

## BEYOND ONE-SIZE-FITS-ALL: DEVELOPING FOOD SAFETY GUIDELINES SPECIFIC TO THE NEEDS OF TRADITIONAL MARKETS

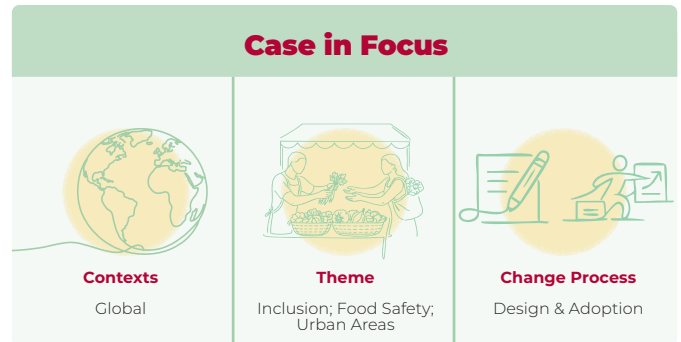


*Ensuring access to safe food is one of the core goals of food systems, yet millions of people worldwide get sick from unsafe food every year. This case study examines the development and adoption of international guidelines for food safety – specific to the traditional markets where many lower-income-country consumers buy their food. It shows how considering the needs and challenges of specific contexts when formulating guidelines or more formal policies can make for a more equitable enabling environment for food system transformation.*

## Motivation

Enhancing food safety is critical for advancing human health, reducing food loss and waste (and with it, the environmental burden of the food system), and supporting the livelihoods of food retailers. Annually, foodborne diseases contribute to millions of illnesses and thousands of premature deaths worldwide, with a significant burden borne by those in lower-income countries. It also has large economic costs, due to sickness, treatment costs, and trade effects. Foodborne disease also intersects with and exacerbates malnutrition, being both a potential cause and a consequence of it. Traditional food markets are a particularly critical juncture for ensuring food safety, as they supply most of the fresh food consumed in low- and middle-income countries (LMICs), particularly by lower-income consumers.

This case study examines the process of developing and adopting new guidelines for food hygiene in traditional markets through the Codex Alimentarius Commission.



## Case Study Context

In high-income countries, most food is supplied through ‘modern’ retail channels, like supermarkets. These generally have formalised and well-resourced systems to set and enforce food safety standards (including regulation, inspection systems, and testing). Where well applied, these have led to documented improvements in food safety outcomes. However, traditional markets have unique challenges that require context-specific food safety controls. Traditional markets include both formally and informally recognised markets, located in approved and unapproved areas, often operating in open-air or partially roofed venues, with or without raised stalls to present food (typically uncovered). They often house numerous registered and unregistered vendors selling diverse foods, from fresh vegetables and fruits to milled wheat flour to eggs, fish, and live poultry. And they often lack access to electricity, running water, waste management, and plumbing. This context can compound food safety challenges through poor food hygiene practices, driven by a lack of vendor training as well as inadequate infrastructure and essential services, like those required to support handwashing. Moreover, governments in lower-income countries usually lack the funding to enforce rigorous food safety standards through routine inspections and testing in traditional markets.

In recent years, there has been growing recognition that food hygiene and safety in traditional markets must be addressed—but that this must be done in ways that are evidence-based yet sufficiently pragmatic to support adoption amid local realities.

**Food hygiene** refers to the conditions and measures needed to ensure the safety and quality of food throughout the food supply chain, from production to consumption.



This case study was developed as part of the ‘Exemplars of Food System Change’ project of the Nourishing Food Pathways programme, which seeks to document examples of food system transformation in action and explore what enables and holds back change. You can access all the case studies here: <https://www.gainhealth.org/exemplars>



### ***A collaborative process to draft and adopt new guidelines***

The development of the guidelines was initially requested by GAIN – a Codex observer organisation – to the Codex Committee for Food Hygiene in March 2022. At the November 2022 Committee meeting, this proposal was supported by 13 countries: Argentina, Bolivia, Dominican Republic, Cameroon, Ghana, India, Indonesia, Jamaica, Kenya, Mauritania, Morocco, Nigeria, the Philippines, and Trinidad and Tobago as well as observers including the Consumer Goods Forum and International Frozen Foods Association. This then kicked off a formal process for Codex standard development, approval, and adoption. In 2023, the governments of Kenya, Bolivia, and Nigeria co-lead a Working Group to draft the guideline text. At least 12 countries provided comments on drafts. The Working Group revised the text three times before it was considered by the full Committee. Countries from Africa, Asia, and Latin America enthusiastically supported the proposal whenever it was brought forward for review, and no countries moved to block the development. The draft guidelines were strongly supported and passed at the Committee level in March 2024, then submitted to the Executive Committee of Codex for critical review, with a recommendation for accelerated approval.

In the next and final step, the Guidelines for Food Hygiene Control Measures in Traditional Markets for Food were officially adopted by the Codex Alimentarius Commission in Geneva in November 2024. The whole process, from the initial request to final adoption, took only two and a half years - an unusually swift adoption that suggests strong recognition of the need for pragmatic, science-based guidance on addressing food hygiene in traditional markets.

## Guidelines that align with real world opportunities and constraints

At about 10 pages of text (excluding definitions and background), the guidelines provide guidance on policies and regulations, infrastructure, provision of essential services (e.g., water and adequate toilet facilities), licensing, and registration. They also cover requirements for hygiene among operators of food businesses and the role consumers can play in demanding safe food, handling food hygienically, and making informed purchase choices.

Based on known best practices, some of the guideline recommendations, such as regular handwashing with soap and appropriate cold storage of food, may prove challenging to apply in poorly resourced settings. However, the guidelines are based on proven practice: if governments, market vendors, and/or consumers adopt them, this is likely to lead to significant improvements in food safety. The guidelines also include specific suggestions to support adoption; for example, authorities are advised to use food hygiene handling 'do's and don'ts' posters in markets, with simple messages and pictures.

At the adoption, there was widespread enthusiasm for the guidelines, with many countries from across the world—from Argentina to Zambia, Benin to Vanuatu—speaking in support of them. Countries stressed the critical food security and economic importance of traditional markets, the practicality and widespread applicability of the guidelines, and the roles that can be played by various stakeholders. In its statement of support, the African Union described the guidelines as 'a critical milestone to address challenges in traditional markets... central to food security, livelihoods, and economic activity across Africa.'



### BARRIERS AND ENABLERS TO CHANGE

ENABLERS	BARRIERS
<p>Development and adoption of the guidelines was facilitated by:</p> <ul style="list-style-type: none"> <li>• <i>Widespread recognition of importance of traditional markets in livelihoods and food access, especially for vulnerable communities</i></li> <li>• <i>A strong, evidence-based case for the importance of addressing foodborne disease in traditional food markets</i></li> <li>• <i>Evidence of proven best practices to address food hygiene and safety in traditional markets</i></li> <li>• <i>Strong precedents in existing Codex guidelines and standards</i></li> <li>• <i>A process inclusive of many different member states</i></li> <li>• <i>Strong championing of their development and adoption by both high and low- and middle-income countries</i></li> </ul>	<p>Barriers faced included:</p> <ul style="list-style-type: none"> <li>• <i>Historic under-recognition of the importance of foodborne illness when compared to other public health challenges</i></li> <li>• <i>The need to navigate a complex, multi-step process of adoption</i></li> <li>• <i>Challenges in balancing 'best practices' with feasibility in poorly resourced contexts</i></li> <li>• <i>Process led by member states and not necessarily inclusive of other stakeholder types</i></li> <li>• <i>Some recommendations will be phased in or remain out-of-reach due to lack of necessary infrastructure and essential services, management challenges related to informality, unregistered vendors and unapproved markets, and shortage of food hygiene skilled vendors and aware consumers</i></li> </ul>

## Conclusion

The Codex guidelines are only one step in a multipronged effort to address food safety in traditional markets. It will be essential to translate these global guidelines into local policies and regulations at the municipal level and to invest in complementary actions needed to support their implementation – like infrastructure, uninterrupted provision of essential services, inclusion of registered and unregistered vendors, and food hygiene training for food business operators. Inclusive governance processes are crucial to ensure that implementation of the guidelines is attentive to the diverse local realities of market stakeholders. However, effective inclusive governance across government levels and involving multiple stakeholders, like market leaders and vendors, is a recognised food systems challenge. Nevertheless, the guidelines offer a strong example of global policy cooperation to address a key food system challenge while keeping in mind the unique challenges and opportunities of lower-resource settings. Development of the guidelines depended upon a strong evidence base demonstrating the importance and scale of the problem and feasible ways to address it, as well as an international process for drafting and adoption inclusive of diverse member states. If well implemented, the guidelines can help support vendor livelihoods, increase food safety, optimise access to food for energy and nutritional needs, improve consumer trust in traditional markets, reduce food waste, and contribute to public health.



This case study was produced by Stella Nordhagen and Ann Trevenen-Jones based on a paper by Caroline Smith DeWaal and Ann Trevenen-Jones. We thank the former and present GAIN colleagues G.M. Reza Sumon, Charles Opiyo, Maureen Muketha, Augustine Okoruwa, Ariel Carsow, Edrieno Sutarjadi, Elisabetta Lambertini, Steve Godfrey, and Saul Morris for their contributions to the work. This work was produced through the Nourishing Food Pathways programme, which is jointly funded by:



Co-funded by  
the European Union



german  
cooperation

DEUTSCHE ZUSAMMENARBEIT



**Irish Aid**

An Roinn Gnóthaí Eachtracha  
Department of Foreign Affairs



Ministry of Foreign Affairs



Schweizerische Eidgenossenschaft  
Confédération suisse  
Confederazione Svizzera  
Confederaziun svizra

Swiss Agency for Development  
and Cooperation SDC

The findings, ideas, and conclusions presented in this publication are those of the authors and do not necessarily reflect positions or policies of GAIN or any of the agencies mentioned above.

## Resources:

Grace. 2015. Food Safety in Low and Middle Income Countries. *International Journal of Environmental Research and Public Health*.

Nordhagen et al. 2022. Integrating nutrition and food safety in food systems policy and programming. *Global Food Security*.

DeWaal and Trevenen-Jones. 2025. Guidelines for food hygiene in traditional markets. *GAIN Discussion Paper #17*.

Jaffee and Henson. 2024. Promoting Food Safety in the Informal Markets of Low and Middle-Income Countries. *Food Protection Trends*.

Weinroth et al. 2018. History, development, and current status of food safety systems worldwide. *Anim Front*.

Havelaar et al. 2015. World Health Organization Global Estimates and Regional Comparisons of the Burden of Foodborne Disease in 2010. *PLOS Medicine*.