URBAN POVERTY AND THE SOCIAL CONSEQUENCES OF PRIVATIZED FOOD ASSISTANCE

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ABSTRACT: Urban affairs research has not examined how broad social forces and policy changes affect daily life in urban communities, organizations, and families. Drawing on ethnographic field work in urban food assistance sites as well as analyses of the comparative roles of government and the voluntary sector in responding to social problems, this study provides evidence that: (1) voluntary organizations (in this case food assistance providers) have been drawn into a growing institutionalized "shadow government" (Wolch, 1990); (2) this newly institutionalized voluntary bureaucracy closely parallels the bureaucracy, the rigidity, and the depersonalization of government agencies; (3) willingly or not, this increasingly institutionalized food provision network contributes to the continued view of poverty in America as primarily the result of personal defects and temporary misfortunes requiring only an "emergency," albeit virtually permanent, response from society; and (4) these changes have consequences for the transfer of responsibility for assistance from the public to the private sector under welfare reform.

Urban affairs research has been dominated by political science, sociology, geography, and economics. Discussions of the interdisciplinary nature of the field consistently cite these disciplines and attempt to reconcile differences among them in theory, method, and

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JOURNAL OF URBAN AFFAIRS, Volume 19, Number 2, pages 207-226
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ISSN: 0735-2166.
unit of analysis (Lineberry, 1985; Rich & Warren, 1980; Wood, 1990). The poor have been well counted and classified by income, race, ethnicity, gender, household, family status, and location, but relatively little is known about their provisioning strategies, interactions with institutions, perceptions of opportunity structures, values and aspirations, or decisions about household and family formation. Neither have the processes of defining poverty, hunger, welfare, and welfare reform as socially constructed public problems been examined thoroughly in the urban literature.

These deficiencies are associated with the absence of anthropology from the urban affairs disciplinary mix and resulting lack of attention to social and cultural perspectives. Anthropological contributions have been overlooked by colleagues in other disciplines who focus on macro-level research questions. This separation has been compounded by anthropologists’ tendency to engage in discussions about research results, theory, and methods only with each other and to focus on the “devastating impact of global economic change on the peoples of the third world” (Newman, 1994, p. 121) instead of domestic analyses. In contrast to earlier studies, more recent domestic urban poverty research by anthropologists closely examines the vertical links that connect the social groups they study with the larger society (Curtis & McClellan, 1995; Gwaltney, 1980; Hopper, Susser & Conover, 1985; MacLeod, 1987; Maxwell, 1988; Mullings, 1987; Susser, 1982; Williams, 1988).

In this study, I show that the voluntary sector is linked inextricably to the welfare state and its shortcomings and that voluntary food assistance serves a critical need but works deleteriously as well: to mask state failings, to grow more like the state, and to reaffirm class-based stereotypes.

Information presented and analyzed here is drawn from field notes of participant observation and interviews conducted at a number of food assistance programs in Delaware since 1992. These case study methods reveal the practical dynamics of voluntary action and the role of individual agents. Ethnographic research is far superior to survey research when it comes to describing process, but it involves exceptional time commitments on the part of researchers who enter the communities and everyday lives of the people and places they study. As a participant and observer, I enact two roles: as “volunteer” in one pantry and two soup kitchens in Wilmington, where I prepare, serve, or dispense food and as “monitor” on behalf of the Food Bank of Delaware (FBD), which involves regular visits to food assistance sites around the state.

In 1993, I conducted interviews with 25 key staff and volunteers across the state, representing one quarter of Delaware’s food assistance organizations, about the history, development, and operation of their feeding programs. A snowball sampling procedure was used. I often spent the entire day at the host location, thus increasing the internal validity of the method; however, nonprobability sampling has low external validity.

Ethnographers establish credibility by systematically examining all causal and consequential factors. LeCompte & Goetz (1982, pp. 37–40) contend that ethnographers enhance the external reliability of their data by recognizing and handling five major problems: (1) researcher status position, (2) informant choices, (3) social situations and conditions, (4) analytic constructs and premises, and (5) methods of data collection and analysis. Threats to the internal reliability of ethnographic findings are addressed through: (1) low-inference descriptors, (2) multiple researchers, (3) participant researchers, (4) peer
examination, and (5) mechanically recorded data (LeCompte & Goetz, 1982). External validity depends on the identification and description of those characteristics salient for comparison with other similar types. This problem is addressed to some extent by multi-site ethnographic designs.

In the present analysis, I have used the strategies outlined above to address the reliability and external validity of the findings. The reliability and external validity of this account are strengthened by similar observations and conclusions of other ethnographers (Sarvetnick, 1995; Stein, 1989) who have also recently studied soup kitchens and food pantries.

Along with Williams (1992) and others, I argue that anthropologists can and should play a larger role in urban research relevant to welfare and poverty policy, seek to fill critical research gaps, and unmask the complex attitudes toward the poor that shape the national policy debate on urban poverty, welfare, and welfare reform.

**RESEARCH FOCUS**

What is known as welfare reform in this country is focused on changing poor people’s behavior rather than helping them with food, housing, or cash. Such an approach is based on the prevalent view in American society that poverty is a condition of individual failure, that the poor are unwilling to work, and that they spend their money foolishly (Ryan, 1976). It is not surprising, then, that the public definition of hunger, a problem experienced primarily by poor people, focuses on the need for food rather than a more challenging definition of the problem as one of social inequality in jobs and income.

The research described here is part of an ongoing, collaborative, multi-methodological examination of hunger and food insecurity in Delaware. The project’s operational definition of hunger and food insecurity, which is derived from Radimer, Olson, and Campbell (1990), is “the inability to acquire or consume an adequate quality or sufficient quantity of food in socially acceptable ways, or the uncertainty that one will be able to do so” (p. 1546). The goals of the overall research are to: (1) determine the extent of hunger and food insecurity in the state, (2) evaluate the effectiveness of the statewide emergency food assistance system, (3) investigate the relationship between governmental and private food assistance, and (4) analyze the demographic, social, and economic characteristics of households receiving food assistance. Data collection techniques included key informant interviews with anti-hunger advocates and food assistance providers, participant observation at selected food assistance sites, in-depth interviews with food assistance recipients, analysis of food assistance agency and Food Bank of Delaware food assistance records, as well as a field survey and observation of retail food stores. In this article I look closely at the role of the voluntary sector in responding to a contemporary social problem—hunger.

Over the past 15 years, economic and social changes have left large numbers of Americans unable to meet their daily food needs and have increased pressures on food assistance programs. During this same period, policy changes have shifted responsibility for food and income assistance from the federal government to the states and the private sector, what some analysts term the “mixed welfare economy” (Salamon, 1993) and others the “shadow state” (Wolch, 1990). Neither the states nor the private sector, however, have been prepared for this responsibility or equipped with resources adequate to meet the level of need. Governmental responses to hunger and other social problems have treated these problems
as emergencies and allocated funds to nonprofit community agencies to provide temporary relief, failing to understand the need for large-scale responses to widespread social need (Lipsky & Smith, 1989; Lipsky & Thibodeau, 1990; Smith & Lipsky, 1993).

The “emergency services” strategy has continued in the face of sustained and increased demand. Its growing institutionalization reinforces the view that the emergency system is a permanent solution and hinders efforts to address causes of poverty by increasing wages and public assistance benefits and providing greater access to food and nutrition programs and affordable housing.

One unavoidable consequence of the retrenchment of public assistance has been the elaboration of a network of public and private emergency food and shelter programs. Throughout the 1980s, state and local groups across the country, including groups in Delaware, reported that the demand for emergency assistance was outstripping available supplies (Brown, 1989; Cohen & Burt, 1989; Curtis & Green, 1996; Food Research and Action Center, 1983; Physician Task Force on Hunger, 1985). Historically, churches and nonprofit organizations have provided food and other assistance for needy people. However, due to the declining purchasing power of public assistance and wages, restrictions in food stamp funding, the low level of food stamp benefits, and reduced access to conventional sources of affordable food, increased demand for food assistance in the 1980s and early 1990s generated widespread concern about the accessibility of food for low-income people.

**DOMESTIC FOOD POLICY, POVERTY, AND HUNGER**

The delivery of food assistance in the United States has taken place in three primary ways. The federal government has used nonmarket outlets for surplus agricultural products purchased to maintain farm incomes and prices. It has supplemented the incomes of poor people with food vouchers, and it has made populations at nutritional risk the focus of special food supplement programs. Problems associated with food policy delivery are suggested by the competing goals of price support and food assistance, program adequacy and cost control, as well as the sheer number of government agencies and private organizations that have responsibility for service delivery (Cohen, 1990; Lipsky & Thibodeau, 1990; Nestle, 1990).

Emergency feeding organizations include food banks, food pantries, soup kitchens, and shelters operated by nonprofit agencies and churches. The emergency feeding network provides food to people who lack the resources to obtain adequate amounts of food through conventional means. Food banks solicit donations of surplus or salvage food which they distribute to food pantries (which provide emergency grocery packages), soup kitchens and shelters (which provide on-site meals), and other feeding programs. The rise of food banks over the last 15 years in response to the unmet needs of the hungry in local communities has been critical in filling some of the gaps in public food relief efforts. Emergency feeding organizations are, however, ultimately limited by the depth of the hunger problem, their reliance on volunteers, and the availability of government and food industry surpluses. I argue that the emergency assistance focus on food—feeding the hungry—has diverted attention from the societal relationships that produce hunger.
Hunger became a national issue during the late 1960s and early 1970s, then disappeared from view because the political activities of various claims-making groups, in particular anti-hunger and anti-poverty advocates, were much less successful than in earlier years. As a result, the return of hunger to public attention beginning in the 1980s was associated with economic and tax policies that had the effect of redistributing income from poor and middle-income groups to the wealthy and with a corresponding failure to utilize the federal government to protect high-risk population groups from undernutrition (Brown, 1989). The poor are less well fed now because of reduced purchasing power (due to increased food costs relative to wages and public benefit levels) and restricted access to affordable food sources (Ashman et al., 1993; Fitchen, 1988).

The poverty rate in America in the 1990s remains relatively high. It is high relative to what it was in the early 1970s and high relative to what analysts expected, given the economic recovery of the 1980s. The poverty rate rose to its 1983 peak, 15.2% (35 million people), because of the inflation and recessions of the late 1970s and early 1980s. It declined to 12.8% in 1989 as the economy expanded and rose to 14.5% in 1992 as the economy experienced a recession. At 15.1% in 1993, the poverty rate had almost reached its 1983 peak, and 39.3 million people were officially classified as poor (Danziger & Weinberg, 1994).

Contributing to this increase in poverty has been a long-term and absolute decrease in wages and the purchasing power of those wages. Families and individuals at the bottom of the income distribution have lost ground since the 1970s, while those at the top of the distribution have gained relative to the median. The purchasing power of low-income Americans has also been affected by Food Stamp Program eligibility restrictions and a decline in funding level. Program participation dropped by one million persons between 1980 and 1987 despite an increase in the poverty rolls of 3.2 million over the same period. Food stamp benefits are determined with relation to the USDA’s Thrifty Food Plan. This food budget reflects a diet that is barely adequate, designed for short-term emergency use by a family when its resources are very low.

Despite the problems and the social stigma associated with food stamps, the Food Stamp Program is considered the most important food resource for low-income people in the United States. However, food stamps do not eliminate the need for emergency food assistance. Research on the characteristics of emergency food assistance recipients reveals a substantial number who receive food stamps and reveals that they run out before the end of the month (Clancey & Bowering, 1992; Curtis, 1994; Emmons, 1986, 1987; Food Research and Action Center, 1983; Smith & Hoerr, 1992). Respondents to the annual U.S. Conference of Mayors’ survey on hunger and homelessness also identified low public assistance benefit levels and problems related to the administration of and eligibility for the Food Stamp Program as primary causes of the need for emergency food assistance (U.S. Conference of Mayors, 1994, 1995).

THE LOCAL CONTEXT: WILMINGTON AND ITS NEIGHBORHOOD

The city of Wilmington and surrounding New Castle County are Delaware’s major metropolitan area. The area’s industrial base, which was historically dominated by heavy
manufacturing, including steel fabrication, chemical processing, and automobile assembly, diversified over the last 10 years with the inflow of banking and insurance companies.

Wilmington was a booming city from 1870 to 1920. After World War II, it went through a period of decline while its suburbs blossomed. Between 1940 and 1980, Wilmington’s population dropped by 38%, while that of suburban New Castle County quadrupled. During this shift, the city became increasingly populated by African-Americans and the poor, while the suburban areas were primarily white and middle or upper income. As a result of this change, many businesses left both the central commercial district and other parts of the city, leaving a meager downtown, not a single movie theater, and only two supermarkets within the city boundaries. Between 1980 and 1990, Wilmington experienced its first population gain (a 2% increase) since 1940. As a consequence of the state’s Financial Center Development Act, which attracted banking and insurance companies, the city’s central business district has undergone extensive construction activity. From 1979 to 1986, 3.5 million square feet of office space were constructed in the downtown area.

Between 1970 and 1990, the proportion of the city’s total population that was minority grew substantially. In 1970, 44% of the city’s population was minority. This percentage increased to 56% in 1980 and rose to 59% by 1990. Almost all of Wilmington’s minority population has been and continues to be African-American. Hispanics grew from 2.2% of the city’s population in 1970 to 4.9% in 1980 and 7.1% in 1990.

Incomes in Wilmington are lower than in the surrounding county, the metropolitan statistical area (MSA), and the state. The median annual family income in the city in 1989 was $31,140, compared to $45,216 in the county, $43,474 in the MSA, and $40,252 for the state as a whole. More than one half (51%) of Wilmington households have incomes equal to or less than 50% of the MSA’s median household income. These low-income households are residents of the central, northeast, south, and eastside areas. Eighteen percent of all city households (12,598 persons) live in poverty. Concentrations of poverty in the city parallel the location of minority populations, with a range of 17.4%–35.7% and an average of 25% of the residents of the east, south, northeast, and west center city areas below the poverty level.

THE EMERGENCY FOOD SYSTEM AND THE WELFARE STATE:
BLURRING THE BOUNDARIES

While participant observation and interviews provide most of the data for this analysis, I am also called upon—by the staff of the Food Bank of Delaware, feeding agencies, and the statewide information and referral agency—to assist in interpreting trends in assistance and to help solve problems in the food referral network. In this role, I have become aware of pressures to adopt explicit and restrictive eligibility and service criteria similar to those practiced by government assistance programs. Until recently, the emergency food assistance system in Delaware, like many other parts of the US nonprofit sector (Smith & Lipsky, 1993; Wolch, 1990), focused on serving clients compatible with their service mission. They had much less need for documentation and verification and much more trust in clients’ testimony than government agencies. An increase in financial support to this system from the state and federal government, together with substantial increases in the number of persons requesting food assistance since 1988, and decreases in overall support
and suspicions of abuse, have led to tightened eligibility criteria and verification of eligibility and to restricted service levels. These changes have consequences for the further transfer of responsibility from the public to private sector under welfare reform.

The Food Closet Study Committee began to document problems of poverty and hunger in Delaware in 1977. The Committee included representatives from the statewide information and referral agency as well as food pantries and anti-hunger advocates from across the state. This group developed procedures for food referrals and published a list of participating food pantries twice a year. Now known as the Food Closet Network (FCN) and staffed by the Food Bank, the group continues to publish the list of participating food pantries and meets several times a year, rotating among three counties. FCN referral procedures are illustrated in the following statement:

The Food Closet Network (FCN) of the Food Bank of Delaware (FBD) coordinates a network of food closets and referral agencies. All food closets listed are independently operated and make their own rules concerning from whom they will accept referrals. In general, to make a referral, you must be affiliated with a bona fide social service organization and you must have specific information about the person(s) being referred, including: name, address, age, all sources of income, why they are in need, what is being done to resolve the problem, how long that should take, and if special items are needed. If you do not wish to make a referral directly, call the Delaware Helpline at 1-800-464-4357. A trained referral specialist will handle the problem (Food Closet Network, 1989).

As discussed in 77% of the interviews, these procedures tended to be viewed as only guidelines by most food pantries in the network. If people said they were hungry, these organizations were inclined to accept clients' testimony as sufficient. At the same time, many of the agencies (58%) recognized that problems could arise out of such a generous intake policy. Forty-three percent acknowledged, and in some cases confronted, the possibility that some people would take advantage, or become "free loaders." Forty-eight percent admitted the costs of having permeable barriers to eligibility but decided that they would accept a small degree of advantage-taking because the level of work required to reduce it was relatively low in comparison to what it would cost in organizational effort and morale to eliminate it.

Sixty-four percent pointed out that they put up certain barriers to clients seeking aid (Smith & Lipsky, 1993). The clients of food pantries and soup kitchens find themselves in a setting that fairly shouts their status as poor and needy. Although soup kitchens use a "no questions asked" intake policy, only requiring recipients to line up outside the facility at the designated hour, receiving food from food pantries requires clients to give up their privacy by revealing personal social and economic circumstances. Despite relatively loose intake procedures, 62% of these food pantry staff and volunteers expressed some concern about those who repeatedly request food assistance.

In the last several years, the Delaware Helpline, a statewide information and referral agency that is funded jointly by the state and the United Way of Delaware, has put pressure on food pantry operators to reduce accessibility of services by tightening eligibility criteria. During the same period, due largely to lack of resources, pantry operators have cut back services and restricted intake to clients within their service area. I have been involved in
several meetings to deal with potential abuse of the food assistance system. These meetings were requested by the staff of the Helpline and attended by Food Bank staff, as well as staff and volunteers of several food pantries. Prior to the first of these meetings, Helpline staff reported to the Food Bank that they believed that “about half of the food callers were lying to them.” When pressed for specific instances and documentation to support this assertion, Helpline staff had only a few specific instances to report and had not been documenting their suspicions. They agreed to keep track of suspect calls and to share information with the Food Bank and the Food Closet Network. The Food Bank volunteered to survey food pantries about whether they believed that clients were taking advantage of the food assistance system.

The Delaware Helpline staff kept track of suspicious calls for six months and produced a list of 27 persons who made calls that the staff felt were suspect and that they referred to as the “cheaters list.” Eighteen of these callers had made one suspect request and nine callers had made multiple such requests during this period, for a total of 45 suspicious calls. These suspect calls represented 5.4% of the total calls for food assistance received during this six-month period, rather than the 50% estimate that Helpline staff had made earlier. The cover letter accompanying this material included the following paragraph:

I hope this information gives you insight on what we see as not a problem, but a situation we are coping with now. Let’s hope that it doesn’t develop into a problem. We are all doing a commendable job in helping to feed the hungry and want to ensure that our efforts are not being taken advantage of.

Given this result, Helpline staff retreated from their earlier position on the extent of potential abuse but reiterated their concern about “accountability standards.” Helpline staff sent out a notice to all food pantries in the Food Closet Network advising pantry operators not to serve clients who could not produce identification that verified their address and preferably included a photograph for each household member, including children.

A review of the “suspicious” call printouts revealed that Helpline staff were using the following criteria for judging a call suspicious: (1) being unable to produce identification to verify address (16 instances), (2) reporting multiple addresses (eight instances), (3) reporting variable household size (eight instances), (4) having had prior contact with a food pantry or social service organization (six instances), (5) providing a false address (two instances), (6) providing the same address as another caller (two instances), (7) impersonating another client (one instance), (8) impersonating a social worker (one instance), and (9) being verbally abusive to Helpline staff (one instance). Leaving aside the question of whether the calls in the first four and the sixth categories represent abuse of the food assistance system and given the exigencies of life in low-income communities, in nearly three quarters (70.2%) of the instances, Helpline staff are requiring eligibility indicators (documentation of identity, address, and household composition) similar to those used by government assistance programs that have specific and restrictive eligibility criteria, such as income or assets (Smith & Lipsky, 1993).

This is disturbing for several reasons. Although nonprofit organizations and churches historically have provided food and other assistance for needy people, they have viewed their role as offering an important service alternative and supplement to government programs. As such, they were free to choose more open and flexible intake procedures that
were responsive to unique client circumstances and needs. This approach to client needs made the emergency food assistance system less bureaucratic and more client friendly than government assistance, which requires not only unambiguous eligibility criteria but also unambiguous indicators that people meet those criteria. However, this is not to say that the emergency services approach is without problems.

The inadequacies of the American public welfare system are well documented. For the voluntary sector to adopt similar eligibility criteria is troublesome because, as noted by a number of analysts (Abromowitz, 1989; Piven & Cloward, 1993; Schram, 1994), including Susser and Kreniske (1987), “public assistance exercises a controlling and constraining influence on those who rely upon it” (p. 51). Some analysts see the public social welfare sector as contributing to the persistence of poverty (Piven & Cloward). According to Wagner (1993), “it is structurally dedicated, despite employing some committed workers, to deterring the poor from asking for assistance” (p. 104).

In contrast to the perspective of Helpline staff, the Food Bank survey of pantry operators revealed few instances of perceived abuse. However, the 70% citywide increase in requests for food assistance from 1988 to 1989, followed by a 39% increase between 1990 and 1991 and smaller increases in subsequent years, has strained the system’s financial and operational resources. As a result, food pantries have reduced the accessibility of services by restricting intake to clients within their primary service area and cutting back on services to repeat client households. In the late 1980s, pantries began to restrict service intervals (e.g., one pantry visit every 30–90 days) and reduce service areas to the immediately adjacent area. Despite these changes, food pantries are sometimes closed because they have run out of food. As one interviewee noted, “We turn people away now—since 1990. We never did that before, but we run out of food. I call other pantries but sometimes no one has food.” These changes in the city’s emergency food assistance network contribute to food insecurity for low-income residents who now face a more rigid and less friendly system that has greatly reduced resources. As a result, urban emergency food assistance has come to resemble its public counterpart.

**VOLUNTEERS AND RECIPIENTS: “MISSION” AND GRATITUDE**

Soup kitchens and food pantries bring together a poor and often disenfranchised clientele and a professional and volunteer staff (Glasser, 1988; Sarvetnick, 1995; Stein, 1989). The development of such a “helping” professional and volunteer corps depends upon and accentuates the definition of those requesting food as “troubled” and in need of specialized attention and emphasizes the social distance between volunteers and recipients. These distinctions have become heightened as voluntary organizations face resource cutbacks and greater demands for accountability from the public sector.

Some analysts contend that in voluntary agencies, middle- and upper-class volunteers and staff meet face-to-face the contradictions and casualties of a social and economic system that does not meet the needs of all its citizens and that this experience has the potential for heightening awareness of the need for services and building cross-class alliances (Ostrander, 1985). I found that middle- and upper-class individuals often remain impervious to these contradictions, even when confronted with them directly, and that instead, such helping interactions serve to reinforce existing beliefs about the differences between
the mainstream and the underclass. This conceptualization of the poor as “other” is embedded in the development of the welfare state (Gans, 1995; Katz, 1989). Further, the interpretation of the problem of poverty as one of individual deficiencies and the emergence of helping professions based on such assumptions limits the perception of institutional forces at work.

The status and experiential differences of the participants in these settings can manifest themselves in a number of ways. The soup kitchens and pantries I observed all had literal and figurative boundaries between the recipients and the food (see also Sarvetnick, 1995; Stein, 1989). The barriers took the form of tables, walls, partitions, and separate rooms that defined certain areas as off-limits. The food was gathered, put in bags, and delivered to pantry clients or served in a soup kitchen. At several of the pantries, a table labeled “Food Pantry” blocked the entry to the room where the food was stored. Pantry volunteers brought the food to the table and conducted their interaction with clients there and did not allow them to enter the storage room. At another pantry, food was kept in a locked closet in one corner of the church office. Clients had to wait in the hallway until bags were removed from the closet for distribution. On a number of occasions, I observed recipients of emergency bags from a church in southern Delaware waiting in line at the side door in the pouring rain.

At the soup kitchens, people also gathered outside until the doors were opened to admit them, regardless of the weather. At one kitchen where I volunteered in the summer of 1994, once inside, recipients were directed where to sit (with a section of tables reserved for older persons, called “seniors,” and women or men with children, called “families”), and plates of food were brought to them in a strict and regular order. The church-based volunteers, who represented 90 religious groups from 14 denominations, prepared the food and dispensed it to volunteer servers through a half-wall window that separated the kitchen from the dining area. As a result, those who prepared the food never came into direct contact with those who ate it. Beverages, bread, and butter were placed on each table and replenished by servers. Condiments frequently were distributed to guests by volunteers instead of being passed from guest to guest. According to the kitchen coordinator, this strict protocol for serving was followed in order to maintain control: “Otherwise they would sit anywhere, ask for more, and stay too long.” At this kitchen, only one serving of the meal was permitted, and any guest suspected of attempting to secure a second portion was asked to leave. This kitchen regularly served more diners than could be seated at one time. Depending on the size of the group still waiting outside, the kitchen coordinator may have been aggressive in hurrying people through their meals, saying, “What do you think: you’re in a church? I’ve got 40 people outside still, I need these tables.” A soup kitchen in northern New Jersey, observed by Sarvetnick (1995), operates in a similar fashion:

Physical and psychic barriers are set up between the hungry and the cooking areas and pantries are kept conspicuously locked…As people enter, she [Mary] directs them to fill up one table at a time sometimes separating friends. Men are prompted to remove their hats, all are told to wait before taking the bread and butter which is often on the table, and all are reminded sternly to wait patiently for food…Mary is always wary of people who might move from table to table to get “illegal” seconds (p. 5).
At a second kitchen that I observed weekly for two years, recipients were directed to the dining area and denied access to other parts of the church. Here, beverages were dispensed self-service style from a central table. Food was distributed to recipients, one by one in a serving line, from the kitchen through an opening that blocked entry and separated servers from recipients. Condiments and utensils were on each table. Recipients had to return to the serving line for second helpings. At this kitchen, those who prepared and served the food were asked to “walk with the poor” and join them at the dining tables. This rarely occurred when I was present.

PANTRIES AND SOUP KITCHENS ARE OPEN ONLY AT SCHEDULED HOURS AND OFTEN THOSE WHO REQUEST ASSISTANCE AT OTHER TIMES ARE TURNED AWAY. SUCH POLICIES AND PRACTICES AND THE PHYSICAL BARRIERS DESCRIBED ABOVE, ALTHOUGH ROOTED IN PRACTICAL CONSIDERATIONS, ARE INDICATORS OF AUTHORITY AND CONTROL. THE DISTINCTIONS IN SOCIAL CLASS, STATUS, AND IDENTITY ARE SHARP BETWEEN THE CLIENTS IN THESE SETTINGS AND THOSE WHO “SERVE” THEM. POOR AND DISPROPORTIONATELY MINORITY PERSONS FIND THEMSELVES BEING SERVED BY FINANCIALLY AND SOCIOECONOMICALLY COMFORTABLE WHITES.

The volunteers in the Lutherans Involved in Food Emergencies (LIFE) pantry where I have worked since 1992 are drawn from Lutheran congregations in the county. They are primarily retired white professional men and their wives. The volunteers in the two soup kitchens I have observed are a more diverse group, including professional men and women from local corporations and banks as well as retired people from religious groups (including a handful from minority congregations), many of whom live in the suburbs.

These volunteers tend to view recipients as examples of the “undeserving poor.” As a volunteer, I have engaged in and overheard many conversations among the staff and volunteers in these settings. The ways volunteers talk about food recipients reveal enormous ambivalence about the legitimacy of recipient claims. These views parallel public sector criteria that see the majority of the poor as undeserving of public support and requiring stringent controls on and efforts to change their behavior (Katz, 1995). In the food pantries, staff and volunteers routinely consult previous service records to verify household size or residence and challenge any differences, which they refer to as “discrepancies,” assuming they represent fraudulent claims rather than changing household circumstances. At the soup kitchens, staff and volunteers engage in an ongoing wager about the number of times certain “guests” will appear during a particular week or month and whether they have already eaten at or will later visit another soup kitchen for the same meal, which they view as abuse rather than a provisioning strategy in response to limited resources. Sarvetnick (1995) relates similar conversations:

I have heard discussions in the kitchen which mirror the structural versus cultural origins of poverty found in the anthropological literature (Marks, 1991) as the staff debates whether poverty is caused by personal failure, as manifested in alcoholism or drug addiction, or whether it is rooted in the loss of local industry (p. 4).

Similar to the soup kitchens observed by other ethnographic researchers (Glasser, 1988; Sarvetnick, 1995; Stein, 1989), many of the staff and volunteers in the organizations I have observed are motivated by spiritual concerns. In such cases, volunteer work can have the quality of a mission or a spiritual obligation. For example, operation of one of the LIFE pantries of Wilmington is an expression of a “Christian mission to help those in need.” Each bag of food distributed contains an insert with the following message:
With this basket of food comes our Christian concern for your welfare. We are happy to be able to help you at this time of difficulty. You are invited to join us in worship and fellowship at any of our Lutheran churches in New Castle County.

Church locations and worship hours are also on the flyer. Several LIFE volunteers directed me to this message as an example of how pantries attempt to meet the material and spiritual needs of the poor. Many volunteers at the soup kitchens refer to their work as a “mission” of service to the community.

Both soup kitchens I observed are staffed by rotating sets of volunteers from area churches who prepare the daily or weekly noontime meal. A religious order that operates one of the kitchens takes a vow to serve the poor, while the other is housed in a downtown church with a stated urban mission. This sense of mission is frequently accompanied by perceptions of poverty and attitudes about the poor that define poverty as a condition of individual failure and the poor as persons who are unwilling to work and who spend their money foolishly. Such views structure interaction between volunteers and recipients and influence decisions about what constitutes abuse of the emergency feeding system. Many volunteers see the problems of food recipients as those of individual cultural attitudes and behavior (promiscuity, laziness, and dependency) and have little knowledge of or experience with poverty, aside from their interactions in the helping situation. Consequently, they may make judgments about whether recipients should receive food based on the norms of their own middle- and upper-class lives and expect that the poor should emulate them.

For example, LIFE volunteers make verbal and written observations about the composition of client households and relationships among these individuals and households, as well as changes in residence, attitudes, and behavior. These observations are indicative of the social and economic distance between volunteers and clients. Referral records as well as conversations include frequent comments similar to the following: “confusing family situation,” (usually noting variable size of household); “do not understand family situation,” (with reference to one man with two women identified as partners) and “SS has moved in with DG, (two pantry clients, now living together).” Such comments reveal the norm of family structure (two parents, stable size and composition) that underlies them. Relationships among client households—based on blood, marriage, and cohabitation—are noted with cross-references to the other parties, and volunteers often state such connections are a sufficient basis for suspicion. Changes in residence are viewed with some misgiving—“watch, third address in 15 months.”

In contrast to some of the patterns described in the literature (Sarvetnick, 1995; Stein, 1989) and similar to Glasser’s (1988) analysis, at one of the Wilmington soup kitchens, many of the staff are local neighborhood residents. Food servers may be local people convicted of misdemeanor crimes and required to perform community service as part of their sentence or probation. These Department of Corrections (DOC) servers are often from the same neighborhoods as the staff and those who are dining at the kitchen, prompting a more congenial pattern of interaction. Similarly, the janitor at the church-based pantry where I volunteer is acquainted with many food recipients and frequently offers them coffee or water and engages them in conversation. The DOC servers also assume multiple statuses, returning as volunteers and as recipients or “guests.” This pattern may be associated with the fact that the dining room coordinator at this kitchen and several of the senior workers
are neighborhood residents, and some of them began their association with the organization as guests.

Rather than exchanging food for money, food pantries and soup kitchens give food on the basis of need, a charitable service. Volunteers expect recipients to respond with gratitude and are quick to note and discuss any gap between this anticipated response to the gift of food and a response perceived as inappropriate (Stein, 1989). Such inappropriate client attitudes and behavior were noted on referral forms by LIFE volunteers: “A always asks for things she knows we don’t have,” “B was a little critical of the kind of food,” and “Mr. D has been to X Pantry several times this year. He complains all the time.” Several retired white professional men with whom I staff the LIFE pantry and who also volunteer at other pantries and soup kitchens almost always begin their accounts of interactions with recipients with the phrase “these people,” making explicit the separate class worlds they inhabit. They also critically evaluate the ability and character of those who request assistance, deprecating the household and budget management skills of recipients who have income well below the poverty level.

I also observed food servers in the two soup kitchens being asked in a demanding fashion for larger portions of food than they had originally distributed. At the soup kitchen that allows second helpings, some clients returned for seconds before everyone had received an initial portion. In pantries, recipients sometimes asked for more or different kinds of food. Sarvetnick (1995) observed similar interactions between volunteers and clients and noted, “They [the volunteers] made statements such as, ‘These people are too fussy,’ or ‘The nerve of that man to ask for more’” (p. 5).

From the volunteers’ point of view, these are examples of inappropriate responses. Such responses are not expressions of gratitude. They do not confirm that the server is a generous or caring individual carrying out his or her mission of service, and they may be especially galling in these settings, where people “get something for nothing.”

Volunteer activity of this sort is often a middle-class pursuit, the democratized version of noblesse oblige. Therefore, an asymmetrical relationship exists between volunteers or staff and recipients. The quality of such interactions may confirm each party’s perception of the other. Cook and Curtin (1985), Jarrett (1994), and Rank (1994) have pointed out the similarities between the mainstream and the underclass in aspirations and values, as well as in many behaviors. Yet members of the middle and upper classes tend to see major differences between themselves and the poor.

I have been struck by the tendency of volunteers to maintain stereotypes of the poor, even in the face of contrary evidence. For example, many of the volunteers I worked with believed that pantry clients’ households tended to be much larger than their own, despite an average client household size of 3.2 persons; that public assistance benefits levels are ample, while the combined value of AFDC and food stamps in Delaware is two-thirds of the poverty level; that those who work should be able to make it on their own, despite a $2,300 gap between full-time minimum wage earnings and the poverty level; and that all food recipients are African-American and Hispanic, despite an approximately 60/40 split between these groups and whites.

Anthropologists have long been interested in human diets, have analyzed sociocultural classifications of foods as “edible” or “inedible,” and have explored rankings of “preferred” or “less preferred” foods, along with such topics as rules for acquisition and
distribution (Messer, 1984). In America, consumer researchers have documented a general national preference for fast foods, convenience foods, finger foods, and snack foods, preferences that the poor share. Fitchen (1988) pointed out that:

Low-income people express their membership in the society and their adherence to its dominant values through many of the same food choices that characterize the rest of the population...Dominant American culture not only influences the foods poor people eat; it also influences the way that the nonpoor think about eating, about poverty, and about what the poor should eat (p. 323, 325).

The general powerlessness experienced by the poor is mirrored in the pantry and soup kitchen, where they have no choice as to the type or quantity of food they will receive. The absence of money in an individualistic and achievement-oriented society like the US explains this lack of choice, but the inability to make choices underscores powerlessness.

Food pantries and soup kitchens, staffed by middle-class professionals and volunteers, are organizations that make decisions about how the poor should be fed. They dispense a minimally adequate diet designed to maximize calories within a limited dollar value. In this calculus, the cultural preferences and individual choices of recipients are overlooked completely in favor of a presumed nutritional and economic cost/benefit equation.

My field observations, although very similar to other recent ethnographic research on soup kitchens (Sarvetnick, 1995; Stein, 1989), stand in sharp contrast to Glasser’s (1988) field experiences in the early 1980s. Although all of the soup kitchens described in the literature have a “no questions asked” service philosophy, the Tabernacle soup kitchen observed by Glasser was unusual in that it was open for several hours every day and allowed guests to sit, talk, drink coffee, and smoke cigarettes during the morning, rather than only serving a noon meal between 12:00 and 1:00 or an evening meal promptly at 4:00 p.m. This practice made it possible for her to acquire a level of knowledge about the lives of people frequenting the kitchen that was precluded by the more rigid and bureaucratic practices that Stein, Sarvetnick, and I encountered. In addition, the more open and congenial atmosphere at Tabernacle was the basis for the social functions identified by Glasser (1988), including sociability among guests, acceptance, and the development of social networks. Glasser also observed a lack of peer camaraderie among staff and volunteers. In contrast, Sarvetnick (1995) and I observed that contemporary soup kitchens appear to function more for staff and volunteer socializing by allowing more time for food preparation and set-up than is necessary. The time before the meal is served is devoted to “gossip about church members [and] tales of church events” (Sarvetnick, 1995, p. 5) or, as I have observed, comparisons of how many were and will be “served,” and what circumstances contribute to these differences, such as “they have their stamps” (explaining low turnout) or “checks won’t be out until next week” (explaining high turnout). In the settings Sarvetnick and I observed, soup kitchen guests, many of whom know each other, are not given the time to engage in extensive socializing. Glasser (1988) found that the religious motivation of staff and volunteers contributed to a depersonalization of the relationship between staff and guests and to the lack of social control exerted by staff. Despite the common theme of staff and volunteer work motivated by spiritual considerations, in contrast to Glasser but similar to my observations, Stein (1989) and Sarvetnick (1995) observed social
and economic distance between the staff and volunteers and those receiving food and social control that was marked in a number of ways. Sarvetnick noted:

The attitudes of the staff toward the hungry are complex: a mixture of charitable and religious impulses tempered by the American middle-class values of thrift, hard work, and self-help...In contrast to Glasser’s observations, the hungry who come to this soup kitchen are not perceived as “guests” in any positive sense of the word (1988; p. 3). Instead, the church women view the soup kitchen as a battle between nature and culture. While they see themselves as the upholders of civility, they treat the hungry as if they were unruly, threatening children. On my first day, they described them to me as “mental,” “smelly,” or “rude” (pp. 4–5).

Stein (1989) illustrated the expectation for gratitude in exchange for charitable service and the links among status, equity, and emotions:

In a food pantry one of the volunteers said that the one thing that made him really angry while doing this work was a recipient’s asking, ‘Is this all?’ when presented with groceries. At another soup kitchen, a member of the kitchen’s staff remarked while serving, ‘You can give some people things and they are still dissatisfied.’ A staff member at another kitchen expressed another aspect of this feeling when he said that just one ‘thank you’ would make his day (p. 244).

These differences in the conduct and attitudes of soup kitchen staff and volunteers and the presence or absence of social distance and control may be associated with the time period of observation. There are more than 10 years between Glasser’s field work and Stein’s, Sarvetnick’s, and my own, a period in which the “emergency” response to hunger has become institutionalized and volunteers have grown impatient with continuing need, burned out, and become less complacent about their own futures. There may also be regional differences in church and nonprofit organizational culture and roles. Glasser (1988) worked in the Northeast, Sarvetnick (1995) and I in the mid-Atlantic region, and Stein (1989) in the Midwest. The size of the community where the soup kitchens were located, with Glasser’s site in a town of 20,000—by far the smallest—and Stein’s in St. Louis—the largest—may also contribute to these differences. In addition, Glasser’s research focus was on the guests and their relationships with each other, rather than the organizational framework, staff, or volunteers.

CONCLUSIONS

Nonprofit organizations play critical roles in the lives of many citizens. In addition to their familiar service functions, nonprofits play political roles as well (Smith & Lipsky, 1993; Wolch, 1990). More recently, as contract providers of government-mandated goods and services, they have been called upon to represent the welfare state to its citizens, providing a buffer between state policy and service delivery (Smith & Lipsky, 1993). The welfare state is now heavily reliant on voluntary organizations for the delivery of essential public services (Fabricant & Burghardt, 1992; Kramer, 1989, Salamon, 1993; Wolpert, 1996). The state is also dependent on voluntary organizations to maintain the appearance
of continued service and an adequate social safety net (Wolch, 1990; Wolpert, 1996). Along with Wolch, Salamon, and Smith and Lipsky, I argue that the increasing reliance of nonprofit service organizations on government funding has blurred the distinctions between these sectors and changed what nonprofit agencies do and whom they serve.

Until recently, many nonprofits focused on serving clients whose needs were compatible with their service mission. They had much less need for documentation and verification and much more trust in clients’ testimony than government agencies. In this article, I viewed the adoption of explicit and restrictive eligibility and service criteria consistent with those practiced by government as an example of the transformation in the voluntary sector’s character and as resulting in reduced accessibility of services. This change also influences the relationship between those who provide food assistance and those who receive it, making the interaction more rigid and less open to accommodating individual recipient circumstances.

This study provides evidence that (1) voluntary organizations (in this case food assistance providers) have been drawn into a growing institutionalized “shadow government” (Wolch, 1990); (2) this newly institutionalized voluntary bureaucracy closely parallels the bureaucracy, the rigidity, and the depersonalization of government agencies; (3) willingly or not, this institutionalized food provision network contributes to the continued view of poverty in America as primarily the result of personal defects and temporary misfortunes requiring only an “emergency”—albeit virtually permanent—response from society; and (4) these changes have consequences for the transfer of responsibility for assistance from the public to the private sector under welfare reform.

Fabricant and Burghardt (1992) reviewed evidence that economic restructuring has led to cost-containment policies in public welfare provision and argue that cost containment results in the reduction of skill level and control over work, e.g., the adoption of industrialized and bureaucratized social welfare practice. They argue further that as a result of cost containment, labor in the public social service sector increasingly resembles factory work rather than autonomous professional practice. Moreover, they see the fiscal relationship between government and voluntary agencies as significantly affected by cost-containment policies and resulting in centralizing and bureaucratizing pressure on voluntary agencies, which I have also documented in this study. They concluded that “these forces are in turn reproducing a social service labor process that is increasingly incapable of meeting client needs” (p. 118). These pressures and the resulting deleterious effects for clients will increase as the 1996 welfare law takes effect, given the sanctions, time limits, and exclusions that it incorporates.

Because many problems in cities are seen as deriving from individual cultural attitudes and behaviors, social service systems primarily provide individual treatment and solutions. They also provide individualized scrutiny and surveillance. As a volunteer in an urban emergency food assistance system, I was expected to share in the majority (and expressed) belief that many among the poor, especially those who are able-bodied adults, are to blame for their condition. Cook and Curtin (1985) observed:

Once “they” are seen as different from “us” and are seen as responsible for their own fate, a form of psychological disassociation occurs that absolves the more fortunate of personal responsibility for the plight of less fortunate others (p. 250).
These complex attitudes toward the poor, many of whom are minority women and their children, shape the national debate on urban poverty, welfare, and welfare reform (Coughlin, 1989). The myths and stereotypes are not just falsehoods that can be confronted and vanquished by empirical evidence. Even when misunderstandings are removed from the debate, the wellsprings of ideology that give form and substance to belief systems about social, political, and economic relations remain, as have been made abundantly clear by the results of the 1994 midterm election, the 1996 welfare law, and the rhetoric of the 1996 presidential campaign.

The role of societal uncertainty, political pluralism, and policy ambiguity in transforming intentions, limiting approaches to problems, creating organizations and elites, and fragmenting service delivery must be explored. Significant changes in public welfare ideology, policies, and programs will be achieved only when Americans as a whole redefine welfare objectives and priorities. A point made by Edelman (1977) in his analyses of the language of social problems is worth repeating. Aid to farmers, he pointed out, is called “parity.” Aid to business in the form of tax cuts is simply called “aid to the general economy,” while aid at the poverty level is called “welfare,” “relief,” or “the dole.”

It is one thing to recognize that the rise of food banks, food pantries, and soup kitchens is a community response to the needs of hungry people. It is another to suggest that food banks using private donations might be able to feed the hungry and eliminate the need for food stamps and other nutrition programs (Smith & Lipsky, 1993). Developing sound food and nutrition policies depends on an understanding of what factors affect diet and nutrition and how, why, to what extent, and in what contexts they do so. Thus, qualitative researchers have much to contribute to the national policy debate on the existence and prevention of domestic hunger. Intensive studies using participant observation and case studies increasingly are recognized as potentially one of the most effective ways of answering these questions. If those planning policies and programs look only at outcomes, they are likely to underestimate recipients’ actions and capabilities. They might, for example, overestimate the need for nutrition education and underestimate the need to aid people in their attempts to obtain adequate resources.

Similarly, this research demonstrates that examining the impact of broad social and economic forces on policy formulation and the resulting program implementation are equally critical analytic undertakings. However, to fully understand the impact of such forces, it is necessary to analyze how social and economic changes, as well as policy and programs, are experienced by the participants.

Such work can uncover some of the troubling issues associated with welfare state privatization that have been overlooked or ignored by policy makers. When social services are privatized, individuals who can afford to do so will purchase such services in the private market, while those who cannot will have to rely on residual public and nonprofit sectors, which will be more rigid and controlling and less accommodating to individual circumstances. The heightened monitoring and attendant paperwork associated with client access to voluntary social services and agency compliance with government standards have significant implications. These compliance mechanisms effectively limit a number of the historical advantages of voluntary agencies. This research and the work of other analysts (Hopper, Susser, & Conover, 1985; Wagner, 1993) suggest that, when providers are called
upon to devote more and more time to paperwork requirements, they are less available to clients. Fabricant and Burghardt (1992) observed:

Perhaps the most striking outcomes associated with the containment of costs are the new managerial practices and structures being implemented by voluntary agencies...Agencies characteristically made certain programmatic changes in response to fiscal pressures. Many agencies chose to eliminate programs, reduce levels of service, and tighten eligibility standards (p. 123).

In such circumstances, the social and cultural concepts of poverty and welfare that structure interactions between staff and volunteers and those who request assistance must be understood by policymakers and program implementors.

There is a critical need for renewed anthropological attention to poverty, welfare, and other aspects of the changing relationship between the state and the voluntary sector and for such analyses to be part of the urban affairs corpus. The connection between macro-level changes in the economy, changes in public policy, and the life chances of American families must be explicated. Ethnographic research should play an important role in examining the structures of meaning that inform the lives of those in poverty and those who “serve” them, for public policy cannot be effective without this knowledge.

REFERENCES


