



1.18 Develop a Global Alliance on Safe Food for All

The Solution: Global Alliance on Safe Food for All (GASaFA) would be an action-oriented, member-driven, collaborative platform for cooperation that will design and apply food safety solutions which are ‘fit for purpose’ in the domestic markets of LMICs. It will bring together governments, bilateral and multilateral organisations, food businesses and other stakeholders to work to achieve the common goal of advancing food safety, in an affordable and equitable manner. It will establish networks and develop synergies with the efforts of other bodies (e.g., WHO, FAO, CAC, OIC and CGIAR) that are currently engaged in food safety, and will support the work of the World Bank and regional banks. This systemic solution would create a new networked structure focused on building capacities for food safety management as a sustainable, long-term way to address unsafe food and food fraud.

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

Problem addressed within food systems: There is growing recognition of the high incidence of foodborne disease in LMICs and the associated health and economic consequences. In the context of rising incidence of zoonotic diseases, (including possible linkages of COVID 19 with wet food markets and avian flu with food animals), the world requires a more robust mechanism for global coordination on food safety.. There is also recognition that action is needed to improve practices in the production, manufacturing, distribution and preparation of food to more effectively manage food safety risks. To address these issues, high-income countries often apply cutting-edge innovations, especially in the physical and information sciences. Many of these, however, are very difficult to apply in LMIC market settings due to cost and their scientific, institutional or other prerequisites and incompatibility with institutional structures and *modus operandi* of food value chains.

How this solution will address that problem: The alliance would provide less expensive models of ensuring food safety compared to large bureaucratic institutions for food safety in advanced nations. Coordinated by a global headquarters, main focal points of the alliance would be regional centres (8 to 10) established in LMICs. These centres would be established based on mapping of foodborne disease burden across the globe, ideally linked to existing institutions with food safety capacity so as to reduce the lead time.

These centres will support member nations in many ways including: (1) developing integrated public health surveillance systems for foodborne diseases; (2) institutionalise surveillance-based testing for commonly adulterated/sub-standard foods; (3) generate local data to aid risk assessment and standard setting processes; (4) build and augment data and standards for traditional/indigenous foods; (5) develop a training ecosystem for all food handlers; (6) integrate training and third-party certification for food safety; (7) build food testing capacities including in the private sector; (8) help develop cheap and fast credible diagnostics that can be used directly by consumers and build food testing capacity; (9) build regulatory capacity and leverage private sector capacities to bolster the enforcement framework; (10) provide effective measures and control systems; (11) support One Health through an integrated approach from farm to fork; (12) develop an ecosystem for safe and sustainable packaging; (13) develop environmentally sustainable cold chain grids through public-private partnerships; and (14) identify institutions and people who work on food safety and build such groups across regions to help build food safety capacity in LMICs.

There is a demand for capacity building in these areas in most LMICs, and delivery through centres located in the region will make them have greater relevance and enable LMICs to achieve their goal of advancing food safety, in an affordable and equitable manner. Solutions will be focused on the informal food sector, perhaps using cluster-based models to efficiently address food safety. Innovation and new technologies



would also be leveraged. The regional centres would help promote these approaches and support LMICs in adopting them.

In terms of *inputs*, a 5-E process will be adopted to *Engage* stakeholders, *Excite* them about the benefits of safe food, *Empower* them to create a safe food ecosystem (both to demand safe food as safe businesses handlers ensure safety of food delivery), *Enable* them through training capacity building to deliver safe food, and finally *Entice* them through reward (financial or non-financial) and recognition. This process will create a mutually reinforcing process of change and create a strong and sustainable food safety culture. The *output* of this will be the establishment of robust and effective food safety systems in many LMICs. This will lead to less foodborne disease, greater cooperation and collaboration among LMICs (including on issues that go beyond food safety). Alliance and its regional centres are essentially an institutional arrangement that can be extended to promote consumer demand for more nutritious food or sustainable diets or influence businesses to produce more nutritious food. In India, the country's food authority is steering Eat Right India campaign that not only focus on safe food but also on nutritious and sustainable food.

We assume that we will receive buy-in from some LMICs to host the global headquarters and regional centres and buy-in of a majority of LMICs to join; buy-in of multilateral institutions, industry and civil society partners is desirable.

Solution's alignment to the 'game changing and systemic solution' criteria:

Impact potential at scale – The alliance will be active in all LMIC regions.

Actionability – Given that consumer and politician concern over food safety is very high in several LMICs, we expect great support for the alliance. The World Bank, regional banks, several high-income countries, and food businesses with expertise and interest in food safety are likely to support to enhance their reach and impact.

Sustainability – Given that funding requirements will be modest, several national governments would likely be willing to support. The funding could come from the national governments, the World Bank, regional development banks, and donor agencies. While traditional development aid has often failed to achieve desired results in food safety, a global alliance based on south-south cooperation is well suited for addressing the problem (as context, culture, and relevance are important in food safety).

Existing evidence: The concept of global alliances has been used in sanitation, hygiene, and menstrual health, tackling anti-microbial resistance, nutrition, promoting gender equality and facilitation trade. Thus, this concept is well-established, particularly in the context of addressing complex societal issues. There is also evidence that a well-functioning food safety management system built on the principle of 'shared responsibility' and not 'command and control' can be put in place at low cost. For instance, India has developed an effective and efficient food safety management system with an annual budget of USD 40 million (compared to above USD 1.5 billion spent by the USFDA and USDA in the United States).

Current/likely political support: Several countries are interested in improving food safety in the informal sector. So far, we have not reached out to the specific countries, but the expectation is that several countries could be interested in hosting the alliance and the regional centres. Further, given that the alliance and regional centres would support the efforts of other bodies that are currently engaged in food safety (e.g., WHO, FAO, CAC, OIC and CGIAR), these would be likely supporters.

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. In addition, most



LMICs do not have food safety agencies that can discharge these functions; when such agencies exist, they often lack capacity to do many of these things.