Safe Food, Fair Food for Cambodia project

Progress highlights for the first year

Phnom Penh, September 5th 2018

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SFFF ANNUAL MEETING (5.9.2018)
Outline

• Reminder of the objectives
• Findings: prioritization, trainings, field works
• Partnership and project link
• Next steps
From hazard-based to risk-based
The vital few and the trivial many

**Systematic prioritisation**

- Convene Task Force
- Synthesise evidence on consumption, hazards and risks
- Select a priority animal source food value chain
- Select 2-3 priority hazards
Approach: risk analysis or risk-based decision making

Risk Assessment
Science-based

Risk Management
Policy-based

Risk Communication
Interactive exchange of information and opinions concerning risks

World Health Organization
Project objectives

1. Actionable evidence on FBD burden associated with animal source foods
2. Pilot incentive-based approach to improving food safety among ASF traders
3. Cambodian-led Theory of Change for improving food safety
4. Gender and equity research
5. Building capacity in food safety risk assessment, management, communication
1. Risk profiling
   1. Scoping visits
   2. Systematic literature review
   3. Training in risk ranking
   4. Stakeholder prioritisation

2. Generate evidence on FBD Five Urban Survey Study

3. Develop & test solutions for wet markets RCT intervention
1. RISK PROFILING

Stakeholder consultation, Taskforce – December 2017
Food safety risk assessment for informal value chains

- Organized by NAHPRI in partnership with ILRI and WHO
- 15-17th Jan 2018
- 30 participants (70% male, 30% female)
- National state agencies, research academia, universities and international organizations
Gender and livestock training

- Organized by CelAgrid in partnership with NAHPRI and ILRI
- 22-23 Jan 2018
- ILRI Gender trainer, Nicoline De Haan & 2 co-facilitators
- 9 participants (3 females, 6 males)
- National state agencies, research academia and university
PRIORITIZATIONS

- Pork and poultry
- *Salmonella, Staphylococcus aureus*, (Campylobacter), trichinella and cysticercosis
- Traditional markets and supermarkets in 25 provinces
- Urban focus: Phnom Penh and Siem Reap

Where we work
2. GENERATE EVIDENCE ON FBD

1. Household survey

- 7 districts in Phnom Penh (Tuol Kouk, Steung Meanchey, Ruessei Kaev, Sen Sok, Pou Senchey, Chrouy Changvar, Chbar Ampov)
- 200 households
- Pork Consumption Practices and Healthcare-Seeking Behavior
HOUSEHOLD SURVEY FINDINGS

• Limited knowledge of food safety and foodborne health risks.
• Food safety is a concern of consumers.
• The most commonly use retailers (mobile vendors) are considered less safe and less clean. Preference is driven by convenience/accessibility, not by food safety concerns.
• GI diseases is common and people often treat themselves or seek healthcare support (depending on age of ill).
• Use of medicines to treat symptoms was very common.
2. GENERATE EVIDENCE ON FBD

2. Nutrition survey

I. Assess current nutritional practices and consumption of ASF
II. Determine perception of the risk of food safety and how it relates to diet, health and decision making
III. Identify barriers preventing children and mothers from accessing safe animal source food products

Photo by Participant 2
Methods

In-depth interview
- 26 qualitative interviews on practices and perceptions on nutrition and food safety in their family
- Loan camera

PhotoVoice Interview
- 2-3 days later, discuss each photo
- How is food purchased, prepared and distributed? What influences decision making?
PRELIMINARY RESULTS

• Chemicals in the food (primary food safety concern),
  – “Mostly, as I understand our food may not be very safe, because now days everything uses chemicals.”
  – “…if any vegetables uses too many chemicals, a stomach ache occurs immediately after eating.”

• Special diet for pregnant and lactating women,

• Food insecurity, cost of food, infant and child nutrition, decision making, gender equity, market location, time, and family influences.
2. GENERATE EVIDENCE ON FBD

3. Cost of Illness in Phnom Penh and Siem Reap

- 104 cases: 64.4% female and 35.6% male, age 24.8 years in average, LOS: 2.04 days in average
- Main diagnosis: Food poisoning (60.6%) and acute diarrhea (36.5%)
- In general, average cost: **USD 92.58 per-episode of hospitalization and USD 43.79 daily.**
- Direct medical cost: The largest share (63%)
- Direct non-medical cost (24%) and indirect cost (13%)
3. Student training

1. PhD student: Rortana Chea at ILRI and SLU (4 years)
2. MSc student: Morgan Brown, Emory University (1 year)
3. SEAOHUN / KOICA /RUA fellow: Phally Pha DVM (5 months)
4. PARTNERSHIP DEVELOPMENT

Food Safety Technical Working Group

USAID Innovation System Labs (fish, harvest)

Global processes on food safety (WHO FERG, GFSP, WB, FAO, OIE, CGIAR, Donor initiatives…)

ILRI

Emory University
Next steps

1. National hazard survey
2. Quantitative nutrition
3. Taskforce operation, impact pathway
4. Intervention: Pilot incentive-based approach to improving food safety among ASF traders
5. Continuous activities on building capacity in food safety risk assessment, management, communication
5. Hazard survey and intervention

25 provinces for market sampling
6 provinces for repeated sampling
6. Taskforce: research translation

- Support food safety technical working group of Cambodia
- Risk assessment expertise and case studies
- Linking to other projects of food safety
- Training
## Multi-sectoral Technical Working Group for Food Safety

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<th>Members</th>
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<td>Secretariat (coordinator) – CDC/MoH</td>
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### Acronym | Full name
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MoH | Ministry of Health (MoH)
MAFF | Ministry of Agriculture, Forestry, and Fisheries (MAFF)
MoC | Ministry of Commerce (MoC)
MIH | Ministry of Industry and Handicraft (MIH)
MEF – GDEC | Ministry of Economic and Finance (MEF)
MoT | Ministry of Tourism (MoT)

### Members:
- Other technical persons from all 6 Ministries
- Representative from National Institute of Public Health (NIPH)
- Representative from National Health Products Quality Control Center (NHQC)
- Representative from Institute Pasteur of Cambodia (IPC)
- Representative from Food and Agriculture Organization (FAO)
- **Representative from The United Nations Industrial Development Organization (UNIDO) (SOK, Narin N.SOK@unido.org)**
- Representative from World Health Organization (WHO)
- Other technical agencies and development partners, as appropriate
OUTPUTS OF Y 1

• Project profile: [https://cgispace.cgiar.org/handle/10568/89199](https://cgispace.cgiar.org/handle/10568/89199)


• Training on Food Safety Risk Assessment (15-17 January 2018) [https://www.dropbox.com/sh/0up5fxu6eo261d4/AAAg5E9y_f2AAf0DVtD0giwza/Presentations?dl=0](https://www.dropbox.com/sh/0up5fxu6eo261d4/AAAg5E9y_f2AAf0DVtD0giwza/Presentations?dl=0)


• On ILRI Asia blog:

• On ILRI Safe Food, Fair Food blog

• On A4NH blog
CONCLUSION

• Inception and project partners, other admin done
• The team of SFFF Cambodia conducted activities in partnership development, capacity development and research as planned.
• However, we had some delayed in contract preparation and in developing partnership with national public health partners.
• Project is on a good track to enter in the second year with more laboratory and risk assessment work as well as partnership engagement in food safety.