NEWSLETTER
FOOD SAFETY

From farm to plate,
make food safe

World Health Day 2015
#safefood | www.who.int/whd/food-safety
Today, 7 April 2015, the World Health Organization joins the rest of the international community to commemorate World Health Day. This year’s theme is “How safe is your food? From farm to plate, make food safe”. This theme highlights the urgent need for government organizations, food businesses and consumers to put measures in place that will improve food safety from the point of production to consumption.

Unsafe food is linked to the deaths of an estimated 2 million people annually and the African Region is without exception. Infants, young children, pregnant women, the elderly and those with an underlying illness are particularly vulnerable. For example, in 2014, there were more than 100,000 cases of cholera in 22 countries resulting in over 1700 deaths. So far this year, cholera outbreaks in 13 countries have led to over 200 deaths out of more than 13,000 cases.

Food contaminated by harmful bacteria, viruses, parasites or chemical substances can lead to a wide range of health problems. This is responsible for more than 200 diseases, including typhoid fever, diarrhoea and cancers, among others.

Food can become contaminated at any point of production and distribution, and food producers play a critical role in preventing this. Equally a large proportion of incidents of foodborne disease are caused by foods improperly prepared or mishandled at home, in restaurants, or markets. There is an urgent need for all food handlers and consumers to understand the importance of adopting basic hygienic practices when buying, selling and preparing food to protect their health and that of the wider community.

In Africa, women who primarily prepare food at home are also key participants in small and medium sized enterprises, as owners, managers and workers in food businesses such as cafes, restaurants, small manufacturers, and street vendors. Improving the safety of food and securing the effective management of businesses operated by women is a key concern in public health for the economic, social status and overall standing of women in their communities.

There is also a growing concern over the increase of resistant microorganisms entering the food chain. Food safety serves as a good platform to bring stakeholders together to address antimicrobial resistance. In combating antimicrobial resistance, prudent use of antimicrobials in agriculture, aquaculture, and animal husbandry is critical, as is the case in human medicine. Production of safe food facilitates access to wider markets and improves overseas earnings.

As we commemorate World Health Day, I call upon African governments to prioritise food safety, align policies in agriculture, trade, health, education, social protection and mobilize adequate financial resources to make food safe for all. Setting food guidelines in line with Codex standards, operating regional alert mechanisms and early warning systems as well as building and maintaining adequate food systems and infrastructures will contribute enormously towards improving food safety.

Everyone has a role to play in making food safe and I urge food handlers and consumers to be familiar with common food hazards and handle and prepare food safely. WHO will continue to collaborate with the Food and Agriculture Organization, the World Organization for Animal Health, and other partners to ensure food is safe “from farm to plate” in African Region.

Thank you
In Africa, the production, processing, distribution, sale and service of food and food products are mainly carried out by small and medium-sized enterprises (SMEs); and women are key players in SMEs in Africa. Improving the safety of food and securing the effective management of businesses operated by SMEs including women is a key concern in public health terms and also for the economic, social status and standing of food businesses in Africa. This is the reason why WHO plays a key role in supporting governments, SMEs, consumers and other stakeholders to adopt SFFA to ensure food safety, minimize foodborne diseases—“no food sector left behind in a One health and food chain approach”.

**What is SFFA?**

1. SFFA is an adaptation of Codex HACCP.
2. SFFA—Means Safer Food For All.
3. SFFA is being developed by WHO-Regional Office for Africa.

**Advantages of SFFA**

- Minimum burden on food businesses
- Scientific decision making by authorities
- Clear, easy-to-follow valid operating procedures ("safe methods")
- Modular system allows for continuous improvement and adaption to the latest scientific advice and developments.
- Easy to audit by enforcement officials
- Updates and consumer advice can be issued easily
- Local and specialized food safe methods can be developed locally and included in the system.
- Fully compliant with joint FAO/WHO HACCP

**Watch out for the following products of SFFA from WHO!**

i. HACCP manuals and checklist for SFFA to enhance food safety for small and medium sized African food enterprises.

ii. Inspection and Evaluation Module for SFFA Retail and Food Service Systems in Africa

iii. “Cook and Eat Safe” Guidance for Consumers: Based on SFFA
1. Safe methods: These are standard operating procedures with explanations and corrective actions i.e. the documentation.

2. The diary: This is the record keeping element that allows audit/inspection.

2. What's in the diary?
   - Opening and closing checks
   - Staff training record
   - Suppliers list
   - Cleaning schedule
   - Prove it records
   - Contacts list
   - Diary pages
   - 4 - weekly review

---

**What is in SFFA?**

What are the **safe methods**?

Example:

1. **Fact sheets highlighting key safety of Hand Washing & Hand Hygiene**

---

**Food Control Plan [Version 3.0] 2011 B4 Modified**

**Goal**

To prevent food and food contact surfaces from becoming contaminated by unclean hands through effective hand washing and drying.

**Why?**

- Hand washing and drying is one of the best ways to prevent harmful microbes from getting onto food.
- Food handlers and others can spread harmful microbes carried on their hands onto food by either touching food directly or by touching other things that the food comes into contact with (e.g. benches, knives, chopping boards etc).

**How this is done**

Everyone (including Contractors) follow good hand hygiene practices by washing and drying their hands, especially:

- When entering any area where unwrapped ready-to-eat food is handled.
- Before touching raw food (meat, veges etc).
- Before putting on gloves and after removing them.
- After coughing and sneezing.
- After using the toilet.

**Hand washing**

**Step 1**: Clean under each fingernail using warm running water, soap and a nail brush.

**Step 2**: Wash hands with warm running water and soap, rubbing vigorously (front, back and between fingers).

**Step 3**: Dry hands thoroughly (front, back and between fingers), by using (pick option):

- Single-use doth (roller) towel
- Rub hands on two sections of towel
- Single-use paper towel
- Rub hands on two paper towels.

**Using gloves**

Using gloves is not a substitute for hand washing.

Gloves do not protect food from cross contamination.

Gloves, just like hands, can transfer microbes from raw food, equipment, utensils and surfaces to ready-to-eat food.

Gloves must be changed between tasks (e.g. after handling uncooked food and before handling ready-to-eat foods etc).

Gloves are only used for the following tasks:

- **Hand jewellery and finger nails**
  - To enable good hand hygiene, fingernails should be kept short. Hand jewellery should not be worn if the food handler is working with unwrapped food.

**What if there is a problem?**

When a staff member doesn’t follow correct hand hygiene you may need to:

- Demonstrate the correct procedure to them.
- Provide a hand wash basin at a more convenient location.
- Change the type of hand cleaning materials.

**Write it down**

Write down in the Diary when employees are noticed not following good hand hygiene and what was done to correct them.

---

For more information, please contact: WWW.AFRO.WHO.INT
Strengthening Food Safety in Africa & A Multistate Approach

An integrated multistate approach to food safety is urgently needed in Africa. In this context, Member States share policies, regulations and organizational structures in order to leverage their investment, ensure consistency in regulation and enforcement, and achieve free trade.

African Region Member States and Regional and International Partners at the 21st Session of FAO/WHO Coordinating Committee for Africa (CCAfrica) Yaoundé, Cameroon, Hilton Hotel, 27-30 January 2015. WHO calls on the sub-regional level economic and trade blocks such as the Economic Community of West African States (ECOWAS), the Common Market for Eastern and Southern Africa (COMESA), the Southern African Development Community (SADC), Economic Community of Central African States (ECCAS) to encourage their Member States to embrace and adapt the multistate food safety policy approach.

Fighting against foodborne & zoonotic diseases in Africa

A drawn out cholera outbreak affecting African countries has been worsened by lack of good hygienic practice (GHPs) at home and food businesses. Conservative estimate gives over 16 000 cases and over 200 deaths in one month in one country.

For more information, please contact: WWW.AFRO.WHO.INT
Unhygienic food in a market in Africa

You can see clear evidence of cross-contamination and opportunities for bacteria to grow and multiply. Products on display are temperature sensitive but are exposed to ambient temperatures.

Vegetables, seafood and water are displayed on the same table - increase chance for cross contamination.

Avian influenza, also known as bird flu, has hit several countries in the African Region. Bird flu is also known as H5N1 and is a highly pathogenic subtype of the influenza virus that occurs mainly in birds. It is highly contagious among birds, and can be deadly to them, especially domestic birds. Over the years some human cases have been reported and leading to human death in areas where preventive control measures were ineffective.

In one African country, over 14,000 birds have been affected by the disease and about 4500 birds have been culled by government officials from February to March 2015.
WHO calls to action against outbreaks of antibiotic resistant bacteria in Africa

A wide variety of antimicrobial agents are used in Africa for protection and maintenance of human and animal health. However, due to the weak regulatory frameworks and enforcement mechanisms, Africa is seeing a drastic change from prudent to irrational use of antimicrobial agents in both human and animal sector. Animal production in Africa is dominated by small and medium sized farmers, and despite the increase concerns about antimicrobial resistance in the Region, there is inadequate and ineffective surveillance activity of antimicrobial resistance in humans, food and animal sectors across the region.

To further support African countries in the fight against antimicrobial resistance, WHO will continue surveillance training activities and is calling on Member States to develop project proposals on surveillance of foodborne diseases including antimicrobial resistance and zoonoses.

Sample photos of pharmaceutical products including antibiotics sold openly on the street in Africa

Listeriosis caused by the bacterium Listeria monocytogenes caused 23,150 illnesses, 5,463 deaths, and 172,823 disability-adjusted life-years in 2010, according to estimates in a study in The Lancet Infectious Diseases journal (Maertens de Noordhout, et al., 2014). Despite illness and death, listeriosis is responsible for almost US$ 3 billion in economic costs, without even factoring in food business repercussions such as loss of consumer confidence, associated recall expenses, and costs of litigation. The results of the study indicated the lack of data for 85 countries in Africa, Middle East and South Asian, with an estimated population of 3320,865,627 equivalent to 48% of the world population in 2010 (Maertens de Noordhout, et al., 2014). This means that information from countries or Member States in African Region is urgently needed.

Foodborne disease alert: Focus on Listeriosis

For more information, please contact: WWW.AFRO.WHO.INT
References:

The global burden of listeriosis: a systematic review and meta-analysis.
The Lancet Infectious Diseases, 1082-1073;(11)14

Technical contacts:

Dr. Mohamed Sheriff,
Tel.: +472 413 9943 - Email: sherrffm@who.int
Dr. Ibrahima-Socé Fall,
Tel.: +47 24132002 - Email: : socsef@who.int

Media contacts:

Dr. Cory Couillard,
Tel.: +472 413 9995 - Email: couillardc@who.int
Mr. Collins Boakye-Agyemang,
Tel.: +472 413 9420 - Email: boakyeagyemangc@who.int