Summary report on the
Regional meeting on food safety

Amman, Jordan
5–7 April 2015
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1. Introduction

The WHO regional Centre for Environmental Health Action (CEHA), held a regional meeting for food safety officers appointed by ministries of health and ministries of agriculture in Amman, Jordan on 5–7 April 2015. Representatives from 19 countries attended the meeting along with international experts and several United Nations (UN) agencies. As part of the regional meeting, participants took part in the regional celebration of the 2015 World Health Day on Food Safety on 7 April.

The objectives of the meeting were to:

- update participants on the state of food safety in the Region and Member States (status, gaps and challenges);
- present emerging food safety issues and priorities at the global level;
- identify areas to be strengthened and the way forward; and
- celebrate World Health Day 2015 on Food Safety in the Eastern Mediterranean Region under the motto “From farm to plate – make food safe”.

Dr Ala Alwan, WHO Regional Director for the Eastern Mediterranean, in his opening message, noted the slogan for this year’s World Health Day and that this slogan captured the essence of food safety: that it is a shared responsibility and that no one organization or ministry is in charge of the full food safety system. He therefore extended a special welcome to participants from the agriculture and industry sectors, who had come to work together with their colleagues from the health sector. He stressed that successful intersectoral collaboration was the key factor in achieving a good food safety outcome.

2. Summary of discussions

Countries presented an overview of their national food safety system, achievements, challenges, gaps, plans to overcome challenges and gaps,
and identified needs for external support. In addition, presentations were made on regional challenges, recent developments in global food safety, the food industry’s view on food safety, the importance of knowledge, attitudes and practices among food handlers, the “One Health” concept for intersectoral collaboration on food safety, the need for updating food laws and regulations, and the use of total diet studies in risk assessment.

The WHO strategic plan for food safety 2013–2022 was presented and participants identified areas of collaboration and technical support needs in line with the strategic plan. Additional information on wastewater reuse in agriculture and a compendium developed for the meeting on food safety scientific literature published in recent years in the Region were shared with participants.

There has been a shift in global food safety thinking away from end-product testing to more emphasis on preventing food safety issues from developing in the first place. This shift in focus requires risk analysis highlighting the need for risk assessment capacity to be developed in national food safety systems.

A major achievement has been the creation of consensus within the Codex Alimentarius Commission on the Codex principles and guidelines for national food control systems, which form the basic requirements for an efficient, sustainable and forward-looking national food control system.

There are enormous economic risks to the international trade in food when food safety is compromised. The industry depends on strong national food safety programmes as trade repercussions are not limited to individual companies, but may involve trade restrictions at the national level. Countries in the Region have lost business opportunities due to a repeated lack of food safety compliance in food exports. Ensuring food safety can be done more effectively through public–private partnerships rather than by governments alone.
Specific challenges for food safety in the Region include the incomplete implementation of core capacities under the International Health Regulations (2005) in the area of food safety. Only five countries report 100% implementation, with a regional reported average of 75% implementation, showing that there is still some way to go.

The dissemination of food safety messages has to be done with great care as factors such as personal background, education, and the daily work context and environment, all influence the way knowledge, attitudes and practices are formed and developed in food handlers. Barriers in countries exist of language and educational background, and training material developed in countries for specific recipient groups, if shared, could be useful elsewhere in the Region.

The “One Health” approach is a collaborative effort by multiple disciplines working locally, nationally and globally to attain the optimal health of people, animals and plants. It is based on the understanding that a majority of human pathogens are zoonotic by nature, meaning that they have a reservoir in one or more species of animals, and that nearly all new human diseases originate from such animal reservoirs. Given the interdependence between farming systems and food safety, preventive action for zoonotic foodborne diseases must involve the relevant sectors of primary production.

A large proportion of the food legislation in the Region dates back 40 years or more, when many of the current concepts and approaches in food safety had not yet been developed. Countries relying on such outdated legislation are consequently at a loss when trying to deal with today’s food safety issues. Although some countries are reviewing and updating their food legislation, a significant number still suffer from an inadequate legal basis for their food safety initiatives.

There is now widespread recognition in the Region that there is a need to develop food safety risk assessment capacity. In the absence of a total diet
study reflecting actual food consumption in countries, any risk assessment will be inaccurate since estimates of dietary exposure to a certain hazard will not be based on local consumption data but rather on data collected elsewhere in the world, where dietary patterns are known to be quite different.

On the final day of the meeting, Dr Alwan participated personally, highlighting the linkages between food safety and socioeconomic development, including the public health dimension. He emphasized that food safety was an essential component of global health and sustainable agricultural and economic development. In the context of the international community’s focus on the Millennium Development Goals (MDGs), and the post-2015 development agenda, it was important that food be integrated into the global food security and nutrition agenda of the MDGs, he noted. Guaranteeing the safety and quality of food supplies should be considered as important as ensuring adequate distribution of food among all people to eliminate hunger globally, he said.

The Regional Director stressed that it was important to ensure that food safety was a multisectoral and interdisciplinary activity, in which the public health sector needed to work closely with different line ministries, such as agriculture, livestock, commerce, trade, industry, and other sectors. The One Health approach was beneficial for the effective control of zoonoses, especially given the development of antimicrobial resistance and chemical contamination of crops and livestock, he said.

Dr Alwan affirmed WHO’s role in providing technical support to countries, in partnership with all stakeholders and the relevant UN sister agencies. A regional food safety assessment and situation analysis was needed to identify priorities and support implementation of the WHO strategic plan for food safety 2013–2022 in countries. He concluded that improved food safety would contribute to improved nutritional status and to the reduction and prevention of noncommunicable diseases, including cancer.

All meeting participants were invited to take part in the regional celebration of the 2015 World Health Day on Food Safety on 7 April, which was held under the patronage and in the presence of Her Royal Highness Princess Muna Al Hussein and His Excellency Dr Ali Nahleh Hiasat, the Jordanian Minister of Health.

In his special message on the occasion of World Health Day 2015, Dr Alwan stressed that food safety was fundamental to the health and well-being of everyone. He noted that unsafe food impeded socioeconomic development by straining health care systems and harming national economies, tourism and trade, and led to more than 200 different diseases – from communicable diseases, such as cholera and other diarrhoea-causing diseases, to a range of noncommunicable diseases, including various forms of cancer.

Dr Hiasat observed that Jordan, in its efforts to protect public health, paid close attention to food safety through monitoring food production and distribution establishments, enforcing relevant laws and regulations, and applying penalties, including closure, on violators.

4. Recommendations

To Member States

1. Cross-sectoral collaboration needs to be strengthened through application of the food chain approach. This can be done by:
   • promoting the One Health approach in which ministries of health and agriculture, and food safety authorities, need to collaborate to develop, and reach primary producers with, food safety messages, knowledge and technology, including good agricultural practices and good veterinary practices;
• strengthening information-sharing between involved agencies, including laboratory-based surveillance (animal and human) and food monitoring data exchange, to be able to act across the food chain;
• meeting International Health Regulations (2005) core capacity minimum requirements to effectively deal with food safety events and crises.

2. Review and update food laws and regulations where such needs are identified. While this is an ongoing process in some countries, there are a significant number where the process is stalled or absent and needs to be (re)activated.

3. Knowledge and skills among food handlers for safe food handling is a prerequisite for compliance with good agricultural, manufacturing and hygienic practices, and hazard analysis and critical control points, and governments should therefore determine the minimum requirements of food safety knowledge among food handlers and initiate the required training programmes.

4. Governments should establish delivery mechanisms to reach primary producers with the food safety messages needed to raise their awareness.

5. Food safety authorities should work towards developing a “food safety culture” among food business owners and food handlers.

6. Governments should develop the human resources in food control systems through systematic on-the-job training and by promoting formal qualifying technical degree courses in food safety and related disciplines in the educational sector.

7. Governments should, where necessary, improve their national food safety systems by:
   • shifting the focus from end-product testing to prevention;
   • promoting risk-based food control and an integrated approach;
   • strengthening national laboratory accreditation bodies and linking them to the international system;
• strengthening national and regional risk assessment capacity, including having more regional total diet studies to provide scientifically-sound exposure assessment;
• developing traceability and recall systems;
• developing and strengthening the voice of consumers on food safety issues;
• restructuring food safety systems where complexity is hampering outcome and establishing clear roles for agencies and stakeholders along the food chain; and
• developing a food safety framework to cover the entire food chain “from farm to plate”.

To WHO

8. Provide technical support to Member States in the above-mentioned endeavours, starting with a food safety regional assessment.