



ADDRESS BY
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WORLD HEALTH DAY
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Every year, WHO selects a health topic to highlight during the celebration of World Health Day. This year the topic of World Health Day is food safety under the slogan “From farm to plate – make food safe”.

The safety of our food is something that is fundamental to the health and well-being of every single one of us. Safe food underpins sustainable life and allows us to enjoy good health.

Unsafe food can lead to a range of diseases and impedes socioeconomic development by straining health care systems and harming tourism and trade. Unsafe food is known to be involved in more than 200 different diseases – from communicable diseases, such as cholera and other diarrhoeal diseases, to a range of noncommunicable diseases, including various forms of cancer. Foodborne and waterborne diarrhoeal diseases kill an estimated 2 million people each year, including many children. This is particularly the case in developing countries, where food supplies are insecure and where people tend to be more exposed to unsafe foods in which chemical, microbial and other hazards pose serious health risks.

Many people think about food safety only when there is a scandal or a scare to put it at the forefront of our collective attention. After a while, our attention is diverted by other issues and we continue our lives as if nothing had happened.

Consumers rely on their governments to ensure their food is safe, and expect it to be safe regardless of whether it is produced domestically or imported from elsewhere.

For these reasons, WHO has dedicated World Health Day 2015 to food safety.

WHO seeks to encourage and promote public health actions that will strengthen and improve the safety of our food. Food safety is not an issue for the health sector to deal with on its own. Public health actions must be anchored in the governments of our Member States and include actions among the different stakeholders in their civil and business communities. Farmers, food industry, food business operators and consumers need to come together and work

alongside the health sector and the government in order to understand the significance of their respective roles. This needs strong coordination and each sector must meet its individual responsibilities in advancing the availability, accessibility and affordability of safe and nutritious food, in the common interest of improving all our lives.

We all want our food to be safe.

Yet, a study shows that in one part of our region, only 28% of people wash their hands with soap and water after a toilet visit. In addition, many people do not consult their family doctor or general practitioner when suffering from diarrhoea. And often, in turn, the doctor does not request a laboratory analysis to confirm the identity of the organism causing the illness. And even when a laboratory analysis is made and the causative agent is identified, this result may not be reported to the national surveillance system.

We must all recognize that personal hygiene in all contexts, including food handling and preparation, is an issue that should be addressed vigorously – in the home, in schools, in the workplace, everywhere.

We want our food to be safe.

Under the International Health Regulations (2005), governments have agreed to establish the national core capacity needed to deal with food safety events of international significance. This requires a functional food safety system to be put into place that will enable a country to detect, respond to and control food safety events where and when they occur.

In other words, governments have committed themselves to establish, operate and maintain well-functioning food safety systems. Such systems must span the domains of all the ministries and sectors concerned in the food continuum ‘from farm to fork’, and reach well into the national health systems also. This crucial task is being prioritized in some countries of our region, but in others food safety systems are fragmented, under-funded and understaffed. In addition, food safety authorities are often restricted in their powers and find themselves struggling to take appropriate public health action because of old and outdated legislation.

Of the 22 Member States of the WHO Eastern Mediterranean Region, only five have reported that they meet completely the core capacity requirements of the International Health Regulations with regard to food safety. Overall, the countries of the Region report an average of only 75% fulfilment of the capacity to deal with food safety events of international concern.

Included in this statistic are countries in a state of emergency, where food safety systems are either rudimentary or have stopped functioning. However, even in those countries which are

not in crisis, there are significant food safety system components that are either absent or not well-functioning. Let me give you three examples.

- First, most countries do not have integrated surveillance of foodborne disease. This means that data coming from human health, animal health and the food sector is not combined and therefore it is difficult to identify food safety issues and the actions that need to be taken to address them.
- Second, only a few countries have systems in place to enable foods to be traced back to their source – and those countries that have initiated such systems often do not cover the full range of food categories. This hinders the ability to protect public health through food control activities or through successful investigation of outbreaks of foodborne disease.
- And third, very few countries have regulations in place to ensure that food is transported in a hygienic manner and at temperatures that adequately protect it from microbial growth.

No food safety system can protect food 100 per cent. However, it is possible to prevent an increasing proportion of foodborne disease through iterative improvements in food safety systems, by adopting policies of transparency when food safety events occur and by being open about the issues involved.

It is my firm belief that reform of food safety systems, and revision and updating of food laws, should be placed high on the public health agenda in all Member States and I call on ministers of health and ministers of agriculture, and their colleagues in other ministries involved, to get together and review the food safety situation in their countries and initiate action where necessary.

I recognize that this is no easy task. In fact, the area of food safety may be viewed as a litmus test of government ability to foster multisectoral dialogue and interministerial coordination, especially between the health, agriculture and trade sectors, but I must stress that only the health sector can take the lead in this particular exercise. For this reason, we, in WHO, would like to see all our Member States meet, in full, the core capacity requirements for food safety laid down by the International Health Regulations – and then go further still in their endeavours to protect the health of their populations.

WHO is always ready to work with Member States that may need our support to engage in such initiatives, and we work with other UN organizations and international partners to provide a platform for this work at the global level.

In our region, we have countries that rely almost entirely on imported food to meet the needs of their populations. We also have countries whose national economies are highly reliant on

their ability to meet international standards and so gain access to export markets for their food products. In both cases, the safety of the food involved can be ensured only through collaboration between the countries of origin and the countries where the food is consumed.

Consumers expect their food to be safe regardless of its origin.

And we all need safe food to sustain our good health.

On this World Health Day, “From farm to plate – make food safe”.