

### 3 Voices of Hunger: Making the Invisible Visible

**John:** If I have money I go down to, what's it called, *Coney Island*, and get a plate of fries. Do you ever go there?

**Interviewer:** I've been there once.

**John:** They give you a plate of fries as big as your arm. It's a huge portion. It's like fries for a family. I get a glass of water and come back and have a cup of coffee at the shelter.

**Interviewer:** That's kind of your meal?

**John:** Yeah.

—John, white male, Chum client

#### **John: The Environmental Chemist**

John is a frequent client of the Chum food shelf. He is an elderly white man approximately sixty years of age. At one point in his life, John enjoyed an illustrious career working at the Honeywell and Pillsbury corporations as an environmental chemist; his job focused on looking for contaminants in the water. Perhaps from my accent or the way that I look, visible markers of my identity, he realizes that I am not from Duluth, maybe not from the United States. He tells me that he is a global citizen. "I live in a global world," he says, "I want to know what's going on around the world. I want to know the weather nationwide. I want to know what's going on in Duluth. I can't get the news so I'll sometimes buy a newspaper. Sunday paper is in my bag." He reaches to show me. John was married twice; he lost one wife to cancer and was a caregiver for her until she passed away. His faith is strong. He says: "A lot of people I loved. I had a former wife that died of cancer and

the biggest lesson I learned was it's not what you lost, it's what you had. You're gifted by God. He gives and he takes away. It's his to do. Someday I'll see her again."

John utilizes government and charitable food assistance, but is far from being food secure. If hunger policies were working well, then these sources of food would work to alleviate John's food insecurity. However, this is far from the truth; these channels stave off hunger but do not create a food-secure situation for John. As noted in the opening, crackers, water, and French fries are how he fills up—and that's on a good day. John receives a small amount in SNAP benefits each month, which he uses to purchase items at the grocery store. John is appreciative of the food from the Chum food shelf. He usually gets food he can store in his locker at the Chum homeless shelter: industrial food like precooked meats, canned vegetables, and soup. When he has money to spare, his favorite place to go is Coney Island, a diner in downtown Duluth, where he gets a plate of fries to fill his stomach. At Chum, 51 percent of participants interviewed were like John, with a high level of food insecurity; 41 percent had low to medium food insecurity; and only 4 percent were food secure. At RP, food insecurity was prevalent as well, but less extreme: 13 percent of participants experienced high food insecurity, 53 percent experienced low to medium food insecurity, and 31 percent were food secure.

John lives at the Chum homeless shelter. A series of health events eventually led to his unemployment, food insecurity, homelessness, and subsequent depression. He was in two car accidents, but the accident that dealt the biggest blow came from a horse! He was administering deworming medicine to a colt when it bolted ten feet off the ground, dislocating John's shoulder. He says: "I could feel the muscles rip all the way down to my waist. It was real sore for a couple of weeks. I couldn't drive. I was so weak. It healed up and then thirty years later, I'm tired. I'm in pain." He could no longer work because of his disabilities and soon began to have severe bouts of depression. The homeless shelter is a hard place to be. "It's a terrible place," John says. "I'm a deep Christian with a college education and I don't fit over there at all. There are some nice people but there are some really, really bad people. It's kind of a cross section of humanity." John compares living at the shelter with his experience a few months ago living in a beautiful cottage on the shores of Lake Superior. "You can get up in the morning and look at the sunrise and it was gorgeous." He was asked to leave

the house at the start of the tourist season in Duluth but was grateful for the time he got to spend there. John comes to Chum because it is a place where people like him go to in Duluth. As Lee Stuart, the director of Chum, says of the homeless shelter: “Yeah, this is a throwaway people place.”

Accessing food is a struggle, but it is not the only struggle in John’s life. A lack of resources means a shortage of other basic needs, like housing, health care, transport, education, and even taken-for-granted personal hygiene products. In the United States, a lack of resources and job opportunities, poverty, and inadequate social safety nets are key drivers of food insecurity (Coleman-Jensen, Gregory, and Singh 2014; Nord et al. 2010). There are strong relationships among food insecurity, income, housing, fuel prices, and the economy, so when fuel and housing costs increase, food insecurity among families also increases (Gundersen et al. 2003; Kirkpatrick and Tarasuk 2011; Webber and Rojhani 2010). John copes with hunger by utilizing food shelves and soup kitchens and eating cheap food at gas stations. However, living in poverty means that danger is always imminent: fighting and bullying at the homeless shelter, the pain of untreated illness—physical and mental—unexpected life events, and terror at the hands of bureaucratic systems and officers. John is stressed today because of an incident with his car. John lost his license a year ago and because he does not have a home, he parks his car on the street even as he is trying to sell it. The previous day, a man had come to him, interested in buying the car. John told the man to take it for a test drive, but the customer ended up taking it for a joy ride. The cops got involved and John spent all day trying to sort out the mess with the police, paying for a parking ticket, and trying to find a locksmith to open the car. The stress of the incident and the additional expenditure has him wired today. The food pantry cannot manage John’s immediate problem of hunger and does little to solve the problem of poverty that is at the root of it all.

In this snapshot of John’s world, there are broader issues of livelihood at stake, of which food is only one. The problem of hunger and food insecurity is deeply intertwined with other stressors that come with poverty: homelessness, mental illness, disability, unemployment, and lack of access to good schools and education, to name a few. Food insecurity is intertwined with stress, anxiety, feelings of powerlessness, violence, and trauma, but the magnitude of these nonfood issues is not captured in the food-insecurity data (Chilton and Booth 2007). The idea of intersecting or

interconnected needs is not a new one. The right to adequate food framework (United Nations Human Rights 2010) observes that “human rights are interdependent, indivisible and interrelated”—so violating the right to food can interfere with the fulfillment of human rights, such as the right to health, education, or life, and vice versa. The livelihood perspective of food similarly points out that though food is a basic need, it is only *one* of several objectives that people pursue (Yaro 2004). Food scholar Simon Maxwell (1996) argues that people employ complex coping strategies when faced with multiple deficiencies, threats, and uncertainties—as seen in a study conducted during the Darfur famine in Sudan, which found that people chose to go hungry in the present to preserve assets and future livelihood. Simply put, “people go hungry now, in order to avoid going (more) hungry later” (158). This type of coping was true not just for people in Sudan three decades ago but also is true for food insecure people in the United States today. Individuals and families cope by reducing or manipulating food intake so as to spend resources on other basic needs, such as housing and transportation and, when possible, phones, television, and cable TV—communication technologies necessary for social and economic survival in the United States today.

### Goal of the Chapter

Neoliberal stigma is a type of political economic stigma that distinguishes between Us and Them based on values of individualism, hard work, and personal responsibility. The tension at the heart of neoliberal stigma is captured in the belief that there is a category of people who “do not want to work and will not work.” Set against these stigmatizing discourses, the goal of this chapter is to recover, make visible, and foreground the voices of the hungry, the “throwaway people,” the food insecure, the welfare recipients, voices that are typically neither present nor represented in hunger discourses: the people who have been made invisible in the discursive sphere. In this chapter, in the voices of clients of Chum and RP, we hear about the complex struggles that poor people, people of color, and mothers and fathers face. In these stories, the multiplicative burden of oppression that people of color face is palpable. This chapter also contextualizes hunger and food insecurity in the larger framework of people’s lives, showing *entitlement failure* to be the root of the problem—that is, how public institutions

fail to buffer citizens from economic collapse and tragic life events; furthermore, consistent with systems of poverty governance, the state (and arms of the state) sets up profound barriers that limit the self-determination of citizens. The chapter shows how citizens internalize neoliberal stigma. Even amid the most grueling of life circumstances, individuals highlight their hard work and their personal responsibility, and in the most sorrowful of stories, people blame themselves for missing the economic mark.

### **The Livelihood Toggle: “You Can’t Really Survive on Minimum Wage”**

Clients of Chum and RP are continuously in a process of balancing their needs with limited resources, as well as weighing their immediate needs against future needs. Many Chum clients I interviewed were employed but did not earn enough to pay for their basic needs. John’s story was not an uncommon one. There was palpable anxiety about the economy, the rising cost of living, and the future. When asked how the food pantry benefitted him, Victor, a Native man who is employed and receives SNAP benefits, said rather plainly: “It feeds me. It helps feed me. Especially when I run out of money and everything. It’s very hard to pay for everything. You really can’t survive on a minimum-wage salary.” Renee, a thirtysomething Native woman, similarly explained that Chum helped her family: “Because we can eat a meal, a good meal. It helps out a lot.” She gets \$200 in monthly SNAP benefits, but noted, “It’s hard to stretch with me and the family. You really can’t survive on a minimum-wage salary.” For Renee, an increased minimum wage would decrease her level of food insecurity and even possibly make her food secure.

Clients juggled their SNAP benefits and food pantry assistance in enterprising ways. Some would first “shop” at food pantries, then use precious food stamps to buy items from the grocery store. Others would first use SNAP, then go to the food pantry at the end of the month, when SNAP benefits ran out. Isaiah, an older Black man and a client of Chum, said: “Well, it helps me to make ends meet. You know, I tend to run out of food right around the last week of the month. So then I use the food shelf to last me until I obtain my social securities.” Consistent with the livelihood perspective, Isaiah explained that he gets \$710 per month on social security and uses it to pay for rent, gas, and electricity; when he is through paying for everything, he barely has any money left. He spends approximately one

hundred dollars per month on food, usually to purchase meat; the rest of his food he gets from the food shelf. Clayton, a fortysomething African American man, has two children to feed. The price of food and the cost of living has gone up, so he is always juggling resources. He explained: “I know, this is kind of unfair, but let’s say my rent goes up or I have to pay for tuition. You know, I got to put some money aside and I know I need food in my house, so that’s why I come here, to see how I can improvise.”

**Interviewer:** Sure. So it’s not really about not having money for food, it’s because the price of something else goes up.

**Clayton:** Yes.

Clients from RP expressed similar concerns about the economy and their reasons for using RP. They had deep anxieties about the cost of living and frequently noted that their salaries and wages had not kept up. Clients also used RP to “stretch their food budgets” and to “make ends meet.” Participants talked about wanting to buy homes, get married, and have kids, but they knew that even those who were able-bodied and employed might not achieve their most basic goals. Chris, a young white man, explained: “It’s a good value to help out. Groceries are getting expensive and ... we are scared, it’s a big expense.” RP helps families save on groceries so that they can have some extras at times. “Just buying, I don’t know what you would call, I guess it’s not necessities, but I don’t know, just buying extra things, not food, but like to go to a movie with the kids or something like that or buying something they want ... So it helps that way by saving, you have to spend money on other things.” In Chris’s world, going to the movies with the kids once in a while was a luxury—a way to bring a little normalcy to their lives. Rick, a white school teacher, said that since he started using RP he has seen his savings grow. For him, RP was a blessing because it allowed him to save for the future: “We would love to have kids, but right now, it’s not reality because we are able to save couple of hundred bucks, and how do we take care of a kid? So we are trying to be responsible with everything, but like I said, if it weren’t for Ruby’s Pantry, most of that money would go towards grocery costs, and so it’s been a blessing to be able to have some money set aside. Right now, we are depending on our emergency fund; that’s life.”

Clients at RP also received welfare in some form—disability, unemployment, and/or SNAP benefits—but these entitlements were insufficient to

make ends meet. Bill and Evelyn, a husband and wife couple, both white, came to the interview together and explained that they used RP two years ago when they were low on income. “The cost of food and food stamps don’t stretch that far. It’s beneficial. It stretches out the food budget.” They discussed their horror at the grocery store each month, where filler foods have become the main course. Evelyn exclaimed: “I’ve seen almost every item, since the first of the year, has gone up anywhere from ten cents to a quarter. And some items even more. And the meat is outrageous now. It’s just ... It used to be that hamburger was a stretcher. Well, not anymore. That’s a main ingredient.” Bill reinforced her point, adding: “Yes, \$3.25, \$4.00 a pound some places. It’s ridiculous. We’ve kind of figured, for the \$20 we spend at Ruby’s Pantry, we’re averaging about \$75 or \$80 worth of groceries.”

Across racial groups, clients at Chum and RP said that they could not imagine a time when they would not use food pantries. Even though they had jobs and worked hard, completely contrary to the American dream, winning the lottery was the only way they could imagine not going to food shelves and pantries.

**Interviewer:** Can you imagine a time when you’ll stop using Ruby’s Pantry?

**Evelyn:** With the economy, no. I can’t see it.

**Bill:** Not unless we win the lottery. And that’s probably not going to happen, because—

**Evelyn:** (laughs)—we don’t buy tickets.

Paula, a white woman who worked at a motel, but was laid off, said: “Yeah. When I hit the lottery. Then I donate to the food shelf because I won’t forget where I come from.” Antoine, an African American man and a client of Chum, said that he could not imagine not using the food shelf: “I could say if I get halfway rich or whatever, I’d stop using it. I’d probably give to the food shelf ... I don’t want to use them just because it’s there; I use it because I have to. Otherwise, I would just fade away.”

### Caring for Children and Grandchildren

Food security data show that households with children tend to be the most food insecure (e.g., Coleman-Jensen, Gregory, and Singh 2014), and this

certainly played out at Chum and RP. Participants talked at great length about their food needs relative to caring for children. Parents with young children were anxious because, “kids eat a lot.” Ashley, a young white mum, explained that she has used the Chum food shelf off and on for the last ten years. She initially started using it because she did not have a job and food stamps were not enough, but she now does janitorial work at the university, so she has not been in for a while. She started coming to the food shelf earlier in the summer because school was not in session, so her daughter did not have access to the government free and reduced lunch program. Paula, a white woman, was in a similar situation. She has six birth children and four adopted kids. They are all grown up now, and “the grandbabies are rolling in.” Paula saves a lot of money on canned foods—probably around seventy-five dollars a month—by using the food pantry. Her food stamps don’t stretch for the whole month because her children and grandchildren are often over at her place to eat. She says, “You know how it goes. They leave the nest but they never leave the nest. They come over when they are hungry and all that goes. That’s the same thing I do to my mom; I stay too.”

Securing the long-term stability, security, health, and well-being of children is at the center of the struggle parents and caregivers are engaged in. Xavier, a middle-aged African American man, said that the first time he used the Chum food pantry was when he was living at the homeless shelter in 1999. He is now back at the shelter. Xavier used to have a decent-paying job, but he got injured on the job and found himself divorced and without a home. He did not grow up in a family in which money was an issue, so the livelihood toggle is new to him. He says, “Yeah, I’m at the shelter because I need help.” Xavier has five children, all boys, of whom he shares custody with their mother. He said that at one point he had all five boys with him at the shelter, which was “kind of really rough. Being in and out of the shelter and trying to feed the kids, it’s like, it was kind of hard. Yeah, it was kind of hard.” He enjoys having his kids with him; they hang out and play basketball at the community center. He uses all of his creative energy to figure out how to make a better life for his kids. Sometimes when his kids visit him, he saves up so that he can rent a motel room for a weekend, so they can be together in a better environment. To do this, he compromises on food: he eats what he can find at the food shelf or the soup kitchen.

Gabrielle, an African American woman in her mid-fifties, was once employed in a service profession, but physical and mental health issues



sent her into a downward spiral: she lost her vehicle and her job and nearly ended up homeless. She said, "I help people with their problems, but I had my own problem and didn't know what to do." Gabrielle values education and encourages her kids to work hard in school, but the financial burden is overwhelming. Gabrielle exclaimed: "I wish so hard that they could have a free education because they're going out to do something so great in the world." Her son is twenty-nine and \$140,000 in debt, with a master's in musical theater; her older daughter is about \$50,000 in debt, with a BA in sociology; and her younger daughter just graduated high school in May. For Gabrielle, a policy solution that would help her alleviate some of life's struggles is free or subsidized college education for her kids, education that could tap their full potential. Her younger daughter called her last night, crying because she wants to go to college so badly but the family cannot afford it. Gabrielle comforted her, saying, "God's going to make a way. He's going to make a way ... put it down, leave it alone, and go back to it. Leave it a day. Go have some tea, relax, do something fun." For Gabrielle, her faith is what keeps her going. She worries about the immense stress and pressure her children are under and fears that they may also be susceptible to depression and suicide. "I mean, I know my kids are strong and not suicidal like that, but she needed me right then, and we talked for two hours, and by the end of the conversation I had her laughing. So, praise God, and I haven't talked to her yet today, so after this I'm going to call her."

In the end, for all the precious, talented, and precocious children and grandchildren being taken care of with the help of Chum and RP, one cannot help but wonder what the future holds for them in terms of financial security, health, and mental well-being. The impact of hunger and food insecurity on children is particularly profound. Food insecurity has a negative impact on the physical, mental, and psychosocial development of children (Casey et al. 2004; Cutts et al. 2011; Metallinos-Katsaras et al. 2011; Whitaker and Orzol 2006). Malnourishment negatively effects the cognitive development of children, resulting in loss of knowledge, brainpower, and productivity, and iron-deficiency anemia in children can lead to developmental and behavioral disturbances. Studies have found links between food insecurity and poorer academic performance, school absences, suspension from school, involvement in fights, headaches, depression, and other physical, emotional, and behavioral concerns. Furthermore, when children live

in food insecure households, their health status may be impaired, making them less able to resist illness and more likely to become hospitalized. For children at Chum and RP, physiological hunger is staved off momentarily by a pack of noodles and a can of beans, but these minimal offerings do little to eliminate structural barriers that keep them from advancing. From a rights-based perspective, violating the right to food can interfere with the fulfillment of other human rights—such as the right to health and right to education and violating the right to education can in the long run interfere with financial security and the right to food and health. This is clearly the case here for children dealing with multiple livelihood insecurities.

### **Hunger Is Not Just about Nutrition**

I was surprised to learn that Chum, a food pantry, distributed nonfood items as well. Clients can make requests for special household items or hygiene products, such as toilet paper, soap, toothpaste and toothbrushes, baby diapers, and feminine hygiene products. Distributing these “extras” is one way in which Chum is responsive to the fact that on most days people who visit the food shelf live in a “tangled web of unmet needs,” a phrase borrowed from Poppendieck (1999). A research project conducted by Feeding America (2013) found that in addition to lacking food, many American families struggled to afford basic nonfood household goods, including products related to personal care, household care, and baby care. They often made trade-offs with other living expenses so as to access essential household goods. Families coped by stretching, substituting, borrowing, and doing without food when they were unable to afford necessary household items such as soap and toilet paper.

At Chum, almost all clients made requests for the toilet paper and received two small rolls of it. Toothpaste and deodorant were also fast-moving items. Women sometimes requested feminine hygiene products like tampons or sanitary pads, which Chum stocks in small quantities. Young families appreciated the baby diapers, which were unaffordable to them in stores. Leslie, an older retired white woman who has volunteered at the food shelf for a while, knows the clients well. She knows, for instance, that Liz loves to paint her nails, so when she arrives, Leslie will bring out all the nail polish from the back and invite her to choose one. She also knows that when Haji comes in, she should have salad dressing available for him

because “he loves his salad dressing.” In all of these requests, the notion of interconnected needs and the livelihood perspective are brought to the forefront. People need food, but they need other things as well, including the occasional luxury to allow them to feel like human beings—complex, contradictory, and full of meaning.

Requests for special food items highlight the fact that food is more than nutrition; it is about culture, emotion, and social well-being. Food comes first—the central idea behind the “food-first” principle that progressive food policy is built on. Without food, life deviates from the norm. The absence of food changes the way in which we live and our very being in the world. Food is an expression of family, love, care, and identity. Chum stocks salad dressing, cake mixes for special occasions, condiments, spices, salt, sugar and flour, and taco shells and fixings in the back. It is in these “extra items” that the complex personhoods of individuals are most illuminated. Gordon (1997, 5) describes *complex personhood* as “conferring the respect on others that comes from presuming that life and people’s lives are simultaneously straightforward and full of enormously subtle meaning.” Amid the most difficult of situations, we hear lives full of meaning and possibility. For instance, on one of the days that I was volunteering, a mom, her daughter, and grandma came in to get food; it was the little girl’s birthday and they asked if they could also get a cake mix, frosting, and party supplies to celebrate. Before I went off to find the items, her grandma advised me that they only wanted a cake mix that had not passed the expiration date. She said, “It doesn’t rise after the expiration date”—the kind of knowledge that only comes from deep experience living with poverty. As I rummaged in the back, I realized that most of the cake mixes had expired. I wondered how many parents and children had been disappointed by sunken birthday cakes. With great elation, I managed to find a cake mix and frosting, which still had a year left on it. I brought it back to the family, where the grandma dutifully checked the dates and thanked me. There were no party supplies; I wondered what creative solution the family would come up with to solve that problem.

It was not uncommon to have people stop by Chum and make requests for pet food. They would poke their heads in the window and ask for a can or two of cat food. Usually, the staff and volunteers complied readily—no paperwork required. Other times, while picking up food for themselves, people would catch a glimpse of the pet food lying under the counter. Their

eyes would well up with tears, and they'd exclaim unbelievably, "You have pet food?" and then hesitantly ask, "May I take some for my dog?" Chum always has wet and dry cat food, dry dog food and treats, and cat litter on hand. Clients talked lovingly about their pets, saying things like, "Well, Rosco has to have his treat every day!" This kindness flies in the face of ideological formations that frame hungry and poor people as irresponsible and lacking in accountability. As an outsider to poverty, I myself could not imagine how they found the time and the emotional resources to care so deeply for their animals. I also found it ironic that in the system of poverty governance, animals are shown more respect than people with regard to their right to food.

### **Jumping through Hoops**

Clients at Chum and RP were caught in the oppressive forces of poverty governance, which constantly required them to prove their need for assistance and jump through hoops. The government played a huge role in the lives of clients at Chum and RP, with 85 percent utilizing some form of government food support, 65 percent receiving economic support, and 77 percent receiving Medicare or Medicaid. Through the voices of the hungry and food insecure, it became clear that the real problem was not personal or moral defect, but entitlement failure: a lack of adequate political and legal systems that allow individuals to meet their basic needs (Sen 1983). The US welfare system is an apt example of structural stigma, in which stigmatizing ideologies are embedded in programs and policies that serve to "keep people away, keep people in, and keep people down" (Link and Phelan 2014). SNAP has one of the lowest fraud rates for federal programs (approximately one cent on the dollar in 2006–2008; Dean 2016), yet participants are treated with suspicion, as though everyone is out to scam the system. Potential SNAP beneficiaries are subjected to rigorous screening procedures. The quality-control process involves analyzing cases for accuracy; for example, at the certification interview, SNAP recipients have to explain how they make ends meet. If a recipient reports very low income but pays bills each month, this could be an indicator of unreported income and a red flag. Each state SNAP agency uses a computer program to determine eligibility. This program interfaces with other databases, such as the unemployment office, child support office, and even prison systems. When

a client's situation changes, the SNAP agency gets a match alert. All of these procedures are in place to extract proof of worthiness from poor citizens rooted in neoliberal stigma—the idea that the poor are lazy, do not want to work, and are out to scam the system.

Janet, an older white woman, spends her life caught up in a web of patchy governance, or what Pine (2016) refers to as “the porous continuum of care,” in which maneuvering around benefits is a time-consuming yet necessary part of her life. Janet is caught up in juggling food stamps, social security, and disability but does not experience any real change in the quality of her life; in fact, navigating these benefits has led to increased anxiety and depression for her. The red tape and bureaucracy of the convoluted system tear her apart. She says: “I understand there should be some hoops to jump through, but it is endless; seems like it is never done.” She explained that when she had her own apartment, she used to get \$137 dollars a month in SNAP benefits, which was great, but when she moved to her friend's house, she started getting only sixteen dollars. She said, puzzled, “I don't know what they think, if we are all sharing medical bills and food bills or whatever else.” Janet is not sure what she would do without RP. “We need a lot of food. So I will either have to stop taking medication and buy food or stop buying food and buy medication. With Ruby's Pantry I don't need to make that decision, I don't have to, I can just come here and have something to eat and be able to pay for my medications.” Janet is particularly frustrated on the day of the interview because she recently found out that she makes twelve dollars more than she should to get pharmaceutical medical assistance. She exclaims, “Just tell me I don't qualify! Twelve dollars, it's so frustrating.” It seems like every month she deals with some problem with social security, Medicare, food stamps, or medical assistance. Filling out forms has become a full-time job for her—and a distressing one at that. “This is my full-time job; it is what I do for a living. I fill up forms and I try to get questions answered. I am still confused that I just sit and cry, and then I call my sister and she will try and help me. It's just hard, it's really hard.” Janet is bewildered by a system that will not allow her to advance—a system that restricts and restrains her talents, entrepreneurship, and skills based on a calculus rooted in stigma.

Bernadette and her husband, Richard a retired veteran, both white, attended the interview together. Bernadette clarified how picking up food at RP gave her peace of mind. “It's in the middle of the month, so it helps

just relieve that stress of what's next?" She and her husband cannot imagine a time that they will stop using RP. They explain that they pay \$650 in rent, which is half of their income. Although they receive food stamps, they are inadequate given rising costs. Bernadette exclaimed: "Oh, it's outrageous ... Every time you went to the store it was going up, and the hamburger—that alone in two years to what—three dollars a pound right now! It's outrageous. Do you get more compensation from food stamps? We get the same amount of food stamps in the last three years, and that price of a hamburger has gone up almost two dollars. When that was part of your staples for the month as far as for stretching your budget, hamburger is one of the biggies. What do you do?" Richard, her husband, noted that he would like to do some part-time work to supplement their social security income but would be penalized if he did. Isaiah, an older African American man and a client of Chum, similarly explained the irony of his situation: when he was homeless, he was not hungry because he received \$200 worth of food stamps, but now that he has a home, he is short of food. "You know, but now I'm paying rent and gas and electric. And then they took it away and I don't understand that at all." So the choice is either "you can eat but you don't have a place to live, or you get a place to live and you can't eat." Isaiah's articulations capture the convoluted logic of poverty governance in a neoliberal era: governance driven not by evidence, but by assumptions going all the way back to the English Poor Laws of the Middle Ages and to the belief that entitlements incentivize poverty (Waxman 1983). The policy recommendations that emerge from these articulations are clear: devise a more humane system of governance that eliminates complex paperwork and takes into account the whole individual and her interconnected needs, a system that provides a seamless continuum of care such that citizens can actually thrive and fulfill their aspirations.

### **Physical Health Issues, Anxiety, and Depression**

Several participants from both Chum and RP experienced ongoing physical and mental health problems. Their illness narratives resonated with the words of medical anthropologist and public health expert Paul Farmer (2005), who argued quite simply that "poverty makes you sick." In his seminal book, *Pathologies of Power: Health, Human Rights, and the New War on the Poor*, Farmer argued that many health problems were in fact problems of *structural violence*—that is, the large-scale forces of violence, poverty, and

other social inequalities rooted in historical, political, and economic processes. These structural violences shape the distribution and outcome of disease and contribute to national and global health disparities.

In the United States, there is a large body of research on *health disparities* or the differences in health determinants and outcomes among populations (CDC 2013). Populations affected by health disparities include low- and no-income citizens, racial and ethnic minorities, women, children, the elderly, and people with disabilities. These disparities can be attributed to the “social determinants of health,” defined as “the conditions in which people are born, grow, live, work and age. These circumstances are shaped by the distribution of money, power and resources at global, national and local levels” (WHO 2018).

Consistent with broader national patterns, race and class-based disparities are long-standing issues in the city of Duluth. The 2010 census data showed that 18 percent of whites live in poverty compared to 67 percent of Blacks and 56 percent of Native Americans. A St. Louis County (SLC) Health Status Report (2013) shows that the mortality rate for people of color in Duluth is 19.29 compared to 15.09 for whites. The projected life expectancy in Duluth’s 55812 zip code was the highest at 84.65 years, while the lowest projected life expectancy was 73.44 years found in Zone D, which is comprised of zip codes 55802 and 55806—a difference of 11.2 years. The Central Hillside neighborhood falls within zip code 55802, and this is where Chum is located and many of Chum’s clients live as well. The SLC report further observes that the Central Hillside neighborhood has many conditions that negatively impact life expectancy such as older dilapidated housing with substandard conditions, limited or no access to affordable healthy food choices, and limited or no access to safe places for exercise. (St. Louis County Public Health and Human Services 2013).

These health disparities come to life in this study. Poor whites struggled with physical and mental health issues, but these experiences were intensified for people of color. In clients’ illness narratives, the interactions among food insecurity, physical disability, and mental health—in particular, depression—were noticeable. What started out as physical pain led people down a path of anxiety and depression. Janet, an older white woman, suffers from physical and mental health issues. She has Crohn’s disease, which attacks her digestive system and her joints so that she cannot stand for more than ten minutes at a time; even sitting is painful. She has tried

a lot of different treatments, but with no luck so far. She says: "There are days I will eat nothing but cheese because I cannot stand to eat anything else. Everything else just makes me sick to my stomach and I feel weak. The most common scenario for me is I won't eat anything all day until I get home and then I get sick." Janet's debilitating illness, the worry of not being able to pay bills, her food insecurity, and isolation have all contributed to depression. She sleeps a lot—fifteen hours on some days. "Yeah, I would stay in bed everyday if I could. I mean, when you dream your dreams are awesome, and when you are awake you are like, oh God, not again." Her roommate keeps her on task and pounds on her room door to get her out. When she lies in bed at night, all sorts of things run through her head, like whether she will ever be able to own her own apartment or even afford to rent a place herself. What will happen if she fails? She says, "I do it over, over, over, and over until it is four in the morning and I haven't slept and then I am sick ... It is very, very frustrating. You can shut it out during the day through distractions, but you don't have those distractions at night." Desire, loss, fear, and hope are intertwined with her experience of hunger. In stark contrast to how public discourses portray the hungry, Janet is far from lazy. To be sure, there are some who will use the example of Janet sleeping for fifteen hours as an indicator of her laziness, but chronic fatigue is in fact a symptom of her illness, an illness exacerbated by the stress of dealing with the public assistance system. There are some who will want to medicate her for depression, when what she more fundamentally needs is access to basic needs and for government policies to stop treating her so suspiciously.

Antoine, an African American man, is careful about what he eats because he is diabetic. He disclosed that he was very tempted by the doughnuts put out at the Chum food shelf that morning but did not touch them. He talked about the importance of self-control and discipline. "That's tempting, you know? We all got some kind of demon in us that makes us want to do something and eat overboard. The main thing is trying to control it. If it's in control, you're good, a plus for everything." Antoine is a thin man but says the problem is not his weight. His grandmother had diabetes and so did his father and mother, although he did not find out he had it until he was forty-seven years old. Antoine talks about how he grew depressed when his body became messed up. "That's my main thing, getting depressed real bad. I got into a shell. I don't want to talk to nobody, and that's when I need



to get up and go to church, go talk to somebody.” When I ask him why so many people are depressed, he says it could be from “not having what you need”: “It could be a lot of things that make you depressed, mainly just not having what you need. It don’t have to be a lot, just have a decent home and decent food to eat and knowing that you got a roof over your head. That’s not a lot to ask for, it’s not. It shouldn’t be that way. We got so much in this world. We got so many great people.” The lack of access to food and resources takes a toll on the mental health of clients.

James, a middle-aged Black man, attributed his depression to physical injuries and racial oppression. He had total knee-replacement surgery some years ago, which resulted in him losing his job. Interrupting the white working-class imaginary so prominent in dominant discourses today, he talked about how much he loved his work and how this work was integral to his identity. He says: “I’m a worker, but when I became homeless, depression issues kicked in, and oppression issues came about, and wow!”

**Interviewer:** What do you mean by that, oppression?

**James:** Oppression. In our society, people tend to look at you by the color of your skin. For that person who is getting that kind of heat from people like that, it tends to discourage them to go out and try and be a part of society. They require so much of you to be a part of society. Everybody’s not equipped to absorb all that the world has to offer or even be a part of it. There’s a lot of things that a human being can do out here as far as professions, but if you don’t have it in you to pursue it, even though they’re good, you’ve got to find out where your place is in life. I’m a laborer by my nature. I just work ... I’m tool-orientated and machine-orientated, so I like machines and tools. I’m a guy.

James has experienced a lot of rejection in his life; nevertheless, manual labor is a part of his identity, and hard work and discipline are values he holds dearly. Countering the neoliberal stigma that circulates around him, he says: “All my aunts and uncles, they all work. Working has been a part of my upbringing. It wasn’t street hustling, if I may say so. I grew up with some good values, very, very good parents, the best that they could be in this world today.” His parents passed away a while ago, and James is sad that he cannot call them to let them know he’s okay.

## Trauma

Even as individuals struggled with hunger and food insecurity, they experienced unexpected life calamities: intense trauma, violence, adverse childhood experiences, loss of loved ones, and chaos. This profound trauma was the backdrop to their lives. Clayton, an African American client at Chum, stood out because of his deep grief at the death of his daughter. When I asked Clayton how many kids he had, he said, “Well I did have four, but now it’s three for my daughter passed away.” There it was: the few words that structured the rest of our conversation; a life event that structured the rest of his life. He said in a quiet voice that his daughter died a few years ago from a cancer called *neurofibromatosis*, a genetic disorder that causes tumors to form on nerve tissue. She was only fourteen. “She would have been sixteen, March 13 of this year. She died on my dad’s birthday.” It was a disease she had since birth, but Clayton says that it was his fault they did not detect it earlier. He lives with the guilt, the grief, the sadness of believing every day that he is to blame for her death. He continued: “The only thing I could do now is pray that she is within God’s fences and I will see her again, and I try to keep that in mind, but it’s like a pressure cooker; the pain is so big it’s like it’s just piling up under so much pressure, and I still haven’t stopped crying.”

Bereaved individuals are similar to “wounded storytellers,” as described by Arthur Frank (1995), whose bodies, minds, and emotions exhibit signs of the “illness” of bereavement. When I asked Clayton about how he manages the grief, he is precise, methodical, and almost clinical in his description, like a wounded storyteller who has thought about this every single day:

So I do four things: I take long walks in Canal Park and I sit there and just listen to the water and think. Number two I listen to some music. They say music soothes the savage beast, so certain things that I hear not only does it remind me of my daughter, but it reminds me of my childhood, the things that I had that I want to grab ahold to once again. The third thing I do is I put my feelings on a piece of paper and write poetry or I draw it out, and fourth and the final thing that I do, I pray and I ask the Lord, forgive me of my transgressions, for if I want you to forgive me, I have to forgive others as well. It’s a good thing my daughter said, “Dad, whatever you did wrong in your past, God forgave you.” It’s not easy seeing a daughter die in your arms, for as long as I have my son and two daughters by my side, my stress level is still high, but they help me to manage it so I won’t do something crazy like I almost did. Yes, I almost committed suicide, but I know it’s not going to help. My children still need me.

Duluth with its Great Lake, Lake Superior, provides a way for residents to experience peace, even if only for a moment. Clayton's deep loss has forced him to examine how he lives in the world and has made him more deliberate and purposeful in life. When a child dies, a family is left to revise the meanings it has constructed for itself as part of the unending grieving process (Arnold and Gemma 1983). For Clayton, his other children are the only reason he is still alive today. When we juxtapose Clayton's story, his discipline, his poetry, his way of being in the world, the guilt that he feels, alongside the politicized narratives that demonize the hungry and food insecure, we are left wondering who exactly the demon is.

Michele, a middle-aged Native woman and client of Chum, described herself as a "city native" because she has never been to a reservation or a powwow. Michele has spent much of her adult life dealing with problems of addiction. Not too long ago, she was using crack cocaine and abusing pain medication; she ended up using one drug to overcome another, and finally began to sell drugs to maintain the habit. Now these are the stories—stories of alcohol, drugs, and addiction—of people of color that typically enjoy circulation in the public sphere. These are the news pegs that dull reporters love to hang on to. These singular stories will be circulated in the media over and over again, then used as evidence to validate harsher penalties and restrictions for welfare recipients. However, we would be wise to remember the words of Lee here, the director of Chum: "Poverty, it's brutal, it's hard, it's systemic, it's rarely a choice, and if it looks like a choice, it's because the chooser is broken." Michele has been diagnosed with depression, bipolar disorder, and PTSD. She has suffered adverse childhood experiences of sexual abuse and domestic violence, an epidemic among Native women in her social location. The historical trauma of belonging to a community nearly wiped out by genocide, genocide perpetrated by white people, has an ongoing impact on her social and mental well-being. Michele takes a variety of pills but has an astute critique of doctors who try to medicate her all the time. She says, "Every time you turn around, the doctor wants to give you medication. I'm not going to be a guinea pig. 'Let's try these to see what happens.' 'No, let's not.'" When I ask her how she copes with stress, she says:

Sometimes I just get irritated and snap on people, even though that doesn't solve anything. It gets it out a little bit. I was keeping in the back of my mind that everything happens for a reason and God has plans for you. It's called life. It goes

with ... the cards you're dealt ... The cards you're dealt is what you made it. Should I have raised myself better, maybe I wouldn't go through that. If I had paid my rent instead of paying for this, that and the other, I wouldn't be behind. The legal issues, if I wasn't doing drugs, I wouldn't be charged with drug sales ... I learned in life, people can only do to you what you let them do. That takes care of it sometimes. It's just all the stuff that goes through my head. If I take my medication, it's not as stressful.

Consistent with the neoliberal narrative, Michele holds herself completely responsible for the circumstances in her life. For Michele, physical, mental, and behavioral problems are all interpreted as a matter of choice. Michele even thinks that as a child she was responsible for her own upbringing. There was something she should have learned when she was a child that could have prevented where she is today. She has been sober for twenty-seven months.

Morgan tells a narrative of betrayal, without revealing too much. Morgan picks up food from the Chum food shelf and currently lives at the homeless shelter. Morgan is gay. Like many others at the food pantry, Morgan used to be a working professional. She was the chef at a country club for fifteen years before she went on disability. She and her same-sex partner made good money but then found themselves out of work, and their relationship splintered. Much of Morgan's trauma has been inflicted upon her by her immediate family. Even though she has family in the region, she stays at the homeless shelter. The eldest of six kids, Morgan has always taken care of everybody else but never gotten any care in return. Her brother and his wife make good money but spend it all on drugs. Morgan has given her mom several thousand dollars, which she has siphoned off to her brother and siblings. The lack of concern and care for her was made clear in one event, which was a turning point in her life:

**Morgan:** I came down for a knee-replacement surgery and I was in for five days and I called my mom and I said, "Who is picking me up?" Nobody, nobody. Things like that.

**Interviewer:** How did you get back home?

**Morgan:** A cab. It was 185 dollars. So, lucky I had it. You can see it is much more preferable to be here. At least I know who I am dealing with.

Morgan is currently at the shelter to escape the abuse of her family. She says, "My family is very, very bad for me." It is clear that she is holding back

in the interview. She does not tell me how her gender and sexual identity are intertwined with the hunger experience. Indeed, there are many things she does not say; there are gaps and ellipses in her story, but in how she moves, in her stutter, in her silence, desire, loss, chaos, sorrow, and grief are made clear.

**Violet: "I Don't Know What Kind of Disorder I've Got"**

Violet is an older Black woman, extremely thin and frail; she does not weigh more than a hundred pounds. Violet has worked in construction her whole life—a Black working-class woman. During the interview, she was friendly, full of life, and described herself as a “jokester.” Violet says her biggest struggle is remembering to take her cholesterol medication. But as the interview goes on, cholesterol seems to be the least of it. Violet discloses that she quit drinking three years and six months ago to the date. She talks about her four children and nine grandchildren. Her older son is on disability, so she uses her food stamps and the Chum food shelf to get groceries for him and her grandchildren. Violet then talks about a past abusive relationship and how this brought her to Christ. “I didn’t really start getting religious until I got into an abusive relationship. Out of all my relationships this was the worst. I come to call on Christ to get me to hopefully see Him every day, and not *him*. If you get what I mean. I remember one day I was cooking something, and around him I always felt like I had to walk on eggshells. You look at him wrong, he’s going to argue. I just prayed to God, “God, please let me get out of this mess.” Every time I would get out, I would find myself back in. This was the last straw. I cried, I prayed so hard. A few days later ... we had just started arguing and I left and I woke up and it was like, woohoo, it was lifted off me.”

Violet’s story is reminiscent of the research conducted by Chilton and Booth (2007), who found two kinds of hunger among African American women who used food pantries in Philadelphia: hunger of the body and hunger of the mind. *Hunger of the body* is the outright painful sensation of hunger caused by insufficient food, the physical impact of hunger on the body, and the way hunger interrupts sleep and daily activities. *Hunger of the mind* is related to trauma, feelings of depression and hopelessness, stress, deliberate (self-inflicted) hunger, abuse and violence, and the inability to eat. The researchers suggest that both types of hunger are manifestations of

structural violence, and they recommend a broader framework to examine the health effects of food insecurity—one that addresses women’s safety, economic independence, and physical and emotional well-being.

Similar to the women in Chilton and Booth’s study, Violet does not eat either. She explains: “I’m sort of good at stretching until I can actually go to the grocery store or whatever. I’m pretty good. I don’t really have an appetite. Why, I don’t know. People say I’m getting fat. How, I don’t know. I eat like a bird, put it that way. If I don’t eat for about a day or so and I wake up the next day, drink me some water, take my vitamins, might drink me milk, which I can’t drink any milk anymore. It’s that age ... To me, I eat like a bird. When I say I eat like a bird, I eat like a bird. A saucer full will fill me up.” I am shocked and stunned by how little Violet eats. This is not the story of anorexia or bulimia that I typically hear from my female students. This is not the story of starvation caused because of famine or the complete lack of food. It is far beyond the realm of my experience and the literature, and I have no follow-up questions. Later, I come back to her with a question about why she doesn’t eat, and then it becomes clear. She says she doesn’t eat because when she was young, her mother never forced them to eat. She added, “Of course, she never cooked. Of course, *there was never food in the house.*” She explained that even now when her stomach is growling, her mind tells her that she is not hungry. “If I do go eat something, it’s not because I want to eat it. It’s because my mind is saying ‘eat.’ I might eat two, three tablespoons of whatever and I’ll be full ... I don’t know what kind of disorder I’ve got.” Her disorder is the hunger of the mind related to trauma, depression, a life of deprivation, and violence. For Violet, growing up with hunger, living through an abusive relationship, and caring for adult children all reveal a life full of challenges, but also one motivated by human agency. Despite her hunger, she joked around with me even as she demonstrated an incisive critical consciousness about her class and racial position in society.

### The “Buffering Effect” of Social Support

Folks who had family in the region, who had good relationships with their family, and who were integrated in the community fared better compared to those who did not have close ties in the community. The emotional and instrumental support that family provided protected or “buffered” people

from the negative effects of stress—consistent with the existing literature (e.g., Kollannoor-Samuel et al. 2011). Claire, a young white woman and a client of RP said, “My parents are pretty good to me if I need money for something.” She added, “Yeah. I’m not that poor yet. If I really needed a dollar ... I’d probably call my sister up and say, ‘Hey, I really need some money.’ She would help me a lot, I know she would.” Penelope, a middle-aged white woman, noted that her mother-in-law and sister-in-law helped her out. For instance, when her husband was in surgery, her mom-in-law helped bring him home and do the grocery shopping. Just knowing that family was around to help if needed was an important source of security. Rick explained that he and his wife managed on their own as far as finances were concerned, but if they both lost their jobs, then both sets of parents would accept them into their homes. He observed: “So it’s nice to know that, that network is there.”

The folks who did not have family or friends in the region had the most difficulty coping with the multiple insecurities of poverty. Migration of family members to other parts of the country for work often led to this isolation. These participants lacked the protective buffer of social support to shield them from stress and anxiety. John, whose story was told in the opening of the chapter, is one such example. Katherine, an older white woman, has friends in Duluth, but cannot depend on them because they are older like her and cannot drive anymore because of bad eyesight and arthritis. Her daughters live in Minneapolis and do not come up very often. Chris and his family moved to Duluth to be with his wife’s family, but his in-laws passed away some years ago, and now they have no one in Duluth who can support them. He added, “If I was in the Twin Cities, I would have lots of people for my kids.”

Many participants—in particular, those without family nearby, those estranged from their families, or those whose families were in similar financial situations—identified paid professionals as central to their support system. These included caseworkers, case managers, counselors, psychiatrists, therapists, and even probation officers. These were the people my participants talked to, those who listened to their stories and provided feedback and evaluation. In *The Careless Society*, John McKnight (1995) critiqued the care industry, calling it “counterfeit care.” He observed: “Care cannot be produced, provided, managed, organized, administered, or commodified. Care is the only thing a system cannot produce. Every institutional effort to

replace the real thing is a counterfeit" (x). This argument rings true, but it was also true that for my participants, primarily people of color, these paid professionals were an important source of support in their lives, as seen in a quote from Michele, the Native woman whose story appeared earlier: "I've got a good support system. I've got social workers, case workers, in the midst of looking for a different therapist. I've got my probation officer." Antoine's family lives all over the country. His mother lives in Chicago, his dad passed away a year ago, he has some family that lives in Georgia, and his kids live in Wisconsin. Antoine, who suffers from physical health issues and depression, understands the importance of talking with someone and has a case manager who fulfills that role: "I might call her a friend; we're real tight. She's just like a mother. She talks to me, you know, and she might pray for me. I found that when you get really depressed you've got to talk to somebody else. You're going through that dark shit. I think a lot of people in this town are really depressed."

### **Volunteerism, Not Activism**

William DiFazio (2006) argues that poverty has become "ordinary" today. Whereas a vocabulary of social change once was used to talk about poverty, this is no longer the case; poverty is seen as permanent and immovable, ordinary. The language of possibility, social action, and activism prevalent in the 1960s has been replaced by the more conservative language of individual achievement and personal responsibility. An important consequence of normalizing poverty is that the poor no longer speak for themselves and they are no longer invited to participate in social movements.

This was certainly the case with participants in this study. Poor clients volunteered as a way to give back to the community and in some cases to meet the demands of workfarist policies. Volunteer activities ranged from working with churches and nonprofits to volunteering at schools and community centers. Isaiah, an African American man and a client of Chum, enjoys working with kids. He explained: "I've done some things here, teaching kids how to play drums and starting a drill team. And I opened up an ice house for them to go skating. You know, it's kind of like giving back, you know, so I do that." At the Chum homeless shelter, clients are expected to do chores, so here Isaiah volunteers to clean the bathrooms. "Because I use them, I was using them myself, and I wanted them to be clean. So



that was my volunteering.” Xavier has also volunteered quite a bit. He did not grow up struggling for basic needs but found himself more interested in helping others as he grew older: “I mean, I didn’t grow up struggling, you know. I didn’t come from a family where we had to get out and look for food and that kind of stuff. Then after I got older I became interested in people and I worked for Salvation Army in Atlanta, Georgia, so I used to see destitute people, and you know I promised myself that if there was anything in life that I could ever do, you know, help somebody else out of the woods. So, that’s why I try to do what I can and try to volunteer.” For participants, volunteering was a way in which to give back to society and show gratitude for what they had received. For them, volunteer work did not ensue from a place of privilege but rather from empathy that comes with lived experience.

There was much interest among participants in sharing their personal stories with the public to bring about broader political change, but they had never been asked or invited to do so. Gary has volunteered quite a bit but has not been involved with advocacy for political change. Participants are caught in a web of political discourses that make claims about who they (the hungry) are, what the solution to hunger is, and how it should be managed, yet they had never been asked to participate in finding solutions for what is allegedly “their” problem. Although they were asked to volunteer, the same was not true of political advocacy. This is seen in Isaiah’s interview.

**Interviewer:** Would you be interested in changing something in the system? Would you be interested, for instance, to sign a petition to say we need more access or to even sometimes share your story?

**Isaiah:** Sure, I would do that, I would really do that.

**Interviewer:** Have you ever been asked to participate in any kind of political activity?

**Isaiah:** As far as food goes?

**Interviewer:** Yeah.

**Isaiah:** No.

Isaiah worked at a call center campaigning for President Obama twice, but he has not been involved with advocacy for his own specific needs. Jermain had a similar response:

**Interviewer:** How about this ... Would you be interested in being more involved in political activities to get more access to food?

**Jermain:** Yeah, I would, that is worthwhile. Because, it's people, it's families that need places like this ... You don't just ask somebody do you have facilities to cook and give them food stamps. Half of them don't know how to use them. With the food stamps, you know, you can't buy things like toothpaste, toilet paper, you know, and I don't see why not. That should be included with food.

In this instance, Jermain provides a simple solution to the intersecting needs of people experiencing deprivation: reducing restrictions on what can be purchased with SNAP.

There were only a few folks who were not interested in telling their stories in public, for fear of being hurt—for example, Violet:

**Interviewer:** Would you be interested in being more involved with political activities ...

**Violet:** Nope, because they throw shit too.

**Interviewer:** Okay. What about to get better access to food? Activities like signing a petition or sharing your story?

**Violet:** I don't know. I have never actually thought of something like that ... I don't know. I'd have to think about that one.

Similarly, Rochelle was happy to sign a petition but was not interested in telling her story, as she noted: "My first instinct. I'm not going to tell nobody nothing." Overall, these findings provide a glimpse into how hunger is depoliticized today. Poor citizens volunteer in their communities but do not have access to mainstream spaces of politics and decision-making that have a direct impact on their lives and livelihoods.

## Conclusion

In this chapter, I highlight that independence, self-reliance, and self-sufficiency are not individual at all but rather forged within a complex network of private and public institutions: family and friends, employers, counselors, social workers, and government offices. The chapter shows that by the time people have reached the food pantry, they have already confronted several human rights abuses: lack of employment or a decent living wage, lack of education, affordable housing, violence, and hunger, to name

a few. Contrary to neoliberal stigma circulating around them, participants are constantly engaged in a livelihood juggle, using vast amounts of creative energy to take care of their families. A few decades ago, Poppendieck (1999, 315) pointed out that people need so much more than food: “Although poor people in our society are sometimes hungry, they live most days in a tangled web of unmet needs and unrealized hopes. ... A program or policy that tried only to prevent acute hunger is aiming too low. It is not acceptable to have people in our society too poor to participate and contribute, too poor to provide a decent chance in life for their children, too poor to pursue happiness. We need to aim for the creation of a just and inclusive society that taps everyone’s potential and makes us all better off in the long run, not just a society where no one starves.”

Institutions, laws, and policies have stigma embedded within them, which otherize, exclude, and negatively impact the lives of people. The welfare system is an apt example of structural stigma that serves to keep people “down, in, and away,” even in the absence of person-to-person stigma (Link and Phelan 2014). This was the case in this study, in which participant after participant talked about the incessant juggling they were involved in to navigate the restrictive and punitive welfare system. Amid challenging life situations, participants were bewildered by the inadequacy of food stamps, social security, and disability benefits, as well as the amount of labor, stress, and anxiety that went into receiving entitlements. The system actively disempowered them, restricting self-determination. Hunger has profound physical consequences, but there are also social and psychological burdens that come with the experience of hunger. The stigma of hunger produces a double burden: the economic burden of trying to put food on the table, and the social burden of stigma. Indeed, there is nothing ordinary about the experience of poverty. There is no normalizing poverty. Poverty is always stressful. It always requires vigilance, hard work, and being always “on” just to stay afloat.

Sadly, John’s story presented at the beginning of this chapter is not a rags-to-riches story, but a riches-to-rags one. In fact, it was a story that many food pantry participants told and one that is indicative of entitlement failure. Even as the American dream continues to be propagated in the public imaginary, the reality is quite the opposite: people are more likely to fall down the socioeconomic ladder of success than climb up. People are more likely to stay within a particular class location than have economic

mobility. People who have a decent education, people who are employed, people who are capable, ambitious, with goals and hopes for the future, find themselves stuck. This phenomenon is reminiscent of the words of Dr. Bhimrao Ramji Ambedkar (2014), a member of the untouchable Hindu caste and framer of the Indian constitution—who said, “Caste is like a multistoried building with no exit and no staircase. You live and die in the same floor you were born into.” There is a similar reality in the United States today. Although, unlike India, the United States is one of the richest, most industrially advanced, and powerful economies in the world, with a GDP of \$18 trillion per year and a per capita GDP of \$57,300 (almost fourteen times that of the Indian GDP).

#### **Field Note: Desire and the “Third Space”**

As I write this chapter from my own position of material privilege, I recognize that for people, including my students, in situations of poverty, these stories are disheartening because they showcase hard work, pain, struggle, health issues, depression, and anxiety, amid bleak shimmers of hope. These stories are frightening because they show that the American dream is just that—a dream. There is no way up and no way out as governance structures work to keep the social order intact. From a research point of view, this is the primary dilemma of what Native scholar Eve Tuck (2009) refers to as “damage-centered research.” My research focuses on the problem of hunger; therefore, the questions I asked focused on problems. In this chapter, I documented the pain, the loss, and the struggles of individuals and communities and contextualized these issues amid forces of oppression.

Although this makes sense in terms of research that seeks to illuminate social realities, the question Tuck poses is this: What are the hidden costs and long-term repercussions for communities thinking of themselves as broken? Tuck argues for a shift toward desire-based research frameworks when studying indigenous communities, in which desire is concerned with understanding plurality and contradiction. She observes: “Desire-based research frameworks are concerned with understanding complexity, contradiction, and the self-determination of lived lives. ... Such an axiology is intent on depathologizing the experiences of dispossessed and disenfranchised communities so that people are seen as more than broken and conquered. That is to say that even when communities are broken and conquered, they are so much more than that—so much more than this incomplete story is an act of aggression” (416).

Interrupting the social scientific binary between structure and agency, desire frameworks call into recognition a “third space.” Tuck writes: “This is

more important because it more closely matches the experiences of people who, at different points in a single day, reproduce, resist, are complicit in, rage against, celebrate, throw up hands/fists/ towels, and withdraw and participate in uneven social structures—that is, everybody” (420). Desire disrupts the structure/agency binary to reveal “people layered in composition and meaning.” In this framework, desire accounts for loss and despair, but also hope, vision, and “the wisdom of lived lives and communities” (417).

Drawing on this notion of desire, I would like to illuminate some key moments in the discourse that speak to desire. In this chapter, we see citizens rich in their complexity, intellect, and spirit as central to the hunger story in America. We hear stories of college degrees, work, volunteerism, giving back to the community, making contributions to society, contributing to the workplace, the love of nature, bold decision-making in the face of trouble, mindfulness, quirkiness, prayer and spirituality, and, in the case of John, global citizenship. These citizens, forced into the margins, have a heightened consciousness about the world around them and a vision for what things should be like. These citizens, amid the crushing burden of economic oppression, racial oppression, and structural violence, give us a very clear sense of what the problem is and offer rational, political solutions grounded in their lived realities. Many were eager to engage in activism and tell their stories to make a difference—for themselves and society. These were individuals who experienced the fragility of life and who in response sometimes stayed in bed, sometimes cried it out, sometimes pushed back against the forces keeping them down, but most often kept the wheels churning and went about their daily lives, caring for themselves and being cared for. Even amid the loss depicted in these stories, people talked on the phone and laughed. They held on to their aspirations. They told jokes, took walks by Lake Superior, and remembered their work lives fondly. It is my hope that in the gaping holes of these still partial and incomplete stories, one hears people layered in composition and meaning.

### Policy and Practical Implications

The policy implications from this chapter are clear: there is a clear mandate to increase minimum wage, increase SNAP benefits, and reduce restrictive and punitive processes that drive the public assistance system. A fair public assistance system should enable households to maintain stability and security and at the same time provide them with a launching pad to realize their hopes, dreams, and aspirations. There should be logical systems of governance based on scientific evidence rather than on age-old myths

and stereotypes that have traveled to us from the Middle Ages. Political narratives regularly threaten increasing restrictions on SNAP, even when all evidence points in the other direction. The evidence reinforces the livelihood and human rights perspective, which argues that people's rights are "interdependent, indivisible and interrelated"; therefore, making legal entitlements less restrictive and more flexible is extremely logical. Policy in the United States, one of the wealthiest nations on earth, should at least come close to guaranteeing its citizens basic human rights—human rights based on the principle of respect for every individual, grounded in the fundamental assumption that each person is a moral and rational being who deserves to be treated with dignity.

Achieving political goals requires shifting the narratives surrounding the hungry and food insecure through the creation of participatory forums, in which marginalized citizens can speak and be heard. Forty million citizens and more have been made invisible in the discursive and political arena. There is a need to foreground the voices of the poor as sites of knowledge production and political action. The goals of these participatory spaces are to recover voices that have been erased from the discursive sphere, to bring these voices back into focus, and to channel these voices into the realm of policy. Dutta (2008) points out that the absence of the poor from mainstream spaces of policy-making is linked to their material disenfranchisement; in other words, communities that are materially disenfranchised are also disenfranchised communicatively by the absence of venues for participation, recognition, and representation. It is becoming increasingly clear today that the hungry are allowed to speak, but only through food drives, fundraising campaigns, corporate responsibility campaigns, and public relations efforts for food banks. Here the poor may talk about their pain, damage, and pathology, but never safely articulate a political consciousness—never safely demand their basic human rights to adequate food. There is an urgent need to create spaces where citizens can contribute to policy—where citizens can tell their stories and advocate for their rights. Facilitating these participatory forums and spaces is necessary to reframe hunger, to reposition the hungry, to disrupt neoliberal stigma, and to move toward more progressive political solutions.