Public Consultation Report for Draft WHO Global Strategy for Food Safety

Prepared by WHO Secretariat
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Background
In 2020, a resolution titled “Strengthening efforts on food safety” was adopted by the Seventy-third World Health Assembly. In the resolution, Member States requested WHO to update the WHO Global Strategy for Food Safety to address current and emerging challenges, incorporate new technologies and include innovative approaches for strengthening food safety systems. There was a recognition that the food safety systems of many Member States are under challenge and need significant improvements in their key components, such as regulatory infrastructure, enforcement, surveillance, inspection and laboratory capacity and capability, coordination mechanisms, emergency response and food safety education and training. Member States also recognized the need to integrate food safety into national and regional policies on health, agriculture, trade, environment and development and a One Health approach should be applied to ensure food safety.

In response to this request, WHO Secretariat has prepared a draft WHO Global Strategy for Food Safety with the advice of the Technical Advisory Group (TAG) on Food Safety: Safer food for better health. Two technical meetings were held virtually in February and April 2021 with the TAG experts to inform this first draft.

The draft strategy shall serve as a blueprint and guidance for Member States to strengthen their national food safety systems and promote regional and global cooperation. In the meantime, acknowledging food safety is a shared responsibility, the targeted audience of the strategy should also include consumers, food business operators, academia and researchers, civil societies, and other international organizations.

Purpose of the public consultation
Consistent with its universal, transparent and inclusive spirit, WHO launched a public consultation from 13 May until 16 July to reach government officials, civil society organizations, international organizations, research institutions, and interested citizens and stakeholders from all over the world to ensure that content of the strategy reflects the experience, needs and aspirations of the international community. Inputs collected during the public consultation will be taken into account in the revision of the strategy before its submission to Executive Board meeting in 2022.

Scope of the public consultation
This public consultation covers all the content in the published draft 1 WHO Global Strategy for Food Safety. There were in total 6 sections, 27 questions in the online portal covering the following topics:

1. Personal information
2. Introduction of the strategy
   • The role of food safety in international development agenda
   • Vision and aim
   • Drivers for food safety
3. 5 Strategic Priorities (SP) and respective Strategic Objectives (SO)
4. General introduction on the Implementation of the strategy
   • Implementation for MS
   • Implementation for WHO
   • International cooperation on food safety
5. General introduction on the Monitoring and Evaluation
   • General approach for M&E
   • Indicators
   • Targets (Added to the draft strategy and the online questionnaire on 30 June)

6. Additional comments and supplementary materials

**Dissemination, contributors and distribution**

The announcement of the consultation was disseminated through the following channels:

- WHO website, the webpage of the Department of Nutrition and Food Safety
- WHO regional offices (WHO regional advisors)
- All the permanent missions in Geneva
- WHO nutrition and food safety collaborating centers
- Codex and INFOSAN
- FAO and OIE colleagues
- TAG experts and applicants

The consultation is open for 2-month. In total, 99 responses were received either through online portal or emails to WHO Secretariat for the whole strategy.

In terms of sectoral engagement, the largest proportion of participants represented government or ministries officers (25%), followed by the private sector entities (17%) and NGOs (14%) and Academic institutions (14%), UN systems and Other IGOs (13%), Individuals (11%), unspecified (6%) (See Figure 1 and table 1).

Among the government or ministries officers, there were 17 respondents representing following Member States: United States of America, Canada, Columbia, Chile, Nigeria, Zimbabwe, United Kingdom of Great Britain and Northern Ireland, France, Germany, Spain, Malaysia, Singapore, Australia, Indonesia, Mexico, Oman, United Arab Emirates. Additionally, European Commission also submitted the comments.

![Figure 1 Distribution of respondents by percentage](image-url)
<table>
<thead>
<tr>
<th>Sector</th>
<th>Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Government or ministries officer</td>
<td>25</td>
</tr>
<tr>
<td>Private sector entities</td>
<td>16</td>
</tr>
<tr>
<td>NGOs and Civil societies</td>
<td>14</td>
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<tr>
<td>UN system and other IGOs</td>
<td>13</td>
</tr>
<tr>
<td>Academic institutions</td>
<td>14</td>
</tr>
<tr>
<td>Individual</td>
<td>11</td>
</tr>
<tr>
<td>Unspecified</td>
<td>6</td>
</tr>
<tr>
<td><strong>In total</strong></td>
<td><strong>99</strong></td>
</tr>
</tbody>
</table>

Summary of key findings

1. **Lack of visibility for food safety**

Some respondents expressed concerns that the strategy is not sufficiently focused on food safety and seeks to cover nutrition, AMR. Though it is necessary to establish linkages with other programmes, however, food safety should be at the center in the strategy. Some food safety topics, such as food allergens, chemical risks, e.g. aflatoxin were not mentioned or in a very limited times compared with other non-food safety related programmes. This also implies to the drivers identified in the strategy, comments received suggesting there should be clearer linkages for each driver and its food safety implications.

2. **Too much trade focus**

Some respondents perceived strong trade focus in some of strategic objectives and texts in the strategy and they raised question on the specific role of WHO towards international trade and this might be redundant with activities already taken by Codex or WTO. For example, the “SO5.3 Ensure that national food safety systems facilitate and promote international trade”; “SO5.4 Strengthen engagements of national competent authorities with international agencies and networks that establish standards and guidelines for food in trade”. Some of texts under SP3 should also be modified, such as “Applying an evidence- and risk-based approach to setting and reviewing control measures at the national level is an important obligation under the provisions of the WTO Sanitary and Phytosanitary (SPS) Agreement and will greatly enhance trading opportunities”.

3. **One Health**

Some respondents highly praised a One Health approach is highlighted in the current draft. One technical agency suggested integrating One Health into the vision of the strategy. However, some of concerns were expressed related to the technical content under the section “Food safety demands a One Health approach”. The texts seem suggesting MERS, Ebola, and H7N9 are foodborne diseases which is technically incorrect. This section should more highlight foodborne pathogens and how they move between environment, animals, and humans rather than casually mention in the section on climate change or in the context of AMR.

4. **Food Systems**
Member States comments and individual comments suggested the strategy should elaborate more discussion on food systems in following topics:

- The food systems transformation in Low- and Middle- Income Countries (LMICs) and its impact on food safety
- The food systems transformation and nutrition/diets

5. Coordination and collaboration with partners

The strategy would benefit from explaining in the introduction on how this strategy will interact with FAO strategy and other international organizations to avoid any confusion. Also, there is a lack of perspective from private sectors given they hold the primary responsibility for food safety. Moreover, the strategy shall also cover the support to small/medium enterprises (SMEs). With regarding to SP4 on communication, it was perceived the strategy adopts a top-down approach rather than emphasizes a two-way communication between Governments and other stakeholders.

6. AMR

Certain concerns were expressed on the textbox and some texts related to AMR, for example, suggesting AMU increases the prevalence of foodborne diseases, and withdrawing the usage of antimicrobials of critical importance to human health, etc.

7. New technologies:

Certain concerns were expressed that the strategy should be described in a balanced tone for the emerging new technologies by presenting both opportunities and challenges (Now the strategy explains too much aspects on the gains while ignoring the challenging part), especially the promotion of Whole Genome Sequencing (WGS) was questioned by respondents. More consideration should be given to the feasibility in adopting those new techs in low resources settings.

8. WHO’s role and Member States Implementation

Comments welcomed the section on the WHO’s role for supporting the strategy, however, this should be further highlighted in the strategy. The strategy at present moment was still perceived to have too much focus on Member States. One respondent suggested WHO should not limit its role in just supporting Member States in the aim of the strategy. Also, current strategy seems quite ambitious for low resources settings, and the strategy shall highlight a stepwise approach.

9. Long-term health impacts of food safety

The strategy highlights the short-term health outcomes of unsafe food while there is a lack of linkages to the long-term health effects caused by unsafe food. For example, the chemical hazards and risks are neglected both in the content of the strategy and the indicators and targets. It would be worthy to also stress long-term implications on child growth and development, the intersection of nutrition, sanitation, toxin exposure, and pregnancy/lactation. The aim of this is to highlight the importance of and need for further research to assess the impact of food safety to countries’ ability to meet global health targets.

10. Indicators and targets:
All comments welcomed this approach on setting global indicators and targets, however, many concerns were expressed as well:

- The targets are too ambitious which makes it very unrealistic for countries to reach and this will discourage actions
- There is a limited scope for health outcome and hazards in the current target
- Some other new dimensions should be considered, such as the level of investment, political commitment and trade-related aspects
- Tiered approach should be considered giving different starting points for MS and regions
- The impact of COVID-19 should be considered when making those targets

11. Writing and editing:

The content of the strategy should be more concise and shorter.