Moving from Risky to Response-able Care

Bethaney Turner ⓘ

Centre for Creative and Cultural Research, University of Canberra, Canberra, ACT, Australia;
bethaney.turner@canberra.edu.au

Daisy Tam

Department of Humanities and Creative Writing, Hong Kong Baptist University, Kowloon, Hong Kong;
daisytam@hkbu.edu.hk

Abstract: Food rescue is commonly depicted as a means of caring for the hungry and "the environment". By paying close attention to care practices in food rescue through a review of international literature and fieldwork in Australia's capital city, we highlight the dominance of *risky care*. For "Good Samaritan" donors, risky care enables the problems generated by surplus food to be transferred to food rescue organisations. This transferral focuses attention on the materialities of surplus at the point of collection, effectively obscuring and contracting the spatial, scalar and temporal becomings of excess food. Repeated practices of risky care are shown to: normalise reliance on rapid, agile food rescue organisations; negate human/more-than-human entanglements in mutual relations of care; and compromise fulfilment of recipients' right to food. Instead, we identify the need to support and amplify modes of *response-able care* to more equitably distribute risks throughout food flows.

Keywords: food rescue, care, more-than-human, food waste, risk

Introduction

Attention to surplus food and its potential negative economic, social and environmental impacts in the minority world has grown in recent years. Global concern is particularly evident in the subset of the UN's 12th Sustainable Development Goal concerning sustainable consumption and production patterns that sets out the aim, by 2030, to "halve per capita global food waste at the retail and consumer levels and reduce food losses along production and supply chains, including post-harvest losses" (United Nations 2015: para. 12.3). Many nations, including the US and Australia, have introduced the same target, along with the European Union whose efforts have been supported by initiatives such as the designation of 2014 as the European Union's "Year Against Food Waste" and the French Government's 2016 ban on large supermarkets binning still edible foods.

This intensified focus on food waste and its avoidance has prompted the creation of a variety of ad hoc community groups and more formal not for profit (NFP) organisations that aim to coordinate the redistribution of still edible food

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otherwise destined for the waste stream. The work of charitable food rescue groups has been positively received, consistently represented by media and governments as being highly successful in diverting surplus to assist those less fortunate fulfil their right to food. This is despite the absence of clear and consistent metrics to assess food rescue interventions (Hecht and Neff 2019:17). These forms of food redistribution are also identified as key strategies for reducing organic waste in landfill, thus reducing methane emissions and leachates, while also preventing wastage of key resources used to grow food such as water and phosphorous. Overwhelmingly, the redistribution of surplus food is represented as a means of demonstrating care within a moral economy by benefiting the hungry and the environment (Hecht and Neff 2019; Mirosa et al. 2016). Participation in these caring relationships is incentivised for both businesses and governments; the former avoids costs of disposal and the latter are rarely hailed into the redistribution process at all (Devin and Richards 2018; Vlaholias et al. 2015:7999).

By drawing on international literature and fieldwork carried out in Canberra, Australia's capital city, we focus attention on how particular modes of care are enlivened, enabled and justified within contemporary food rescue practices. In concert with much of the work within an ethic of care framework, our research demonstrates that not all modes of care are equal (see Midgley 2016; Pitt 2018; Tronto 1993). In food rescue, we identify the dominance of what we term *risky care* which adopts a charity-based framework within which donors are portrayed as "Good Samaritans" providing benevolent care for vulnerable humans (the hungry) and more-than-humans (the environment). Risky care works to normalise donor generation of ad hoc food surplus and naturalise the temporalities of decay of foodstuffs in their care. By accepting surplus and its material qualities at the point of donation as inevitable, risky care abstracts these foods from the diverse assemblages of socio-technical and political-economic relations within which they "become". This abstraction enables donation to be represented as an act of care regardless of how well the surplus has actually been cared for. Through donation, the risks associated with food surplus are transferred to food rescue organisations. These organisations then assume practical and ethical responsibility for maximising the amount of food that can be redirected to feed those in need while minimising negative environmental impacts. To mitigate the associated risks, food rescue organisations and their workers (many of whom are volunteers) must be reactive, agile and adequately resourced to quickly redistribute these "benevolent gifts" (Heldke 2009).

While risky care can contribute to positive outcomes, reducing both hunger and environmental harm, we contend it limits how care can be practised. The reactive nature of risky care and its contracted and abstracted spatial reach, scale and temporalities reduces opportunities to care in ways that comprehensively fulfil the right to food. Risky care also obscures the intra-actional becomings of surplus and its material qualities. Drawing on Williams' (2020:6) assertion that there is a need to "find ways to collectively shape diverse cultures where caring is valued, competently practised and fairly distributed", this paper explores the possibility of a more equitable approach to care within food rescue. We develop the nascent notion of *response-able care* which fuels the redistribution of relational, not

reactive, care practices throughout food flows by acknowledging that food surplus and its materialities are produced through human and more-than-human intra-actions (Barad 2007).

To explore these ideas, the paper first sketches out the scalar, spatial and temporal scope of excess food and the growth in food redistribution services. We then show that food rescue operates within a charity framework that limits its capacity to fulfil recipients' right to food. By drawing on recent care literature, we identify the challenges and possibilities of recognising care as produced through human and more-than-human intra-actions. We then tease out the notion of *risky care* and gesture towards the productive potential of *response-able care* before demonstrating how these manifest in our Canberra-based fieldwork. We echo other scholars (Cloke et al. 2017; May et al. 2019) in drawing attention to the fundamental inequities perpetuated through food rescue. However, we adopt an "in the meantime" (Cloke et al. 2017:703) approach identifying the process of donation (particularly for large supermarkets) as an area where response-able care is both already taking root and ripe for further cultivation to enhance food equity and improve fulfilment of the right to food.

The Risky Becomings of Food Waste

Between 10 and 40 percent of the world's total food production is estimated to be lost at some stage of the food system, from production to consumption (FAO 2019; Parfitt et al. 2010:3079). Waste, however, is not something that simply is, rather it "becomes" due to a variety of cultural, economic, social, political and spatial issues (Evans 2012; Gille 2012). Gille (2012) demonstrates this through her work on "food waste regimes" (which she applies to the production, representation and politics of waste) whereby political-economic efforts to minimise perceived risk are shown to produce waste at particular points in dominant food systems, reducing what is available to be consumed. Legal and technological risks are limited through the imposition of particular aesthetic and safety standards, for example use-by and best-before dates and regulated cosmetic standards for particular fruits in some countries (Gille 2012:35−36). Krzywoszynska's (2012:48) work further supports the key role legislative and regulatory conceptions of risk play in generating food waste, noting that the reasons potential food becomes assigned to the category of waste "is not necessarily linked with the politics of value, or indeed with environmental concerns", but is instead linked to legislation, which enacts a "uniquely powerful regulatory intervention into the spaces of agro-food production as sites of risk, be it environmental or economic".

The Food Loss and Waste Accounting and Reporting Standard introduced in 2016 with the aim of establishing clear universal definitions for food waste, acknowledges the multi-faceted impacts on food waste generation, observing that "[w]hat is considered inedible varies among users … changes over time, and is influenced by a range of variables including culture, socio-economic factors, availability, price, technological advances, international trade, and geography" (Food Loss and Waste Protocol 2016:2). These variables lead to waste being generated

via the rejection of fruit and vegetables at the farm gate due to cosmetic standards; the high-cost of harvest versus low sale price leading to foods not being harvested; and risk averse use-by and best-before dates. As Gille (2012:34) notes, "we live in a food waste regime in which there is not only a mechanism for bad weather and pests to result in food waste, but also a mechanism in which good natural conditions lead to waste as well".

The global imperative to reduce food waste, coupled with these broader scale regulatory, production and manufacturing issues embedded within risk averse, waste-producing food flows, contributes to generating the need for systematic food waste repurposing efforts. Food banks and food rescue services fill these roles. We define food banks as NFPs with major food industry partners that store large volumes of (usually) non-perishable food items, including items purchased outright from suppliers as well as donated surplus foods (Lindberg et al. 2015; Lohnes and Wilson 2018). These items are distributed to local community or charitable groups that direct these to those in need, namely "the most disadvantaged community members, including migrants, people experiencing homelessness and the working poor" (Lindberg et al. 2015:359). Food banks have been particularly dominant in the delivery of emergency food aid (Caraher and Cavicchi 2014). In the UK, the term food banks has also been used to describe what other jurisdictions refer to as food rescue (see Midgley 2020).

Food rescue organisations are largely NFPs that collect surplus food—processed, cooked and fresh—from a range of venues including supermarkets, bakeries, farmers' markets, residential halls, airlines and catered events. These initiatives have been promoted as a solution to diverting food from the waste stream and assisting those-in-need. Due to the need to quickly distribute fresh and freshly prepared food before it spoils, food rescue efforts are labour-intensive (often reliant on significant unpaid labour) and usually work closely with local communities or other charitable groups to distribute the collected surplus. Some food rescue services also deliver goods to foodbanks. Redistribution efforts are consistently represented as being highly valued through their capacity to reduce food waste entering landfill by feeding the hungry. Consequently, these waste diversion efforts are justified under broader poverty alleviation goals that aim to fulfil the human right to food.

Rights, Charity, and Care

The right to food is enshrined in Article 25 of the 1948 UN Declaration on Human Rights, being expanded and developed into international law in the International Covenant on Economic, Social and Cultural Rights (ICESCR). The ICESCR points to two key elements of the right to food: firstly identifying "adequate food" and positioning it as a component of the "right of everyone to an adequate standard of living" (1966: Article 11.1); and, secondly, emphasising that the right "to be free from hunger" can be realised through a focus on issues of "production, conservation and distribution" (1966: Article 11.2). Recognition of access as a key impediment to the fulfilment of the right to food led to the 1999 inclusion of the statement that everyone should have "physical and economic

access at all times to adequate food or means for its procurement" (CESCR 1999: para. 6). Access, however, has been shown to be highly complex and not limited to financial and spatial issues but also socio-cultural contexts (Sen 1981). The need to attend to the embodied visceral and affective aspects of access is emphasised in the work of Hayes-Conroy and Hayes-Conroy (2013:84) who suggest that "food access in affective/emotional terms is about a whole network or rhizome of forces that influence bodily movement, desire, and drive". As such, having a "taste" for certain foods, and willingness or ability to ingest these, is related to but distinct from, instrumentalist notions of access and availability.

Recognition of multifaceted notions of access, attention to "tastes", and ability to consistently fulfil the right to adequate food, is rarely evident within the care provided in food rescue (Caraher and Cavicchi 2014; Wilson et al. 2012). Instead, as outlined above, the temporal pressures mean organisations focus on minimising both waste and the number of people experiencing hunger. Within the guiding charity framework, donations are accepted as "benevolent gifts" (Heldke 2009) and this often leads to limited fulfilment of the right to food. Here immediate calorie needs may be met but cultural appropriateness and nutritional quality may not be considered. The privileging of the goodwill of benefactors (gift givers) in these relationships is evident in the name commonly ascribed to the legal mechanisms enabling food donations to occur: Good Samaritan laws. While, donors may be Good Samaritans ready to help those in need, food donation also enables them to comply with food waste disposal laws (where applicable) and can reduce costs (including labour) associated with disposal of surplus.

Consistent with trends evident in contemporary geographies of care (Power and Hall 2018), food rescue organisations fill gaps in the provision of services and fulfilment of rights generated by neoliberal policies and practices (Denning 2021; May et al. 2019; Poppendieck 1999). Work on food banks points to how this depoliticises hunger and surplus food by failing to address the systemic injustices that produce these two extremes while also reproducing stigma and engendering feelings of shame for recipients (May et al. 2019:1254). Despite these limitations, as Cloke et al. (2017) observe, identifying problems with food rescue should not equate to a demand to end these practices and abandon those who rely on them. Instead, while advocating for broader structural change, "in the meantime" (Cloke et al. 2017:703), we should pay more careful attention to the needs of recipients within existing constraints.

Situating Care

Care and caring practices have received regular attention in the discipline of geography over the last three decades. These concepts have been addressed in multiple ways with an emphasis on issues of scale, space, scope and relational interactions that produce "landscapes of care" (Bedore 2018; Milligan and Wiles 2010; Pitt 2018; Power and Williams 2020; Williams 2017). In this scholarship, there is a distinct focus on humans and embodied practices and how relationships with, and of, the materiality of places, temporal experiences and political and socio-economic positionings shape these (Atkinson et al. 2011;

Dowler et al. 2019; McEwan and Goodman 2010; Power and Hall 2018). This is indicative of the broader caring literature which has historically drawn on an ethics of care approach (Green and Lawson 2011; Lawson 2009; Popke 2006; Tronto 1993).

The feminist informed work underpinning an ethics of care framework represents an important critique of aspects of what eco-feminist Val Plumwood (1999) calls the Western "narrative self", where humans are represented as unilaterally acting, rational, independent subjects. Instead, an ethics of care approach emphasises care as relational, "a social responsibility", and a practice rather than "merely a disposition" (Cox 2010). A moral framework of care ethics may not, on its own, induce "progressive" changes in the way social relations are organised and effectuated (Conradson 2011; Williams 2017). However, care's manifestation in everyday practices provides opportunities for restructuring and reorganising caring relations to make them more equitable (Beacham 2018; Williams 2017).

The focus on social relations in an ethic of care approach has, however, been read as emphasising a "humanist orientation" at the expense of adequately attending to the more-than-human (Harbers et al. 2002). As Harbers et al. (2002:218) observe:

> The relevant entities in its [ethics of care] theoretical repertoire are human beings. This implies that while the theoretical notion of the will has been subjected to considerable change, its counterpart, nature, has been left unanalysed in this tradition.

By being principally concerned with humans, there is a risk that an old "mode of humanity" (Plumwood 2001) centred on ideas of human exceptionalism and hyper-separation from the more-than-human (commonly represented as nature), could be perpetuated.

Traces of this humanist legacy have been identified as lingering in many invocations of care and caring practices (Atkinson et al. 2011; Bennett 2010). For Jane Bennett (2010), the historical occlusion of more-than-humans in care relations and the perpetuation of a human/nature binary fuel anthropocentric practices and justifications for the exploitation of planetary resources. Indeed, Bennett (2010) suggests that notions of caring for the planet tend to invoke a passive, vulnerable earth that requires humans—and humans alone—to develop ways to save it. Such discursive moves consequently fuel the great myth of human exceptionalism that has wrought the damage. Pitt (2018) indicates similar concerns in her work on community gardens, highlighting the dangers of one-way care for plants and soil that focus primarily on meeting human needs.

Attention to more-than-humans in care scholarship has grown in recent years. Much of this work brings together feminist conceptions of materiality with science and technology studies to highlight entangled human and more-than-human caring practices (Beacham 2018; Mol 2008; Mol et al. 2010; Powers and Williams 2020; Puig de la Bellacasa 2017; Williams 2020). Puig de la Bellacasa's (2010, 2017) work in gardens challenges the myth of uni-directional human care by detailing how humans and nonhumans are imbricated within complex relational modes of "mutual care", observing that "humans are not the only ones caring *for* the Earth and its beings" (Puig de la Bellacasa 2010:164).

Mol's research in healthcare settings takes seriously the capacity of more-than-humans to incite action and induce affective responses through their very vitalities (Mol 2008; Mol et al. 2010). For Harbers et al. (2002:217), this prompts recognition of the everyday materialities of care whereby more-than-humans, such as food and drink, can become "media for care":

> … they [food and drink] *do* care. *They* taste good or bad, have a nice or gruesome texture. They are, not as delegates of people, but all by themselves, objects of longing or aversion. It is thus that attending to food and drink in all their daily life complexity is a crucial part of caring.

The care food offers is relationally produced and contextually dependent. It is linked to visceral qualities, physical attributes such as nutritional content, personal memories, and socio-cultural connections. As Hayes-Conroy and Hayes-Conroy (2013:82) observe, taking such experiences of food seriously challenges assumptions that "sensory modalities exist in a natural/essential category that is both prior to and distinguishable from their social experience and intellectual development". Food that cares for some may not care equally for others (human or more-than-human).

The growing body of more-than-human care scholarship lays the groundwork for generative ways of understanding the intra-active becomings (Barad 2007; Haraway 2008) of food and how particular human and nonhuman care practices shape the way food itself can care. However, some caring practices continue to be plagued by human-focused, uni-directional legacies that perpetuate human/more-than-human binaries, even when the more-than-human is overtly attended to. In food rescue, this is evident in the dominance of risky care practices.

Identifying Risky Care

Risky care responds to donor need to limit the risks associated with surplus. The legislation associated with Good Samaritan and similar laws enables businesses to transfer their risk to food rescue organisations. Risks for donors revolve around two key concerns: reputational and financial. Reputational risk manifests: through potential health and safety issues associated with the quality and viability of donated food; when expectations associated with donor/brand qualities are compromised; and in relation to corporate social responsibility (see Caplan 2017). Financial risks primarily relate to the costs of disposal through use of waste management services or employee labour. Poor management of reputational risks can also have negative financial impact on donors. Large-scale donors typically have contracts in place with food rescue organisations detailing how these risks will be managed. In the process of food collection, responsibility for these risks is transferred to food rescue services.

Food rescue organisations take responsibility for the transferred risks at the point of collection. Mitigation of these risks begins immediately via an initial assessment of the materialities of surplus where attention is paid to quality, freshness, cleanliness and safety. To maximise the volume of food diverted from the

waste stream, food rescuers must be quick, agile and ready to act in response to the ad hoc qualities and volume of surplus encountered. The very vitalities of the surplus call them into action to preserve edibility. This responsiveness brings the more-than-human into view via the immediate materialities of the foodstuffs and imaginings of environmental damage if the surplus becomes waste. However, by focusing attention on the materialities of surplus at the point of collection, the foods are abstracted from the broader socio-technical and political-economic relations that led to them becoming surplus and which shaped their visceral qualities and rate of decay.

The abstractions embedded in risky care normalise and localise the existence and ad hoc nature of surplus as well as the temporalities of food decay, accepting the latter as inevitable "natural" processes. Seeing these material realities as inevitable obscures the fact that donor values and care practices—including how donors determine what has market value or not, how quickly surplus is passed on to food rescuers, and how surplus is stored prior to donation—directly impact on the qualities of these "gifts" and shape the care food rescuers must enact. How quickly surplus needs to be redistributed and whether food requires extra care to ensure it is safe to eat (washing, value-add preparation, or cooking) is directly influenced by donor care.

The contracted temporalities and spatialities within which food rescue organisations work to assess and manage the above risks constrains the repertoire of caring practices they can enact. These constraints reduce opportunities to care in ways that fulfil the human right to food by attending to dietary needs, cultural appropriateness and tastes. There is also limited capacity to incorporate a more-than-human care approach in food rescue that moves beyond food rescuers' sensorial responsiveness to surplus at the point of donation. More comprehensive attention to the human/more-than-human becomings of food and food surplus across stretched scalar, spatial and temporal human/more-than-human intra-actions would draw attention to the inequities perpetuated through some practices of care in food flows. Such an approach could support redistribution of risk and responsibility for surplus throughout food flows. We identify potential for this to occur through enactment of *response-able care*.

Introducing Response-able Care

Response-able modes of care are attentive and attuned to the intra-active human and more-than-human vitalities of food throughout its myriad journeys from production to potential consumption or waste. The work of Mol (2008; Mol et al. 2010) and Puig de la Bellacasa (2010, 2017) among others gesture towards productive ways in which care and caring practices can be broadened out to include more-than-humans beyond immediate, close connections in a stretched ethical framework. Response-able care is one way of conceptualising these alternative modalities. This mode of care builds on Haraway's (2008:71) notion of response-ability understood to be "a relation-ship crafted in intra-action through which entities, subjects and objects, come into being". Intra-actions highlight that we only ever "become something" in relation to something else, such that we are

"intra-actively produced through one another" (Barad 2007:245). That is, we are always co-emerging, co-existing or "becoming with" (Haraway 2008). We conceive of response-able care as also requiring an openness and sensitivity to Latour's (2004:205) notion "to learn to be affected, meaning 'effectuated', moved, put into motion by other entities, humans or nonhumans". Such a mode of care is necessarily shifting and in-process through various intra-active relations which highlight that we are in mutual relations of care (Puig de la Bellacasa 2010).

Through these characteristics, response-able care works to expand the scope of ethical concern and responsiveness in food rescue. This mode of care draws attention to the becomings of food waste and the cascading amalgamation of vulnerabilities that underpin the need for food rescue and the dominance of risky care. It also fuels intervention in these "business as usual" practices by encouraging redistribution of response-ability for the becomings of food waste throughout food flows. This redistribution presents possibilities for reconfiguring the care practices food rescuers are able to enact. This could open opportunities for better fulfilment of the multi-faceted aspects of the right to food for food rescue recipients.

Despite risky care being dominant across food rescue settings, including in our fieldwork, we also glimpse nascent, ad hoc forms of response-able care practices that could be further cultivated. We turn now to our fieldwork to flesh this out.

Food Rescue in Australia's Capital City, Canberra

In Australia, food rescue services began in earnest in the early 2000s following risk-reducing legal changes across the nation that enabled people and businesses to donate food they declare in good faith is "fit for human consumption" and has been safely stored and transported (ACT Parliamentary Counsel 2021). Prior to the introduction of these Good Samaritan laws, donors had been legally liable if anyone became ill from consuming their surplus food.

In Canberra, large-scale food rescue began with the Yellow Van service in early 2008. The Yellow Van was managed via an affiliation between OzHarvest, Australia's leading national food rescue service, and Communities at Work (CAW). CAW is Canberra's largest NFP community organisation, providing a range of services including childcare, programmes to support seniors, and food pantries. The Yellow Van adopted the OzHarvest model of food rescue, having vans on the road collecting and redistributing food on the go throughout the day. In 2012 the CAW-OzHarvest partnership was dissolved, with CAW assuming sole responsibility for the service. CAW deemed the costs of the highly responsive food rescue model implemented by OzHarvest to be unsustainable and introduced changes. The new approach positioned CAW Headquarters as a centralised hub for redistribution. Food was collected from donors and returned to the hub so the goods could be packaged up for other charities and to help stock the on-site food pantry. To facilitate the former, CAW introduced an ordering system enabling the 60+ charities they supplied to indicate what types of food they most desired. CAW attempted to fill these "orders" by combining the rescued food with goods

from a foodbank—the principal source of the food pantry stock—located three hours up the highway in Sydney.

CAW's operational shift meant the organisation started to refuse potential donations when they had no specified redistribution plan, lacked infrastructure to store food to prolong its usability (such as freezers) and where the collection of goods was deemed to be inefficient (e.g. small batches) or dominated by inappropriate food options (sweets and doughnuts were regularly mentioned during the fieldwork). Donors and local charities expressed dismay at this shift, lamenting the growth in food waste and the need for more food to feed the city's hungry. In response to ongoing lobbying from donors and charities, OzHarvest returned in 2014 to run its own food rescue service.

Our fieldwork commenced in late 2015. Ethics approval was obtained from the University of Canberra. The research involved multiple site visits with CAW and OzHarvest over a seven-month period incorporating informal conversations, the taking of field notes, participant observation and field note-taking during van runs and cooking classes. In-depth semi-structured interviews were conducted through six structured site visits with eight paid and volunteer participants.

Risky Care in Canberra

> We won't say no if the food's ripe for us to collect, we'll take it. And then our aim is to get it out to the people before the end of the day, as much as we can. (OzHarvest food rescuer)

While CAW and OzHarvest adopt different models of food rescue we contend that both operate within the dictates of risky care. This is fuelled by the organisations' responsiveness to donor need and their workers' (paid and unpaid) responsiveness to the visceral materialities of surplus at the point of collection. The quote that begins this section illustrates OzHarvest's approach; they are ready and waiting to respond to donor excess. This responsiveness requires significant resourcing in terms of infrastructure and labour. While CAW takes a more controlled approach to onboarding donors and planning its van runs, those with whom it forges partnerships continue to shape the organisations' food rescue activities.

As outlined above, at the point of collection these NFPs—and the food rescuers themselves—assume responsibility for maximising what can be saved to feed the largest number of people and to minimise potential environmental damage. This requires rescuers to take a series of careful yet rapid actions to save foods at risk of becoming inedible and to avoid waste. As discussed below, at times this involves accepting and redistributing undesirable goods, namely foods for which there is limited demand and which are deemed to be unhealthy. Despite this, all participants in this research enthused about the "good" food rescue does in the community. All rescuers referred to environmental and hunger reduction goals as motivators for their food rescue work, reinforcing the popular win-win discourse. Food rescuers' commitment to realising these goals was evident when observing their visceral encounters with food during van runs, cooking classes and, at CAW, when we were shown food that had been collected and stored for later use

(during on-site visits we were always invited to inspect the freezer) and used to stock the food pantry. The vitality of the food and its capacity to be "saved" to provide care for those in need was a source of great pleasure and satisfaction for the food rescuers. Some spoke of the "thrill" of collecting certain food ("veggies are always a major excitement") that they knew were needed by charities. Others spoke animatedly about the "life" left in wilted fruit and veg which could be used in cooking programmes.

There were, however, tensions evident in realising the environmental and hunger reduction goals, echoing concerns raised in previous research (Lindberg et al. 2015; Warshawsky 2015). As Warshawsky (2015:28) notes, despite the best intentions, those involved in rescuing food "may contribute indirectly to neoliberal governance models when they romanticise the power of local communities, focus on individual responsibility and depoliticise food issues". Tensions were particularly acute at the point of collection, where food rescuers pick-up not only goods for redistribution and the onus for maximising food saved but also responsibility for minimising negative reputational and financial risks for the donors. While these NFPs accept donor surplus as "benevolent gifts" (Heldke 2009), the work of food rescuers tasked with managing these risks is also "gifted" to donors. This "gift" is particularly evident in the visceral, embodied labour rescuers invest at the point of collection. The care taken by food rescuers to assess (for quality and safety), separate (organise donations to avoid cross-contamination) and decide how to redistribute food (make ethical decisions in response to the volume and type of food donated) is informed by their prior training and responsiveness to the materialities of the surplus they encounter.

At both organisations we witnessed evidence of the detailed food safety and risk assessment training volunteers and paid employees were required to undertake before they could collect and redistribute food. This involved learning rules and regulations (all food rescuers were well versed in the statutory requirements related to food safety) as well as engaging in multisensorial "training of sensitivities" that enabled workers to develop the practical skills to assess and provide optimal care for donations. This training included strict guidance on cleanliness and protocols to prevent contamination among donated items.

Each organisation had standardised, systematic processes in place to guide food rescuers through the assessment and handling of donations upon collection. If donors were present (not always the case during pre-organised collections from loading dock), the rescuers would gather information from them relating to how the food had been cared for prior to collection. This included details about length of time goods had been on the dock and whether the donations had been previously refrigerated or frozen. This was followed by a visual inspection to assess quality (including integrity of packaging, best before and use by dates) and to look for signs of decay. Next food was separated into categories such as fruit and veg, dry goods, meat, dairy, prepared foods, etc., enabling closer inspection of the food and determination of how quickly it needed to be redistributed. Each item was then weighed and details recorded before the food was loaded ready for redistribution. These assessment activities needed to occur quickly to ensure donors could receive new deliveries at their dock, food rescue vans could

maintain their pick-up schedule or maximise number of collections, and to avoid prolonging poor storage of food. Despite these pressures, great care was taken in the multisensorial process of handling, sorting and inspecting the food. The level of labour, skill and ethical deliberation needed to assess the risk the foods might pose was directly related to the ways donations had been handled prior to collection.

There was significant variability in the way donors cared for their surplus. Some donors were described as "fantastic" having "really looked after the produce" prior to collection. Others, however, presented food rescuers with what was described as a "garbage pile". At such collection sites food rescuers reported having to "rummage through" the surplus to identify what could be "saved". This was messy work in what was viewed as an unsanitary and uncaring environment. Collectors were prepared for these encounters through their food safety and risk assessment training and, materially, by the requirement to wear clothing and gloves that would protect them from injury, danger and mess.

Encounters with "garbage piles", or poorly sorted food with sketchy information about its previous handling, present as moments where the dominance of risky care is viscerally experienced. This treatment of surplus draws attention to the act of donation as a process of risk transfer, prompting some donors to make minimal investment in mitigating potential risks. Food rescue organisations' investment in regulatory and bodily training for workers, coupled with their implementation of systematic processes to govern the assessment and sorting of the surplus at the point of collection, attests to their preparation for, and acceptance of, the risks transferred with the surplus. The food rescuers in this research engaged in these processes with enthusiasm and were dismayed when they saw surplus still being binned by donors (a practice they regularly witnessed and which was seen on 1 van run during fieldwork). As one rescuer noted, "that [the binning] hurts sometimes because my heart is there to do the best".

Through time-consuming and labour-intensive material encounters with surplus, food rescuers work to minimise risks for donors, risks to recipients, risks to the environment and risks to their reputation as a reliable, trusted NFP organisation. Management of these risks is complicated by the varied donor treatment of surplus as well as the ad hoc nature of supply.

Compounding Risky Care with Ad Hoc Supply

Variability in volume, type and quality of donations directly shapes the care enacted by food rescuers. Consistent with other research (Cloke et al. 2017; May et al. 2019), the ad hoc nature of donation presents a considerable resourcing challenge for the NFPs in our Canberra fieldwork. It also limited capacity to fulfil the right to food of recipients. While CAW invested in developing contracts with large supermarkets to reduce the number of collection points and to provide more consistency in supply, even these outlets provided highly variable donations. It was noted that this could range from "some days nothing to some days 500 kilos". The variability in supply led food rescuers to express unease at their resulting inability to always meet recipient needs. This unease was particularly acute

when there was little collected. At these times, the rescuers became responsible for deciding how best to distribute donations, knowing some would miss out. The counter experience of abundant donations also raised ethical concerns for food rescuers. This was exemplified by one food rescuer who observed:

> There are certain times of the year, some days and some weeks there's not as much so we give them [the charities to whom they redistribute], we try and share it meaningfully, a meaningful amount. But there are other times of the year in the holidays and Christmas and Easter when, particularly Christmas when we cannot, they're [the charities] full, they can't take any more food. We have a van load of food and more coming you know and we're going "Where are we going to take this?" because everybody's full.

Working within a risky care framework in times of scarcity burdens food rescuers with the responsibility for making ethical choices that will lead to sub-optimal care. When this is contrasted with experiences of abundance—when there is no identifiable need for the surplus—the inequities in the food system along with the limits of risky care to effectively intervene in these, are palpable for food rescuers.

By being responsive to donor need and called into action by the materialities of surplus at the point of collection, the risky care enacted by NFPs contributes to donor surplus being abstracted from the broader human and more-than-human relations within which it is produced. This normalises the instability of supply. Consequently, in moments of both scarcity and abundance the inequities transferred through food flows are writ large for food rescuers who must take responsibility for ethical decisions about who gets fed and what might be wasted. The responsibility and ethical burden shouldered by food rescuers is compounded when close attention is paid to the types of food they collect and redistribute.

Undesirable Foods

Tensions between the types of food rescued and recipient needs were evident throughout this fieldwork, echoing the findings of existing research (May et al. 2019; Warshawsky 2015). This was particularly apparent in relation to the identified need to provide "good" or "healthy" food to recipients. While it is important here to be alert to the dangers of "good food politics" (see Guthman 2008), we found that food rescue organisations took a flexible approach to defining good food. In practice, good food was often deemed to be what was available and safe to eat, an approach fuelled by the need for food rescuers to be responsive to donor surplus.

As identified earlier, OzHarvest focuses on maximising the volume of food redistributed. It is no surprise then that varied recipient needs—beyond basic hunger alleviation—appeared not to be a key focus for the organisation during this fieldwork. OzHarvest and its workers in Canberra were certainly motivated by a desire to provide good care for those in need. They invested significant time and labour into achieving this goal. Through their hard work, they make an important contribution to reducing hunger in the region and reducing food in landfill. However, as outlined above, the risky care framework provides limited opportunities to

meet recipients' right to food beyond providing access to safe food that alleviates hunger. Fulfilment of the right to adequate food also necessitates that food meets "dietary needs and food preferences for an active and healthy life" (FAO 2003: para. 2.2).

Food rescuers were aware of—but not necessarily comfortable with—the tensions and trade-offs inherent within a donor responsive framework. This was apparent in stories they told of the difficulties encountered in redistributing some types of food. These difficulties had, at times, led to them needing to cajole recipients into accepting certain donations. Bread featured heavily in these stories, with food rescuers noting that the amount of surplus bread each day meant charities regularly had more than required (repeatedly witnessed in the fieldwork). Pre-prepared baked goods (such as doughnuts and catering leftovers) and confectionery were also mentioned. Responsibility for handling these tensions, and managing the ethical complexities of who should receive what foods, fell to food rescuers. This was exemplified in a story one rescuer shared about dropping off a large amount of confectionery post-Easter to an after-school programme. It was apparent that this rescuer had found the situation uncomfortable and, as he spoke encouraging the school to take the items, he laughed when stating that the sweets could be used "as an academic enhancer" before adopting a serious tone to note that "we [food rescuers] have to be mindful of our responsibilities in that sort of thing". Here the care able to be offered to recipients is constrained by food rescuers assuming responsibility for the Good Samaritan's donor surplus and associated risks. As Heldke (2009:216) states, "benefactors labour under no obligation to include recipients in decisions about the form gifts should take". Situations like the one outlined provide rescuers with few options but to expect recipients to also be grateful beneficiaries of this one-way imposed care.

A risky care approach to food rescue provides little opportunity to recognise the needs of different recipients. Where these needs are identified, they are unlikely to be consistently fulfilled due to the ad hoc nature of donations. During our fieldwork this became evident in relation to goods provided to a women's refuge. Pre-made ready meals had been donated to the women for months when food rescuers became aware that this reduced opportunities for them to develop their food knowledge and cooking skills. The food rescuers subsequently made concerted efforts to supply fresh produce and cooking ingredients. However, surplus fresh fruit and vegetables were regularly in short supply and were in high demand. Despite the food rescuers having the will to meet recipient needs, they were rarely able to do so.

Repeatedly throughout our fieldwork we found examples of the care able to be provided by food rescue organisations being curtailed by the dominance of a risky care framework. Even CAW's modified form of responsiveness to donor need did not eliminate the risks associated with ad hoc donor supply (namely not being able to feed everyone let alone comprehensively fulfil their right to food). This curtailed care was exemplified when CAW had an opportunity to enter into a contract with a new large-scale donor. Early in the negotiations the donor offered a large shipment of soft drink. While the organisation had moved away from redistributing high-sugar products and had no identified charity "need" or

redistribution plan for these goods, the donation was accepted. This decision was taken in the hope this would build mutual trust and lead to future donations better tailored to the needs of the charities they redistributed to.

There is often a mismatch between the nature of surplus food donations and the needs of recipients. The trade-offs and tensions that arise when donors transfer their risks to food rescue organisations directly impact on the everyday practices of care food rescuers can provide. As such, responsiveness to donor need, which necessitates quick, agile reactions to the materialities of surplus, raises questions about the capacity for food rescue to meet the right to food of recipients. It also requires food rescuers to regularly navigate complex ethical terrain. While risky care dominates food rescue, other modes of care are being enacted and could be expanded. We identify practices of response-able care through the process of donation as somewhere to start.

Opportunities for Response-able Care in Food Rescue

Earlier we detailed food rescuers' visceral engagements with surplus at the point of collection to demonstrate how these workers must adapt the care they provide to these foods in response to how donors have managed the goods prior to collection. Donor management of surplus directly impacts on what can be rescued and the nature of the risks transferred to food rescuers who must then invest time and labour to manage and mitigate these. We have argued throughout this paper that risky care emanates from practices that require rapid responsiveness to the materialities of end of market-life surplus within food rescue, consequently obfuscating the broader spatial, scalar and temporal human and more-than-human becomings of surplus or waste and the temporalities of decay.

Donors that provide similar care for surplus as they do for stock with market-value can reduce the risks transferred to food rescue organisations. This shared care can reduce the burden on food rescuers to make material and ethical judgements about what is safe for repurposing and how this is best redistributed. This represents an "in the meantime" (Cloke et al. 2017:703) approach that points to some of the ways that responsibilities to care for surplus can be redistributed throughout food flows rather than simply transferred to food rescue services. This does not solve the complex issues of poverty and hunger nor food waste generation. However, practices of response-able care supported through improved donor care for surplus management offer opportunities to better meet recipient needs and reduce waste.

Response-able care takes seriously the human and more-than-human intra-actions that contribute to the becomings of food surplus and potential waste. It also recognises that food is not just a resource to be managed but also capable of being a "media for care" (Harbers et al. 2002). Given our field work found examples of food rescuers encountering "garbage piles" of donations and ongoing binning of poorly cared for foods (particularly fresh produce) the process of donation is a site where improvements can be made. Donation practices imbued with response-able care could increase the volume and types of food being rescued, potentially improving capacity to fulfil the right to food of more recipients. Donor

implementation—particularly in large supermarkets—of more consistent, systematic, monitored and adequately resourced processes to manage donations provides an important starting point for this.

Food rescuers in our research viewed the variability of donor care encountered at large supermarkets as resulting from individual employee attributes, values and investment, while concurrently acknowledging that worker actions were curtailed by the ethos of the business. As one rescuer stated:

> If you don't have a very good store manager who believes in the philosophy of saving food and rescuing food and spending maybe that fraction extra in administration, then you don't get the produce.

> So, there's always this negotiation with these major chains in the importance of spending just that fraction of extra time to be able to provide us with the produce.

> So, you could have a very enthusiastic dockhand who is happy to do that and a store manager who insists that the staff find that time to do that, but you can have ones who just won't give an inch, and that's the frustration as well.

Another food rescuer expressed the desire for donor employees to better sort the "good from the bad", noting that "a lot of people don't care enough or don't know enough about it to want to do it, they won't devote that little bit of extra time to sort and store for us". This focus on individual workers bearing the brunt of responsibility—being those who need to do more, know more and care more —reflects the ethic of risky care that dominates food rescue. It is an approach reinforced, not just by the donors, but by the food rescue services themselves. Just as a focus on the materialities of donations at the point of collection abstracts them from their intra-actional becomings, a focus on individual shopworkers' actions abstracts their practices from the broader socio-technical and political-economic relations shaping supermarket work.

In practice variability in individual worker action needs to be understood as produced through a range of factors including: the precarity of paid labour in the supermarket sector which led to high staff turnover (particularly apparent with dockhands during this fieldwork); and the lack of consistent, systematic and monitored donation processes and protocols of the businesses along with inadequate resourcing for workers to carry out these tasks. The latter is reinforced by the perpetuation of a Good Samaritan, charity-based framework within which recipients, including food rescue organisations, are expected to be grateful for any gifts. The former indicates that the hungry recipients of rescued food are not the only vulnerable people involved in food rescue.

Practices of response-able donor care were evident in our fieldwork when: donations were kept at optimal temperature conditions right up to the point of collection; attentive sorting and labelling of food occurred; and through the provision of detailed notes about how higher risk foods such as meat and pre-prepared meals had been stored and handled. These actions challenge the risky care positioning of donors as no longer responsible for caring for goods once they have lost market value. They also debunk representations of decay as an inevitable, natural process while also challenging the idea that food rescue

organisations should be responsible for managing surplus, regardless of its visceral materialities, and its associated risks. In practices of response-able care, surplus food and its material qualities are recognised as being produced through the regulatory and business practices of donors—in this case supermarkets—that shape the everyday practices of their employees. By adequately resourcing practices of response-able care, donors identify and invest in the potential for surplus to be "media for care" (Harbers et al. 2002) for those unable to pay market value.

Conclusion

By drawing attention to the modes of care enacted in food rescue we have shown that not all care is equal. The dominance of a risky care framework that is responsive to donor need serves to contract and obscure the spatial, scalar and temporal becomings of excess food. These contractions represent the ad hoc nature of surplus, and its materialities, as natural and inevitable. Quick, agile food rescue services operating within a charitable framework are then accepted as the logical way to redistribute the surplus of Good Samaritan donors to feed the hungry and minimise any negative environmental impact from this excess. This charity-fuelled framework requires food rescue organisations to accept the risks transferred from donors at the point of collection. Food rescuers must then invest significant time and labour into mitigating these risks for donors, recipients, the environment and the food rescue organisation itself.

We have argued that by working within a risky care framework, there is limited capacity for food rescue services to meet the needs and fulfil the right to food, of recipients. We have also shown that risky care obscures the intra-actional becomings of surplus and its material qualities. Surplus is shaped by a variety of human and more-than-human inputs throughout food flows. And the material qualities of donations are directly impacted on by the way food is cared for by donors. That is, how human (labour) and more-than-human resources (business protocols and facilities such as storage space, refrigeration and freezers) are enrolled in practices of caring for surplus.

We identify the need to redistribute responsibility for the management of food surplus throughout food flows. By combining theoretical literature with on the ground fieldwork we gesture towards the generative potential of practices grounded in response-able care. Response-able care fuels practices marked by attentiveness, "learning to be affected", and attunement to the relational intra-actions and becomings of food surplus and its material qualities. Response-able care enables risks associated with surplus to be better shared throughout food flows rather than wholly transferred to food rescue organisations.

We identify the point of donation as an area where response-able care practices can be glimpsed and further nurtured. We suggest large supermarkets should take the lead here to increase their investment in resourcing and monitoring how surplus is handled in their stores. While major supermarkets in Australia have made "zero waste" commitments (Mitchell 2021), our fieldwork found significant variation in how donations are handled in these stores. While donating surplus is critical to supermarket realisation of zero waste goals, the quality and materiality of

donated foods means not all surplus can be readily redistributed. There is a need for these business to invest in operationalising response-able care for donations, not just committing to passing more surplus, and its associated risks, on to food rescue organisations.

If donors engage in practices of response-able care, they reduce the care burden on food rescue organisations. This could increase opportunities for these NFPs to devote more of their resources to advocacy and actions that target policy change and on-the ground action to support more wholistic food waste reduction, more equitable food relations and alleviation of poverty and hunger. As one food rescuer noted, "in a perfect world we wouldn't need to operate". Structural and systemic change is needed to move towards more equitable food systems. "In the meantime" (Cloke et al. 2017:703), nurturing response-able care in food rescue through the process of donation, could contribute to realising these goals.

Acknowledgements

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