



## 1.19 Assemble and launch a Food Safety Toolkit

**The Solution:** To develop a Food Safety Toolkit which would comprehensively address food safety improvement, focusing on informal markets, through a suite of information, training material, assessment guides, monitoring and evaluation guides, intervention options, incentives, communication, and engagement material. This toolkit would focus on ‘how’ rather than ‘why’ and ‘what’ to bring about large-scale change in the way food safety is managed in various countries.

**Source of the Solution:** The idea came from the food safety working group.

**Problem addressed within food systems:** Most risky food is sold in the informal systems of LMICs, yet food safety in these settings has been largely ignored, and there are very few widely known, available, affordable, and acceptable methods to address it. The persistence and rising incidence of foodborne diseases in informal food systems is often attributed to three root causes: inadequate policy, regulation, standards, and infrastructure; lack of capacity, appropriate technology, and compliance by the private sector; and absence of food safety culture.

**How this solution will address that problem:** By providing a packaged, modular, easy-to-use set of tools for risk assessment, management, and communication, we will address all three, giving national and local authorities, development actors, and the organised informal private sector the ability to invest in improving public health through safer food. Given that multiple integrated interventions are needed to address the abovementioned issues, a toolkit approach is found most useful. This toolkit would be a compendium of tools, technologies, and approaches for which there is evidence of success. Each element would have different gradations: for example, empirical tests for milk safety could range from a simple ‘clot on boiling’ to polymerase chain reaction tests in specialised laboratories. This would allow the toolkit to be adapted to the resource availability and capacity of the users. The toolkit would focus on small-scale, traditional food processing and retail and have five themes. Each theme would contain training materials addressing incentives and behaviour change including consumer pressure, peer norms, credible information on safety and nudges. The themes are:

1. **Support to policy and standard development:** This could include guidelines to developing food safety strategies for the informal sector; training on risk assessment, commodities, and value chains to best use scarce resources; developing locally appropriate standards; and exploring trade-offs such as very high safety standards resulting in nutritious food being unaffordable to the poor. For example, this could include advice on developing local standards rather than adopting standards from high-income countries (which over 90% of traditional food products fail).
2. **Building food testing capacity:** In LMICs, historically, food was very unsafe. Developing tests for hazards and making results publicly available incentivised the private sector to make food safer. Tools for food testing include engaging consumers and media in testing; simple surveillance; use of ICT; and rapid tests. For example, instead of using conventional tests based on isolating, growing, and biotyping bacteria, LMICs can use simpler, rapid kits such as lateral flow.
3. **Effective inspection and regulation:** This could include improving trust in inspection by better transparency and complaint mechanisms; methods of co-regulation and group certification to reduce burden on inspectors and increase trust in the process; inspection and audit that supports improvement rather than punishes deficits; incentives for detecting and removing ‘bad actors.’ For example, LMICs could use greater reliance on peer-to-peer inspection with public authorities overseeing the process and conducting periodic checks.
4. **Improving private-sector capacity and compliance:** This could include forming or supporting a group for economies of scale in inspection; training for all food handlers; suggestions for incentives to



increase compliance; simple technologies and protocols for improving hygiene and safety, with certification and branding for competent handlers; third-party audits to increase trust in training and branding; using peer pressure and consumer pressure to improve compliance; and rewards for good performance. For example, clearly visible “scores on doors” type initiatives can be used to show the level of food safety performance of private businesses.

5. **Consumer empowerment:** This could include raising awareness of foodborne disease through social marketing and by integrating it into school and university; involving media in communication; encouraging consumers to recognise and demand safe food,

To develop this toolkit, a group would be convened to compile tools and approaches and package them in ways that ensure they could be easily used and adapted to context; these would be available in local languages, online, and on social media. Adoption of these tools would be expected to lead to better national food safety policies, appropriate standards, better compliance with standards, more consumer trust in food, and safeguarded livelihoods for informal sector workers. This, in turn, would lead to a reduction in foodborne disease and improved nutritional outcomes.

This assumes sufficient resources to support implementation of tools; that government, the private sector, and the public respond to the incentives for behaviour change incorporated in the toolkit; and growing recognition and support for the informal food system and desire to improve food safety and reduce disease emergence.

**Solution’s alignment to the ‘game changing and systemic solution’ criteria:**

*Impact potential at scale:* As informal markets provide most food to consumers in LMIC and the major market for smallholder producers, the potential market is huge. The toolkit will be piloted in several countries and a generic version developed, which will be available to any country for scaling. It can be a living toolkit, with improvements added as experience grows.

*Actionability:* The toolkit will be modular, with tools and approaches at different levels of complexity. Some countries wish to upgrade informal food systems; others are more antagonistic. We will pilot in the former hoping to extend to the latter. The costs will vary from moderate to high depending on the level of effort.

*Sustainability:* The toolkit will likely be adopted by countries if it can be shown to improve food safety and have other benefits. The proposed GFSI (Solution 17) will leverage consumer demand for safer food and reputational concerns of governments to seek to invest more in food safety, motivating use of the toolkit. The recent finding that foodborne disease has a health burden comparable to malaria, HIV/AIDs or tuberculosis and an economic cost of more than \$100 billion USD per year in LMICs should stimulate greater public and donor investment in improving food safety.

**Existing evidence:** There is much empirical evidence for the success of different elements of the toolkit, and it is likely that combining them will be more effective. For example, India has had good success in applying many of the potential toolkit elements to a very large food system with a high degree of informality. Overall, informal food systems have been neglected and so represent “low hanging fruit” where quick progress may be anticipated.

**Current/likely political support:** Several countries are interested in improving food safety in the informal sector and aware that their current approaches are inadequate. There are currently major initiatives in Ethiopia, Nigeria, Bangladesh, Vietnam, Cambodia, and India. We have senior members from WHO, OIE, FAO, EC on the working group’s Expert Advisory Committee and think they would be interested in improving understanding and management of food safety. This group would work with a coalition of large



food businesses to bring about systemic changes in a manner that is inclusive of both formal and informal sectors.

**Contexts for which this is well suited:** We suggest priorities should be LMICs with transitioning economies, high or increasing urbanisation, more literate consumers with high concerns over food safety, and evidence of a high burden of foodborne disease. Many countries meet these criteria.