derived from a narrative analysis approach (Earthy and Cronin 2008; Riessman 2008). According to this view, the main unit of analysis resided in each individual case and focused on content. Interviews were read in their entirety, in order to produce a rich 15-20 page account/summary of each parent's narrative. Summaries were re-organized thematically, considering the following categories: (a) life story and current living conditions; (b) work and living standards; (c) food (in)security; (d) physical problems and diseases; (e) emotional well-being; and (f) depressive and anxiety symptoms.

This is an exploratory study, with no aims of generalization. The approach taken in this chapter was not envisaged from the outset and is not the main tool in the *FFP* project. Nevertheless, the interview script includes many typical narrative questions (i. e., family circumstances growing up; life events leading to current food insecurity), which allowed creating a link between the categories described above. Thus, the purposes of the analysis were to apprehend not only the story telling components of each individual's account, but also to establish a relationship between food insecurity and emotional well-being emerging throughout the interviews. However, this does not imply that individual accounts were held as fictional. Instead, the analysis intended to capture the possible reasons for interviewees to describe their distress in a specific manner according to their life story and events. Likewise, even though both manifest and latent contents were contemplated, the analysis withholds from diagnosing individuals or any pathologization of their behaviour.

RESULTS

CASE 1 – “FEELING THE SQUEEZE”

Sara and partner recently moved in with her father, who lives in a makeshift house. A few months back, Sara was living with her mother. Although the neighbourhood is being demolished and families relocated, she is not entitled to a new home.⁷ Children are staying at their grandmother’s because of poor housing conditions and work hours. Sara’s partner is unemployed and she works part-time at a clothing retailer. With their current income they cannot afford childcare, and thus Sara takes care of the children during the day. One year ago, when her parental leave ended, she resumed a full-time job and was barely making ends meet. She was entitled to two hours for breastfeeding. When it ended, she opted for the late graveyard shift (5am-10am) working part-time, as work and childcare were irreconcilable.

Sara reported negative feelings in relation to her current living conditions as well as her role as a caregiver. Feeling unable to create the proper environment to live with her children is emotionally affecting her. Feelings of helplessness derived from not being able to fulfill her daughters’ needs, and to conform to the social expectations as a mother.

Psychologically bad, really really bad, because it is very difficult for me to be away from my daughters because I cannot keep them there, this is something that psychologically affects me, really, and this situation is not doing me any good.

(...) right now I am not well psychologically, and that also takes a toll, it does, people don’t have any notion but its really, really bad, we are working and I have always worked and don’t have any savings, don’t have any money to take a trip, to buy a gift for my daughters, or, even to buy everyday essentials, which I really, really struggle to afford...

Sara expressed feelings of worry in regard to her teenage daughter. She feels a lack of control and inability as a mother to be present when her daughter needs. Sara attributed this to her working conditions, and seems to blame herself for not being enough time at home to help her daughter and guide her.

7 Rules grant access to a second home only if eight or more people share the same household.

I'm worried because she is alone, she is alone for a long time (...) so I worry, why, because I need to work (...) but it worries me, it worries me because she is growing up and I don't have much control there (...) I can't, I can't.

After starting “to feel a squeeze”, Sara planned to migrate to the UK. She quit her job and was moving in with her brother, who promised to help in getting a job. However, when the Brexit vote happened, she was advised not to go. Sara was hyper-reflexive and very self-critical concerning this event, and blamed herself for not weighing her options.

But I didn't think twice, I should have possibly considered things more and not taking a parachute jump, isn't it? I was a little bit irresponsible in this sense.

As she is still considered to be living in her mother's household, Sara is not entitled to social insertion income and her request for help from the food bank was denied. Sara relies on the help in kind from parents and in-laws. Buying food is her utmost priority, but the food budget is very tight. Consumption of fish, meat, fruits, and vegetables has been reduced. Pork, pasta, eggs, and rice are the staples. Sara also stopped buying snacks, treats, and soft drinks. Nevertheless, she was proud of making the most of whatever money she has.

I can't and referring to food, yes, buying meat, I started to buy less, in everything, I reduced in everything, really.

I did it and I arrived with my shopping bag full, that is to say, it allowed to eat yesterday and today, obviously now, then I will have to find another way, isn't it, it won't be enough, but I did it.

As a caregiver, Sara pointed out that she tries to do the best to protect her daughters from knowing and experiencing the needs and the difficulties they are really going through. She also valued their access to appropriate food even if this involves being apart from her children.

I do everything for my daughters so they won't realize, I know what is going on but they don't, they don't, they don't really know, and I know how they are, I also know that they are having the diet that is more appropriate to them, I'm absolutely sure, yes.

Sara seems to be experiencing anxiety and depressive symptoms. Besides feeling guilty for choices made in the past which affected her children, she also reported pessimism when looking to both the past and to the future. She mentioned feeling anxious on a daily basis, almost as an embodied experience, described as a constant feeling of “start”.

I usually say that this year was the (exhales) I'm not going to say the worst year, but it was a really hard year, it was since the beginning and it seems like it is going to be like this until the end, always with this, always with a start, so I'm getting a little tired of this situation, yes.

CASE 2 – “A LOT OF THINGS FELL APART”

Originally raised just outside of Lisbon, 13 years ago Carla moved 40 kms west, in order to live close to her then in-laws. She had many jobs over the years (house-cleaner, cook, etc.). Currently she is unemployed. Her last full-time job was as a geriatric assistant. Carla has a history of physical and mental health problems. Besides severe back problems, she recently suffered from depression and attempted suicide. It is difficult to determine if she had previous physical and psychological problems or if they were triggered by the worsening of her life conditions. These issues are attributed to being fired for taking too many sick leaves as well as to the difficulty in finding a job.

Carla is not entitled to unemployment benefits, as she was working undeclared. Her sources of income are the Social Insertion Income (SII) and child benefits (total averaging €560). Carla receives alimony in kind from her ex-partner every week (i. e., foodstuffs). Additionally, she and her former partner are jointly liable for a bank loan. As Carla cannot pay, the case is in court. Furthermore, she has not paid rent for the last four months and will most likely be evicted soon.

Carla needs to take care of her 5-year-old and there are no affordable daycare facilities nearby. She has no network support to rely on: she became physically and emotionally estranged from her parents, and does not receive any support from them. Her older daughter was institutionalized in the past due to anger management issues and substance abuse. Carla mentioned that her children need to be confronted with life's difficulties, which she believes to be caused by external motives, out of her control.

Life costs, life hurts, life... you have to do something to get something. (...) I don't believe that we should protect children from knowing everything, to not knowing, no, sooner or later they will know and they will rebel, that's why I have got my oldest daughter outraged, so it's no use.

Most of what Carla cooks comes from what she gets in her monthly visit to the local food bank, located in a nearby village not directly connected by public transportation. Getting there is complicated and expensive, and Carla needs to call in favours from neighbours to get there. As food banks provide a limited range of products and, in order to add variety, Carla decided to stop paying rent.

Hence the months in arrears, most of the times, although I have a food bank, in S*, it isn't that good (...)

According to Carla, her family cannot afford to have a satisfactory diet because something always fails in managing the budget. As a consequence, her children eat less than what they would like when ingredients are missing.

I know that for a "correct" diet one should often serve soup, for example. (...) Because in order to pay rent, I don't consider food and then something is missing.

Because of the prices, because of the situation I have fallen into, therefore, a lot of things fell apart.

On the one hand, Carla feels anguish in being unable to give her children what she believes other parents with better living conditions are able to provide. On the other hand, she feels proud of being able to prepare quality food for her children despite their difficulties. This duality in the way Carla views her life seems to help her to cope with their daily problems, probably preventing her from feeling depressed considering her past psychological problems.

It's like this, it's so difficult, it's such an anguish having children and not being able to provide them with what so many can provide (...) And that's what I have told my son, today, deep, deep down, I, there it is, I am proud to live like I do because we keep on fighting [for it] day by day.

Sometimes, I feel sadness, sometimes I feel proud, because many are not able to survive with the amount of money that I have.

CASE 3 – “MONEY ISN’T ENOUGH”

Eva lives in a small village about 45 km northwest of Lisbon. She and her partner work low paying jobs, both making just above minimum income. Eva’s mother is retired and currently undergoing cancer treatment. Considering all sources (salaries, pensions, and child allowance), the total income of the household is slightly less than €1600. Were it not for the loan the family took to remodel the old rural house where they live, which eats up over a quarter of it, this modest income would suffice.

A narrative of sacrifice and personal tragedy shrouds this family. Eva’s father died immediately after she was born. Her mother struggled to raise Eva and her older brother with the help of a sister (aunt). Eva’s brother died at age 33 and her mother became sick afterwards. All these life events seem to contribute to additional stress in the family’s dynamic. Eva does not receive any material, economic, or emotional support from her extended family. When things get tighter, she resorts to friends for help, or asks for an advance on her salary.

It’s not enough, Money is not enough. Sometimes we get to the middle of the month and I ran out of money, I have to... Sometimes I ask for an advance from my boss, sometimes, it’s like it is – I ask for help. I have asked for help from many friends.

Eva’s aunt lives in the neighbourhood but some untold familial issue seems to have happened since Eva never mentioned any support coming from her. She is distrustful of everyone living nearby, claiming they have bad intentions. Her lack of trust in other people may be blocking additional external support, especially from neighbours and the local community. Eva tries to convey to her children the need to make efforts in life and to rely mainly on themselves.

No, people around here are false to each other. They just want to harm each other, do bad things to others, that is why I tell my children we should live our lives and let others alone. And know how to choose your friends, that is very important. It costs me a lot, going without help from anyone is really hard but you can do it.

Eva gets most of her groceries from local shops because they are farther away and transportation to the bigger and cheaper supermarkets is expensive. Additionally, she is allowed to run tabs on these shops. Usually, Eva buys less

fresh produce and fruit than what she needs. The family is also consuming less fish than before. Eva urges her children to have fish at school, but is worried because she feels that they do not have a good diet.

And so I buy, for example, if I am shopping for meat, fish... (...) and fruit, then I can't buy fruit. I will only buy meat, fish, potatoes, rice.

I try, but sometimes I know I can't. Sometimes fish is missing, and that is something they miss but sometimes fish is missing because it is too expensive and we don't buy fish.

Eva compares herself with her mother in making the choice to starve so that her children can have enough food. She seems to believe that being a good mother implies making sacrifices for her children. She also expressed feelings of incapacity in providing a better life to her children.

I didn't even go hungry...that would be better my mother was hungry many times, many times I ate bread with butter or bread with cheese. She wouldn't eat to have something for us. (...) I also didn't... well... If I realize that I don't have enough to feed my children I will go without food to give them.

(...) I would like to give them a better life, but no... well, maybe one day I can. Now I still can't give them what I want to. I give them what I can.

CASE 4 – “IF I HAD MY JOB, I’D FEEL HAPPIER”

Ana lives in a nicely decorated house in a lower middleclass Lisbon neighbourhood. Ana and her husband are unemployed since the companies they worked at went bankrupt due to the economic crisis. Before that both were making reasonable wages. The right to unemployment benefit ended, thus, their lone sources of income are *SIU* and child allowance (about €680). Both have worked undeclared jobs to supplement their meagre income (housecleaning, construction, etc.). These changes meant an abrupt change in the family's lifestyle (e.g., children moved to public schools; inability to pay mortgage). Periods in between social benefits are especially difficult and lead Ana to feelings of despair.

There is a very harrowing week, sometimes quite desperate... I can tell you sometimes I don't even have half a euro in my purse. Which is terrible! And very little in the fridge.

Ana also experiences feelings of incapacity concerning her unemployment condition, which seems to have negatively affected the emotional well-being of the couple. As a coping mechanism, she acknowledges attempting to keep an aesthetic “façade” for both her children and outsiders, for example by preserving the cared-for physical appearance she had before losing her job.

I feel that if I had my job, I'd feel happier, would feel more capable... because I always enjoyed working a lot!

“[...] because who looks at me, won't say that in between pay checks I'm strapped... that my freezer is empty or full.

Currently the family food budget is extremely tight, and the quality of foodstuffs diminished over the last few years. Ana claims not affording to buy enough fresh food and to diversify meals. The family applied for food support but withdrew because she felt ashamed and guilty, believing that other people are more worthy of receiving help.

(...) I can tell you that sometimes I can't even look at chicken. [...] I open the refrigerator many times, at that most harrowing time of the month in terms of food! And I take anything out and can manage. And perhaps it's not the ideal meal, we should make.

I didn't insist, I sometimes feel ashamed, I'll be honest [...] I think I need it, although I have... There are people who really have nothing, right?! Hum, hum... but I feel I'm stealing someone's spot.

Ana seems to be emotionally unstable due to her current situation and cried several times during the interview, in particular with regard to being able to provide food for her children. Ana always gives priority to her children's well-being regarding food needs.

(...) when he have... get money and go shopping, the first thing we do, to fill the empty spot... their joy seeing the shopping bags is funny (crying). It's funny! I'm sorry!

(...) I'd never allow that... if I had to go without eating... so they [children] could eat.

Ana also expressed concerns regarding the effects of the family's current situation upon her marriage. Not knowing what the future will bring, especially regarding the need to fulfil their children's basic needs seems to be undermining the couple's relationship.

The marriage, it's not money that brings happiness, but it helps. It helps if the couple doesn't argue, because there is a light bill to pay, we can't go without light because we have children. There is water to pay, there is gas to pay, how are we going to cook, there are all those things! We can lose our house, what would we do with three children? Where would we live?!

DISCUSSION

FOOD INSECURITY AND EMOTIONAL WELL-BEING

This chapter highlights how food insecurity impacts parents' emotional well-being, and how economic hardship hampers parents' management of everyday life, making it hard to accomplish social expectations related to parental roles. While several studies show that food insecurity is associated with psychological distress, and may lead to common mental disorders, such as anxiety and depression (Jones 2017; Kruger and Lourens 2016), less is known about its effects on satisfaction with life. Beyond what is known to be a consequence of poverty and material deprivation, some issues seem specific to food insecurity, in the context of emotional well-being. By taking into account the perceptions of parents, a link was established between families' food insecurity and the prevalence of negative emotions derived from the burden of parental roles.

The narratives we presented share similar features concerning the experience of negative feelings by the caregivers due to material deprivation, and the consequent difficulty in fulfilling their children's basic needs. The main feelings reported by mothers include sadness, guilt, inability, helplessness, despair, and shame, which seem to affect their emotional well-being on a daily basis. Providing children with nutritious and enough food is their main priority, ahead of other needs and concerns. Thus, being a good mother seems to rely foremost on being able to appropriately feed their children. When this is not possible, mothers see it as a failure in fulfilling their social roles as caregivers.

Parental food-work, which includes procuring, preparing, and serving food, cleaning up, and thinking of what to feed the family, has deep symbolic meanings and entails much more than providing nutrition (O'Connell and Brannen 2016). These meanings are evoked by the strong metaphor of "food as love" (Goody 1998). As Douglas (1972) observed, availability of food and

the very structure of family meals also convey powerful messages of inclusion or exclusion from the social fabric. Along this line of reasoning we can frame coping strategies adopted by these food insecure families, for example those that involve parental sacrifice (skipping meals, eating less in order to have food for others, etc.) or those that prioritize variety and child's enjoyment of food.

In the long run, parental food-work, and more broadly childcare, not only inform on how individuals address their children's present needs but also how they project their children's future trajectories. Challenges to feeding the family in the present derives in a sense of injustice and helplessness that inhibits individuals from projecting themselves into the future. Even though the notion of sustainability encompasses societal-systemic concerns, here resides a powerful analogy between sustainability and food security at the family level.

INDIVIDUAL AND COLLECTIVE NARRATIVES

While it is unequivocal that individuals' current ordeal of food insecurity and economic hardship is draining, establishing a direct correspondence between narratives of individual crisis and the narrative of collective crisis is rather complex. This seems further complicated by pre-existing issues. In fact, individual narratives ponder experiences of poverty and hardship that are recursive, and that were heightened over the last years. Long histories of material deprivation seem to result in lower expectations toward the future and to perpetuate the cycle of poverty. By contrast, those for whom austerity and economic crisis meant a radical change to their living conditions seem to be more responsive and resilient, although fluctuating between sadness and revolt in regard to their current situation.

A similar logic may be applied to the relationship between material deprivation, food insecurity, and mental health. On the one hand, material deprivation leading to food insecurity may exacerbate previously existing mental health problems and disorders. On the other hand, individuals without preexisting problems may become mentally unhealthy due to the psychological distress and lack of emotional well-being that may derive from material deprivation and food insecurity.

These collective and individual narratives are present in the four cases presented. Case 1 describes a family living in a poor neighbourhood for several generations. Recently, during the economic crisis, the family's working

and living conditions worsened, leading to a split in the nuclear family with negative effects on the mother's emotional well-being. Case 2 also refers to a family that has long struggled with material deprivation. However, the mother's pre-existing physical and psychological problems seem to have contributed to the family's current gloomy situation. In Case 3, the family always struggled and their economic difficulties were intensified by changes in work conditions and consequent difficulties in paying the house loan. Preexisting family problems and lack of support networks seem to weigh on the family and limit their future possibilities. In Case 4, the main impact of family's household was the economic crisis, which led to drastic change in the family lifestyle. A long unemployment spell led to feelings of inability and despair and also seems to affect the couple's relationship. Even though causal relationships between material deprivation, food insecurity, and mental health are difficult to determine (Jones 2017), the interrelatedness between individual and collective crisis is an analytical possibility worth reassessing in future studies, preferably including a larger number of cases.

CONCLUSIONS

While our work does not aim at representativeness, the cases presented may be regarded as just the tip of the iceberg. The high level of food insecurity in Portugal is an extremely worrying scenario in several terms, including its impact on the well-being and mental health of vast swathes of the population. If issues of access to food need to be urgently addressed by public policies, namely through employment and income policies, populations' well-being and mental health cannot be the weakest link in this chain. In recent years there were significant cuts in investment in this area in Portugal as well as other Southern European countries due to the economic recession, leading to major risks in public health, namely the deterioration of mental health, especially among socially vulnerable individuals (Antunes et al. 2017). Even without the enhancing effect of food insecurity, mental health disorders have long-term consequences, not only for those who suffer, their caretakers, close relatives, and friends, but also on the labour market (e.g., work-time loss), and health system (e.g., financial costs of treatment). In fact, mental disorders are one of the main factors contributing to populations' disability in contemporary societies (Lund et al. 2010, Whiteford et al. 2013). Therefore,

investing in primary healthcare and specialized mental health services should also be observed as a priority in the field of sustainability. In other words, satisfying the needs of the present without undermining future generations (Brundtland et al. 1987) should entail equal means of access to public services by the population as well as an adequate quality in healthcare and treatment.

LIMITATIONS AND FUTURE DEVELOPMENTS

Attempts to explore mental health and well-being were cautious, but the interview script and the aims of the interviews did not specify this as a subject. Undoubtedly, that is a limitation. Even though framed in a non-judgmental manner, questions confronted interviewees with normative discourses around food and parenting. While interviewers refrained from being intrusive, parents ultimately revealed emotional unrest. Additionally, interviews had biographical overtones, allowing interviewees to verbalize and articulate some feelings, in some cases, probably for the first time, which may have had a cathartic effect. Regardless of focusing on confrontation or emotional catharsis, there is a risk of worsening individuals' psychological state, in the case of pre-existing mental health problems, or triggering psychological problems in apparently healthy individuals. In the future, it will be worth involving mental health specialists in research teams working on projects concerning food (in)security, not only for benefiting from interdisciplinarity but also to fine-tune research materials and to minimize negative emotional impacts on individuals.

» ACKNOWLEDGMENTS

The research leading to these results has received funding from the European Research Council under the European Union's Seventh Framework Programme (FP7/2007-2013)/ERC grant agreement n.º 337977. We are also grateful for the valuable time kindly given by our participants in the interviews. The international research team comprises Rebecca O'Connell, Julia Brannen, Abigail Knight, Laura Hamilton, Charlie Owen, and Antonia Simon (UK); Silje Skuland and Anine Frykholm (Norway), and Monica Truninger, Karin Wall, Vasco Ramos, Sonia Cardoso, Fábio Augusto, and Manuel Abrantes (Portugal). This research reflects only the authors' views and the European Union is not liable for any use that may be made of the information contained therein.

VASCO RAMOS

Instituto de Ciências Sociais, Universidade de Lisboa

Av. Prof. Aníbal Bettencourt 9 — 1600-036 Lisboa, Portugal

vasco.ramos@ics.ulisboa.pt

orcid.org/0000-0003-4379-2354

NÁDIA SALGADO PEREIRA

CICPSI, Faculdade de Psicologia, Universidade de Lisboa

nadia@campus.ul.pt

orcid.org/0000-0002-1695-6352

§ REFERENCES

- ALTHOFF, R. R., M. Ametti, and F. Bertmann. 2016. "The role of food insecurity in developmental psychopathology". *Prev Med* 92: 106-109. DOI: 10.1016/j.ypmed.2016.08.012.
- ANDERSON, S. A. 1990. "Core indicators of nutritional state for difficult-to-sample populations". *The Journal of Nutrition (USA)* 120 (Supl 11): 1559-1600.
- ANTUNES, A. D., et al. 2017. "Perceived effects of the economic recession on population mental health, well-being and provision of care by primary care users and professionals: a qualitative study protocol in Portugal". *BMJ Open* 7 (9). DOI: 10.1136/bmjopen-2017-017032.
- BERNAL, J., Frongillo, E. A., and J. Klaus. 2016. "Food insecurity of children and shame of others knowing they are without food". *Journal of Hunger & Environmental Nutrition*, 11 (2): 180-194. DOI: 10.1080/19320248.2016.1157543.
- BERRY, E. M., et al. 2015. "Food security and sustainability: can one exist without the other?" *Public Health Nutrition* 18 (13): 2293-2302. DOI: 10.1017/S136898001500021X.
- BORCH, A., U. Kjærnes. 2016. "Food security and food insecurity in Europe: an analysis of the academic discourse (1975–2013)". *Appetite* 103: 137-147. DOI: <http://dx.doi.org/10.1016/j.appet.2016.04.005>.
- BRUNDTLAND, G., et al. 1987. *Our Common Future ('Brundtland Report')*. Oxford University Press, USA.
- BURROWS, S., et al. 2011. "Influence of social and material individual and area deprivation on suicide mortality among 2.7 million Canadians: A prospective study". *British Medical Journal Public Health* 11 (1): 577. DOI: 10.1186/1471-2458-11-577.
- CARLETO, C., A. Zezza, and R. Banerjee. 2013. "Towards better measurement of household food security: Harmonizing indicators and the role of household surveys". *Global Food Security* 2 (1): 30-40. DOI: <http://dx.doi.org/10.1016/j.gfs.2012.11.006>.
- DAVIS, O., B. B. Geiger. 2017. "Did Food Insecurity rise across Europe after the 2008 Crisis? An analysis across welfare regimes". *Social Policy and Society* 16 (3): 343-360. DOI: 10.1017/S1474746416000166.
- DOUGLAS, M. 1972. "Deciphering a meal". *Daedalus* 101 (1): 61-81.
- DOWLER, E. A., D. O'Connor. 2012. "Rights-based approaches to addressing food poverty and food insecurity in Ireland and UK". *Social Science & Medicine* 74 (1): 44-51. DOI: <https://doi.org/10.1016/j.socscimed.2011.08.036>.

- EARTHY, S., A. Cronin. 2008. "Narrative analysis". In *Researching Social Life*, ed. N. Gilbert, London: Sage, 420-439.
- FAO. 1996. *Declaration on World Food Security*. Rome: World Food Summit.
- FARINHA RODRIGUES, C., R. Figueiras, and V. Junqueira, coord. 2016. *Desigualdade de Rendimento e Pobreza em Portugal. As Consequências Sociais do Programa Ajustamento*. Lisbon: Fundação Francisco Manuel dos Santos.
- FRONGILLO, E. A., et al. 2017. "Food insecurity Is associated with subjective well-being among individuals from 138 countries in the 2014 Gallup World Poll". *The Journal of Nutrition*. DOI: 10.3945/jn.116.243642.
- FRYERS, T., et al. 2005. "The distribution of the common mental disorders: social inequalities in Europe". *Clinical Practice and Epidemiology in Mental Health: CP & EMH* 1: 14-14. DOI: 10.1186/1745-0179-1-14.
- GOODY, J. 1998. *Food and Love: a Cultural History of East and West*. London: Verso.
- HADLEY, C., C. L. Patil. 2006. "Food insecurity in rural Tanzania is associated with maternal anxiety and depression". *American Journal of Human Biology* 18 (3): 359-368. DOI: 10.1002/ajhb.20505.
- IEMMI, V., et al. 2016. "Suicide and poverty in low-income and middle-income countries: a systematic review". *The Lancet Psychiatry* 3 (8): 774-783. DOI: 10.1016/S2215-0366(16)30066-9.
- JONES, A. D. 2017. "Food insecurity and mental health status: a global analysis of 149 countries". *American Journal of Preventive Medicine* 53 (2): 264-273. DOI: 10.1016/j.amepre.2017.04.008.
- KEYES, C. L., D. Shmotkin, and C. D. Ryff. 2002. "Optimizing well-being: the empirical encounter of two traditions". *Journal Pers Soc Psychol* 82 (6): 1007-22.
- KRUGER, L.-M., M. Lourens. 2016. "Motherhood and the 'madness of hunger': '... Want Almal Vra vir My vir 'n Stukkie Brood' ('... Because Everyone Asks Me for a Little Piece of Bread')". *Culture, Medicine, and Psychiatry* 40 (1): 124-143. DOI: 10.1007/s11013-015-9480-5.
- LEITÃO, M. et al. 2016. *Políticas de Família em 2014 e 2015. Principais Desenvolvimentos, Relatório Anual do OFAP*. Lisbon: OFAP-ICS.
- LUND, C., et al. 2010. "Poverty and common mental disorders in low and middle income countries: a systematic review". *Soc Sci Med* 71 (3): 517-28. DOI: 10.1016/j.socscimed.2010.04.027.
- MARMOT, M., et al. 2012. "WHO European review of social determinants of health and the health divide". *The Lancet* 380 (9846): 1011-1029. DOI: 10.1016/S0140-6736(12)61228-8.
- MUGISHA, J. 2015. "Prevalence and factors associated with Posttraumatic Stress Disorder seven years after the conflict in three districts in northern Uganda (The Wayo-Nero Study)". *BMC Psychiatry* 15 (1): 170. DOI: 10.1186/s12888-015-0551-5.
- O'CONNELL, R., J. Brannen. 2016. *Food, Families and Work*. London: Bloomsbury Academic.
- PFEIFFER, S., T. Ritter, and E. Oestreicher. 2015. "Food insecurity in German households: qualitative and quantitative data on coping, poverty consumerism and alimentary participation". *Social Policy and Society*, 14 (3): 483-495.
- PINSTRUP-ANDERSEN, P. 2009. "Food security: definition and measurement". *Food Security* 1 (1): 5-7. DOI: 10.1007/s12571-008-0002-y.
- QUINLAN, M., P. Bohle. 2009. "Overstretched and unreciprocated commitment: reviewing research on the occupational health and safety effects of downsizing and job insecurity". *International Journal of Health Services* 39 (1): 1-44. DOI: 10.2190/H.S.39.1.a.

- RADIMER, K. L., C. M. Olson, and C. C. Campbell. 1990. "Development of Indicators to Assess Hunger". *The Journal of Nutrition*, 120 (11 Suppl): 1544-1548.
- REDCLIFT, M. 2005. "Sustainable development (1987–2005): an oxymoron comes of age". *Sustainable Development* 13 (4): 212-227. DOI: 10.1002/sd.281.
- RICHES, G. 1996. "Hunger in Canada: abandoning the right to food". In *First World Hunger Revisited: Food Charity or the Right to Food*, ed. G. Riches, 46-77. Basingstoke: Palgrave MacMillan.
- RICHES, G., T. Silvasti. 2014. *First World Hunger Revisited: Food Charity or the Right to Food*, ed. G. Riches. Second edition. Basingstoke: Palgrave MacMillan.
- RIESSMAN, C. K. 2008. *Narrative Methods for the Human Sciences*: Sage.
- SANTANA, P., et al. 2015. "Suicide in Portugal: spatial determinants in a context of economic crisis". *Health Place* 35:85-94. DOI: 10.1016/j.healthplace.2015.07.001.
- SANTANA, P., et al. 2015. "Mortality, material deprivation and urbanization: exploring the social patterns of a metropolitan area". *International Journal for Equity in Health* 14 (1): 55. DOI: 10.1186/s12939-015-0182-y.
- SARACENO, B., I. Levav, and R. Kohn. 2005. "The public mental health significance of research on socio-economic factors in schizophrenia and major depression". *World Psychiatry* 4 (3): 181-185.
- SEN, A. 1982. *Poverty and Famines : an Essay on Entitlement and Deprivation*. Oxford: Oxford University Press.
- TRUNINGER, M., C. Díaz-Méndez. 2017. "Poverty and food (In)security". In *Routledge Handbook on Consumption*, eds. M. Keller et al. London and New York: Routledge, 271-281.
- WALL, K., et al. 2015. *Impacto da Crise nas Crianças Portuguesas. Indicadores, Políticas, Representações*. Lisbon: Imprensa de Ciências Sociais.
- WEAVER, L. J., C. Hadley. 2009. "Moving beyond hunger and nutrition: a systematic review of the evidence linking food insecurity and mental health in developing countries". *Ecology of Food and Nutrition* 48 (4): 263-284.
- WHITEFORD, H. y A et al. 2013. "Global burden of disease attributable to mental and substance use disorders: findings from the Global Burden of Disease Study 2010". *The Lancet*, 382 (9904): 1575-1586. DOI: 10.1016/S0140-6736(13)61611-6.
- WILLIAMS, A. et al. 2016. "Contested space: the contradictory political dynamics of food banking in the UK". *Environment and Planning A* 48 (11): 2291-2316. DOI: 10.1177/0308518X16658292.

CITE THIS CHAPTER AS:

RAMOS, V., N. S. Pereira, 2018. "Material deprivation and food insecurity: perceived effects on mental health and well-being". In *Changing Societies: Legacies and Challenges*. Vol. III. *The Diverse Worlds of Sustainability*, eds. A. Delicado, N. Domingos and L. de Sousa. Lisbon: Imprensa de Ciências Sociais, 129-152.

<https://doi.org/10.31447/ics9789726715054.05>