

## 2 関係機関表敬時のコメント等(参考)

### 1.関係各機関表敬時のコメント

#### ・DTEC

本調査団派遣前より周辺国への技術移転のための準備を開始しており、(評価を待たずに次のステップに進んだという意味では)先行している感じではあるが、評価をPCM手法により、システムティックに行うことは大切であるとのコメントがあった。

#### ・保健省

当方から、我が国がタイからの輸入食品にも依存していることなどについての謝辞を述べた。医科学局長より、タイにおいても国内の食品の安全確保を考えるにあたり、周辺国から輸入される食品が急増している状況下で、これらの食品衛生の管理が不可欠となってくる。更にこの事実にかんがみ、周辺国への技術移転については、対象国における食品衛生の強化のためだけでは、もはやないことが述べられた。また、食品衛生の向上及び、食品の安全確保の運気が世界的に高まってきており、米国・EUからWHO等の国際機関に至るまで、食品衛生の改善策を議論する場を設け、同方策に基づき努力しようとしているところである。このことは、今ではどの国においても、一国単位では解決し得ないことを示しているとの指摘があった。

#### ・JICA タイ事務所

延長の主目的にGLPの強化があげられていたが、その達成度の評価はどのように行われているのかという質問について、南団員から、まず初めにマニュアルの有り無しと、同マニュアルに基づき、業務を行っているのかどうか、判断材料となるということを説明した。更に周辺国参加型セミナー(一部団員が最終日のみ参加)について、どのような議論が行われたのか、また、カウンターパートの発表の様子などに関する質問に対しては、北村チーフアドバイザーより、両局の副局長によるプレゼンテーションと、施設見学時の担当部長による説明があった。いずれも問題なく当初の予定を達成したとの説明があった。

所長からは、最近ヴェトナム計画投資省の幹部と協議した際の経験を一例として、タイのように、援助国自身が南南協力による協力を、要望している事実についての指摘があった。我が国の人的資源が限定され、また一方で技術移転を強く要望する国が多いことを考えると、このような事実は歓迎すべきであり、また、これを支えていく必要がある旨の見解が示された。更に、これに関連し、個別派遣専門家以外にも第三国専門家や、シニアボランティアなど、活用可能なスキームがあるとのコメントが述べられた。

また、団長から、今後、個別専門家派遣による協力を行う場合、技術と行政の専門家を2名長期で派遣することが望ましいとの指摘があった。

## 2. ワークショップ、協議の経過 (M / M、合同評価報告書別添)

ワークショップは時間的、先方の人力的な制約、及びプロジェクト内での事前の擦り合わせがある程度できていることを踏まえ、通常の協議と同様の形式をとった。

「提言 (Recommendation)」の項を除き、プロジェクトの達成度や今後の方向性などの基本的事項に関する認識の相違は見られず、データの訂正 (例：マニュアルの数等) や文・語句の微修正が主となった。また、M / M についても同様であった。

Recommendation の項については、プロジェクト終了後に本格展開される見込みの第三国への技術移転を進めるにあたり、タイ側の十分な準備が必要である旨の一文について議論が集中した。先方は「タイ側 (the Thai side)」とした当方の案について、「双方 (both sides)」もしくは「関係各機関 (the concerned parties)」とするよう希望した。

これに対し、一方で1年間の延長期間における協力によって、タイ側が第三国への技術移転可能なレベルに到達したという評価をした、他方、我が国を含めた「双方」もしくは「関係各機関」が、周辺国への技術移転のための、準備をすべきであるというところまで踏み込み、調査団としての提言を行うことは困難である旨を説明した。更にタイ側が提案した「関係各機関・・・」の一文を「その他」の項目として、「タイ側は TCNC プロジェクトが成功裡に実施されるよう、全関係機関により支援されるべきであるとの提言をし、調査団はこの提言を日本に持ち帰り、各関係機関に伝える」とすることで合意を得た。

## 3. 終了までの活動及び周辺国への技術移転に向けてのスケジュール

1999 (平成 11) 年度予算により、計画中の広域技術協力活動の一環として 2000 年 3 月に、タイの専門家を対象国 (承認されていたうち、現在の所ペンディングとなっているミャンマーを除くカンボディア、ラオスの 2 か国) に派遣する見込みと聞いている。これにより、延長の最終的な目標であった周辺国への技術移転に向けての第一歩を踏み出したものと考えている。

今後は、タイ側がプロジェクト終了後も、個別派遣専門家として、引き続き活動される予定の北村チーフアドバイザーの助言を得るなど、合同評価報告書の提言を実行していくことが求められる。

## 4. その他

食品衛生分野では、表敬・協議や合同委員会で関係局長などからも発言があったように、その性格上、裨益が非常に広汎にわたり、また効果が見えやすいことから、協力の意義は高いと考えられる。

したがって、被援助国からの要望にできる限り応えていくことが理想的なのである。しかし、すべての要望に対し、我が国からの直接の援助で応えることは、予算面などからもまず、人材の確

保から事実上不可能である（特に本分野は、OB を含む厚生省あるいは、その関連団体からの人材確保が必要となるため、プロ技については同時に 2 研を実施することが極めて困難である）。

上記事情にかんがみ、今後は本プロジェクトをモデルとしつつ、更にプロジェクト開始当初から南南協力を実施することが必要であると考えられる。

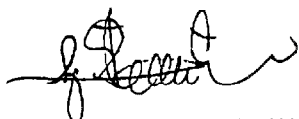
**Minutes of Discussions**  
**The First Seminar of Technical Cooperation Activities for Neighbouring**  
**Countries (TCNC)**  
**7-9 December 1999**  
**At the Department of Medical Sciences, Ministry of Public Health**  
**Nonthaburi, Thailand**

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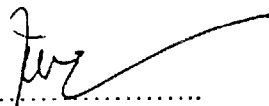
Taking account of the provisions of the Project for Strengthening of Food Sanitation Activities, which is a six-year project started from April 1994 to March 2000 supported by Japan International Cooperation Agency (hereinafter referred to as JICA), Thailand, represented by the Department of Medical Sciences (hereinafter referred to as DMS) and Food and Drug Administration (hereinafter referred to as FDA), organized this First Seminar on the Technical Cooperation Activities for Neighbouring Countries (hereinafter referred to as TCNC) with an aim to promote food sanitation in Lao People's Democratic Republic, Cambodia and Myanmar. The seminar has been participated by the representatives from Lao PDR, Cambodia, Thailand, and JICA Thailand Office.

As a result of discussions, all parties concerned agreed to recommend to their respective Governments the matters referred to in the document attached hereto.

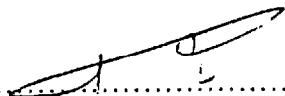
Nonthaburi, 9 December 1999



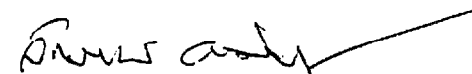
.....  
( Dr. Harushi Kitamura )  
Chief Advisor,  
Project for Strengthening of Food  
Sanitation Activities, JICA



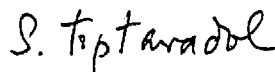
.....  
( Dr. Nam Nivanna )  
Representative from Cambodia



.....  
( Dr. Bounlonh Ketsouvannasane )  
Representative from  
Lao People's Democratic Republic

  
for .....

( Prof. Dr. Pakdee Pothisiri )  
Director-General,  
Department of Medical Sciences



for .....

( Dr. Narong Chayakul )  
Secretary-General,  
Food and Drug Administration



.....  
( Mr. Banchong Amornchewin )  
Representative from Department of  
Technical and Economic Cooperation,  
Witness

## THE ATTACHED DOCUMENT

**7 December 1999**

### Session I : Opening Ceremony

- Mr. K. Iwaguchi, Resident Representative, JICA Thailand Office, and Dr. Siriwat Tiptaradol, the Deputy Secretary-General of FDA, gave remarks that the idea of this TCNC Seminar derived from the Project of the Strengthening of Food Sanitation Activities, which has been implemented in Thailand by the cooperation of JICA since 1994 covering the areas of laboratory diagnosis and consumer protection. The project gained a good deal of success. The main purpose of this seminar was to introduce those results of success and share the experience with neighbouring countries for good quality of food in each country.

- Dr. Chakradharm Dharmasakti, the Deputy Director-General of DMSc, delivered remarks on behalf of the Organizing Committee of the Seminar. He expressed his thanks for JICA's support, and referred to the objective of this seminar which aimed to promote the technical cooperation among neighbouring countries, i.e. Thailand, Cambodia, Lao PDR, and Myanmar. A number of extremely serious outbreaks of foodborne diseases occurred in recent years. Many of the challenges, however, could be handled by the cooperation and technology transfer among neighbouring countries to promote the good health of people which is one of the most important elements for national development.

- Dr. Sucharit Sriprapandh, the Permanent Secretary of Ministry of Public Health, and the Chariman of the seminar, gave his speech on the modern concept of food control via the approach of close partnership among government regulators, food industries and consumers to ensure the national food control system and the efficiency and effectiveness of food control resources. By virtue of good relationship among the citizens of Lao PDR, Cambodia, Myanmar, and Thailand, the Ministry of Public Health of Thailand fully supported this TCNC to the goal of improving the quality of life concerned with food control and food safety in neighbouring countries. He then declared the opening of the seminar.

### Session II

- Mr. T. Usui, the Coordinator of the Project for Strengthening of Food Sanitation Activities, introduced the programme of TCNC, which is to develop food sanitation in terms of consumer protection, under the management of a committee composed of DMSc, FDA, DTEC and JICA project. There are four steps of activities in this project as follows:

1. Visit neighbouring countries for the understanding of TCNC.
2. Invite administrative officers of neighbouring countries to join a seminar in Thailand, which was this specific activities in these three days.



3. Send Thai experts to share the technology and experiences.
4. Invite middle-level staffs from neighbouring countries for technology improvement.

- Mr. Makoto Kanie, the Food Sanitation Administration Expert, gave details of the health and food sanitation administration in Japan including food sanitation law.

### Session III

Dr. H. Kitamura, the Chief Advisor of Project for Strengthening of Food Sanitation Activities, briefed the details of cooperation provided to Thailand under his responsible project covering the period from 1994 through 2000. Under the project, Mrs. Supatra Imerb, Principal Medical Scientist of DMSc, and Thai coordinator of the project, provided the details of activities handled by DMSc, while Dr. Siriwat Tiptaradol, the Deputy Secretary-General of FDA, gave information on the consumer protection activities of FDA.

- Participants made an on site visit at the Divisions of Food and Food-for-Export of DMSc. A mobile car of FDA was also observed.

### 8 December 1999

The participants visited Drinking Water Pilot Plant at Mahidol University, Salaya; Frozen Food Factory at Samut-Songkram, and the Regional Medical Sciences Center at Samut-Songkram

### 9 December 1999

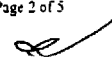
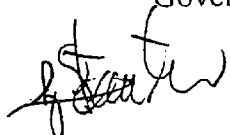
#### Session I

#### **- Country Report by the representative from Cambodia:**

Dr. Nam Nivanna, the Deputy Director of the National Laboratory for Drug Quality Control, said that Cambodia has encountered environmental pollution problems, which affected the food and dietary system of the country. The problems had many facets, such as pollution of soil, water, and air. Food Safety Office has been established in April 1998 in the Department of Drug and Food at Ministry of Health. It is responsible for food registration, inspection and consumer protection.

#### **- Country report by the representative from Lao PDR:**

Dr. Bounlonh Ketsonvannasane, Director of Food Control Division, stated that the agricultural production is natural and semi natural characteristics. Small farms remain the basic source of food. In 1996, the food industry has gradually developed, but only 30 plants out of 53 have been registered with the Government authorities. The value of food exported was 22 thousand US\$,



while that of imported was over 25 million US\$ a year. Food and Drug Administration Commission is the authorities taking charge of the quality of food and drug distributed in the country. In food safety aspect, diseases related to food borne agents, especially diarrhea, were the leading cause of morbidity in the country due to the lack of funds and expertise to perform the risk assessment. Poor sanitation of food suppliers and personal hygiene were the major causes of contamination. The food control problems varied from unqualified and expired products, to lack of capacities and equipment of the food control authorities. In summary, the incompleting implementation of food safety in Lao is due to:

- Lao PDR has no food law.
- Food control infrastructure is ineffective
- The essential food standards are not available.
- The capabilities of inspectors and analysis are limited and lack of experiences.
- The facilities such as laboratory equipment, reagents, materials and vehicle are not enough because of the limited government budget.

### Session III : Group Meeting on Details for Cooperation

From the discussions of all participants, the problems and requirements of Lao PDR, and Cambodia can be summarized as follows:

#### Lao PDR

Problems of the current situation:

1. Food law has not yet been implemented.
2. Government authorities in food control system lacks of intensive cooperation.
3. The government is short of the necessary elements in improving the food safety, such as equipment, technical know-how, experience, and budget, etc.
4. People lack of consumer awareness.

The requirements requested:

- **Experts** (4 persons) in the fields of

	Duration
1. Water analysis in microbiology and chemistry	Jan./Feb. 2000
2. The restructure of government authorities	Jan./Feb. 2000
3. National food safety	-
4. Review existing food control system	Jan./Feb. 2000
5. Revise draft of Food Regulations	Jan./Feb. 2000

- **Training** (4 persons) in the areas of

	Duration
1. Quality control of drinking water (microbiology and chemical)	Feb. 2000
2. Microbiology analysis in food	Mar. 2000
3. Chemical analysis in food	-
4. Inspection techniques	Feb. 2000
5. Food regulations system	Feb./Mar. 2000
6. GMP, GLP and HACCP	-
7. National food safety	-
8. Review existing food control system	Feb. 2000
9. Revise draft of Food Regulations	Feb. 2000

- **Equipment and materials**

	Duration
1. Food test kits	Feb./Mar. 2000
2. Spectrophotometer	-
3. Media and reagent for microbiology and chemical analysis for food composition	-
4. Equipment for protein and fat determination	-
5. HPLC for preservative and alcohol	-
6. GC for pesticides	-
7. Inspection tools	-

- **Information support** for public education in food safety and consumer awareness

### Cambodia

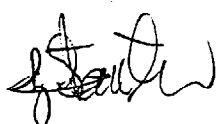
Problems of the current situation:

- Lack of food control system

The requirements requested:

- **Experts** in the fields of

	Duration
1. National food safety programme setup	1 week in Feb. 2000
2. Food hygiene control	1 week in Feb. 2000
3. Food microbiological analysis	1 week in Feb. 2000
4. Food chemical analysis	1 week in Feb. 2000



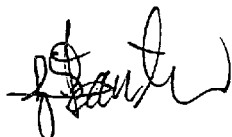



- **Training** in the areas of:

	Duration
1. Food administration (2 persons)	2 weeks
2. Food hygiene (1 person)	2 weeks
3. Food chemical (1 person)	2 weeks

- **Equipment and materials**

1. Top loaded balance
2. Oven
3. Test kits
4. Safety cabinet
5. Autoclave



AGENDA  
Meeting of the Joint Coordinating Committee  
Of the Project for Strengthening of Food Sanitation Activities  
4-1 / 1999  
December 16, 1999  
10.00 – 12.00 hours

at the Conference Room No. 801, Eighth Floor, Building 8, DMSc.  
Ministry of Public Health, Nonthaburi

- I. Chairman welcomes Japanese Evaluation Team and introduces members of JCC to Japanese Team ( Attachment no. 1 – names of JCC members )
- II. Speech by Japanese Team Leader ( Prof. Dr. T. MARUYAMA ) After that Prof. Dr. Maruyama will introduce his members to JCC ( Attachment no 2 – names of Evaluation Team including JICA Team )
- III. Matter to be acknowledged  
A summary of the achievement of the project for Strengthening of Food Sanitation Activities ( by Secretary of the Project : Dr. Chakradharm Dharmasakti )  
( Attachment no. 3 )
- IV. Other Business  
Signing Ceremony and Exchanging of Signatures in the Minutes of Meeting  
( Attachment no. 4 )
- V. Adjournment

NAMES OF JCC MEMBERSThai side

1. Dr. Sutcharit Sriprapandh Permanent Secretary, Ministry of Public Health,  
**Chairman**
2. Prof. Dr. Pakdee Pothisiri Director – General of DMSc,  
Member
3. Dr. Narong Chayakula Secretary – General of FDA,  
Member
4. Ms. Amara Vongbuddhapitak Senior Expert, DMSc.,  
Member
5. Mrs. Chantana Jutiteparuk Senior Expert, FDA,  
Member
6. Mr. Banchong Amornchewin Chief of Japan Sub-Division, DTEC,  
Member
7. Representative, Division of International Health,  
Member
8. Dr. Siritwat Tiptaradol Deputy Secretary – General, FDA,  
Member
9. Dr. Chakradharm Dharmasakti Deputy Director – General, DMSc,  
Member and Secretary
10. Mrs. Supatra Im-erb Principal Scientist, DMSc.  
Member and Assistant Secretary,
11. Mr. Prakai Boriboon Director of Food Division, DMSc.,  
Member and Assistant Secretary

รายชื่อกรรมการ JCC ฝ่ายไทย

1. นายแพทย์สุจริต ศรีประพันธ์ ปลัดกระทรวงสาธารณสุข, **ประธาน**
2. ศ. ดร. ภักดี โทธิศิริ อธิบดีกรมวิทยาศาสตร์การแพทย์, กรรมการ
3. นายแพทย์ ณรงค์ ฉายากุล เลขาธิการคณะกรรมการอาหารและยา, กรรมการ
4. นางสาวอมรา วงศ์พุทธพิทักษ์ ผู้ทรงคุณวุฒิด้านวิทยาศาสตร์การแพทย์, กรรมการ
5. นางฉันทนา จุติเทพารักษ์ ผู้ทรงคุณวุฒิ, สำนักงานคณะกรรมการอาหารและยา  
กรรมการ
6. นายบรรจง อมรชีวิน หัวหน้าฝ่ายญี่ปุ่น, กรมวิเทศสหการ, กรรมการ
7. ผู้แทนกองสาธารณสุขต่างประเทศ, กรรมการ
8. นายศิริวัฒน์ ทิพธาราดล รองเลขาธิการคณะกรรมการอาหารและยา, กรรมการ
9. นายแพทย์จักรธรรม ธรรมศักดิ์ รองอธิบดีกรมวิทยาศาสตร์การแพทย์  
กรรมการและเลขานุการ
10. นางสุภัทรา อัมเอิบ ผู้เชี่ยวชาญด้านความปลอดภัยของอาหาร  
กรรมการและผู้ช่วยเลขานุการ
11. นายประกาย บริบูรณ์ ผู้อำนวยการกองอาหาร, กรรมการและผู้ช่วยเลขานุการ

Japanese side

Names of Japanese for JCC on December 16,1999.

- |                          |                                   |
|--------------------------|-----------------------------------|
| 1. Dr. Tsutomu MARUYAMA  | Team Leader                       |
| 2. Mr. Shunsaku MINAMI   | Midwifery Education               |
| 3. Ms. Fumiko YAMADA     | Cooperation Planning              |
| 4. Mr. Shigeru KOBAYASHI | Project Evaluation                |
| 5. Mr. Harushi KITAMURA  | Chief Advisor                     |
| 6. Mr. Makoto KANIE      | Long Term Expert of FDA           |
| 7. Mr. Tetsuro USUI      | Coordinator                       |
| 8. Mr. Yoshitaka SUMI    | Deputy Resident Representative    |
| 9. Mr. Gen USUI          | Assistant Resident Representative |



Machinery / equipment : total **95,137,742 Baht**  
(1999/2000 : 6,270,000 Baht)  
Cost sharing for local activities : **25,090,897 Baht**  
(1999/2000 : 5,000,897 Baht)

**Thai side**

Personnel : DMSc 101 persons  
FDA 54 persons  
Buildings : JICA Project Office at DMSc, as the main office, and  
at FDA  
Operating budget ; DMSc total 61,984,891 Baht ( from 1994 –  
1998, in which cost of building was included )  
971,268 Baht (from April 1999 – March 2000)  
Grand total **62,956,159 Baht**

8. Project evaluation results

Project efficiency : considerably high and the project has obtained the intended outputs to a satisfactory degree

Effectiveness : considerably high

Impact : high, and the direct impacts of the project have produced a food sanitation training center in the near future; the indirect impacts have produced food safety for consumers

Relevance : very high

Sustainability : high and reaching sufficient level

All the outputs such as food control activities are strengthened, the hygiene management by food factories becomes sufficient and consumers awareness for food sanitation is improved.

ATTACHED DOCUMENT

1. Confirmation of the Joint Evaluation Report
  - 1.1 The Joint Coordinating Committee of the Project confirmed the Joint Evaluation Report, which was prepared and submitted by the Team and the Thai side.
  - 1.2 Both sides agreed that the Project has obtained:
    - A) a considerably high level of efficiency and effectiveness;
    - B) a several direct and indirect positive impacts on Thai consumers and manufacturers as well as the implementing agencies and other government organizations;
    - C) a sufficient level of laboratory technology with GLP and also skill and knowledge of technology on food sanitation, which may allow the Thai side to establish a food sanitation training center for Southeast Asian countries.
    - D) a significantly high level of relevance;
    - E) a sufficient level of sustainability
2. Measures to be taken during the remaining technical cooperation period
  - 2.1 Both sides agreed that the following measures are necessary during the remaining technical cooperation period stipulated in the Record of Discussions (hereinafter referred to as the "R/D").
  - 2.2 Measures to be taken by the Japanese side
    - 2.2.1 To continue the technical transfer by the following Japanese long-term experts:

A) Chief Advisor*	(until March 31, 2000)
B) Coordinator	(until March 31, 2000)
C) Food Sanitation Administration	(until March 31, 2000)

Note: The present chief advisor will be continually dispatched as an individual expert.
    - 2.2.2 To dispatch Japanese short-term experts upon request by the Thai side for Japanese fiscal year 1999/2000.
    - 2.2.3 To provide the equipment requested by the Thai side for Japanese fiscal year 1999/2000.

2.2.4 To accept Thai personnel concerned with the Project for training in Japan in the fields of:

- A) Food Sanitation
- B) GLP and Quality Control in Laboratory

2.3 Measures to be taken by the Thai side  
To provide all the necessary inputs as agreed upon in the R/D.

3. Recommendations

3.1 For the remaining technical cooperation period and for the future orientation of the Department of Medical Sciences (DMSc) and the Food and Drug Administration (FDA), Ministry of Public Health, the Team and the Thai side recommended that:

- A) Input by Japanese side, such as short-term experts, provision of equipment and counterpart training and budget should be done on schedule.
- B) There are 71 laboratories which haven't introduced GLP yet in DMSc. The Team recommended that DMSc should introduce GLP in these 71 laboratories.
- C) Although FDA and DMSc improved their abilities through the project activities, some more information and technical transfer are still needed.

4. Others

Seminars on technical cooperation activities were held for the benefit of neighbouring countries. The Thai side recommended that the TCNC project should be supported by all concerned parties in order that the implementation can be carried out successfully.

The Japanese side has promised that they will convey the above message to the authorities concerned in Japan.



Tentative Programme  
1st Technical Cooperation Activities for  
Neighbouring Countries (TCNC) Seminar  
December 7-9, 1999  
Department of Medical Sciences : Room 801, 8th Floor  
Ministry of Public Health, Tiwanon Road  
Nonthaburi, Thailand

**December 7, 1999**

- |                 |  |
|-----------------|--|
| 8: 00 - 8: 30   | - Registration   |
| 8: 30 - 9: 00   | - Opening Ceremony<br>* Remarks by <i>Mr. K. Iwaguchi, Resident Representative, JICA Thailand Office</i><br>* Remarks by <i>Dr. Narong Chayakul, Secretary-General, Food and Drug Administration, Ministry of Public Health, Thailand</i><br>* Remarks by <i>Dr. Chakradharm Dharmasakti, Deputy Director -General, Department of Medical Sciences, Ministry of Public Health, Thailand</i><br>* Opening Address by <i>Dr. Sutcharit Sriprapandh, Permanent Secretary, Ministry of Public Health, Thailand</i> |
| 9: 00 - 10: 00  | - Group Photograph<br>- Press Conference   |
| 10: 00 - 10: 15 | - Coffee Break   |
| 10: 15 - 10: 30 | - Introduction to the 1st TCNC Seminar by <i>Mr. T. Usui, Coordinator, Project for Strengthening of Food Sanitation Activities</i>   |
| 10: 30 - 12: 00 | - Introduction of Health Administrative System/ Food Sanitation<br>* Japan by <i>Mr. M. Kanie, Long Term Expert , Project for Strengthening of Food Sanitation Activities</i><br>* Thailand by <i>Prof. Dr. Pakdee Pothisiri, Director-General, Department of Medical Sciences, Ministry of Public Health, Thailand</i>  |
| 12: 00 - 13: 00 | - Lunch by <i>DMSc</i>   |
| 13: 00 - 14: 00 | - Food Sanitation Project by <i>Mr. H. Kitamura, Chief Advisor, Project for Strengthening of Food Sanitation Activities</i>  |

- 14: 00 - 15: 15 - Food Sanitation Activities by *Dr. Chakradharm Dharmasakti, Deputy Director-General, Department of Medical Sciences, Ministry of Public Health, Thailand*
  - \* DMSc Laboratory Activities Observation by *Mr. Prakai Boriboon, Director of Food Division, Department of Medical Sciences, Ministry of Public Health, Thailand*
- 15: 15 - 15: 30 - Coffee Break
- 15: 30 - 16: 45 - Food Sanitation by *Dr. Siritwat Tiptaradol, Deputy Secretary-General, Food and Drug Administration, Ministry of Public Health, Thailand*
  - \* FDA Mobile Unit Activities Demonstration by *Ms. Tipvon Parinyasiri and Ms. Parichut Junplung, Food Control Division, Food and Drug Administration Ministry of Public Health, Thailand*
- 18:30 - Dinner *hosted by JICA*

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***December 8, 1999***

- 7: 00 - 8: 30 - Depart Hotel to Salaya
- 8: 30 - 10: 30 - Study Visit : Drinking Water Pilot Plant at Salaya
  - \* Coordinator :
    - *Dr. Wisit Jawasit, Deputy Director, Institute of Nutrition, Mahidol University, Thailand*
    - *Ms. Parichut Junplung and Mr. Chatchai Tungsuwan, Food and Drug Specialist, Food and Drug Administration, Ministry of Public Health, Thailand*
- 10: 30 - 11: 30 - Depart for Samut - Songkram
- 11: 30 - 13: 00 - Lunch
- 13 : 00 - 15: 00 - Study Visit : Frozen Food Factory at Samut- Songkram
  - \* Coordinator : *Mrs. Chanchai Chaengsawang, Director of Food-for-Export Division, Department of Medical Sciences, Ministry of Public Health, Thailand*
- 15: 00 - 17: 00 - Observation of Regional Laboratory at Samut-Songkram
  - \* Coordinator : *Mrs. Supatra Im-erb, Principal Medical Scientist, Department of Medical Sciences, Department of Medical Sciences, Ministry of Public Health, Thailand*

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**December 9, 1999**

- 9: 00 - 10: 30 - Country Reports chaired by *Dr. Chakradharm Dharmasakti, Deputy Director-General, Department of Medical Sciences, Ministry of Public Health, Thailand*  
\* Cambodia  
\* Laos
- 10: 30 - 10: 45 - Coffee Break
- 10: 45 - 11: 15 - Country Reports (continue)  
\* Myanmar
- 11: 15 - 12: 00 - Discussion
- 12: 00 - 13: 00 - Lunch
- 13: 00 - 15: 30 - Group Meeting  
\* The participants will be divided into 3 groups to discuss on "Details for Cooperation"  
Topic : - Experts  
- Training Needs  
- Equipment  
- etc.  
\* Group 1 : Cambodia  
- Coordinator : *Ms. Churairat Rungrojanarak*  
*Mrs. Supatra Im-erb*  
\* Group 2 : Laos  
- Coordinator : *Ms. Orapin Kampeepat*  
*Ms. Anchan Suntichaikul*  
\* Group 3 : Myanmar
- 15: 30 - 16: 00 - Presentation and Discussion chaired by *Dr. Siritwat Tiptaradol, Deputy Secretary-General, Food and Drug Administration, Ministry of Public Health, Thailand*
- 16: 00 - 16: 15 - Report Endorsement
- 16: 15 - 16: 30 - Closing by *Dr. Pakdee Pothisiri, Director-General, Department of Medical Sciences, Ministry of Public Health, Thailand*
- 16:30 -Free

.....

Contact person: Thai Coordinator : *Mrs. Supatra Im-erb, Tel. 951-1422*  
JICA Coordinator : *Mr. T. Usui, Tel. 951-1430*

**Project for Strengthening of Food Sanitation Activities  
Joint Coordinating Committee Meeting**

**4-1 / 1999**

**16 December 1999, 10.00-12.00 Hours**

**DMSc, Room No. 801: Building 8**

**Nonthaburi**

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**Welcome Speech**

**by**

**Prof. Dr. Pakdee Pothisiri**

**Director – General, Department of Medical Sciences**

**Ministry of Public Health**

**Prof. Dr. Maruyama,  
Mr. Kitamura,  
Mr. Sumi,  
Dr. Narong,  
Ladies and Gentlemen,**

It is great pleasure for me to welcome the Japanese Evaluation Team of the Project for Strengthening of Food Sanitation Activities to Thailand and take part in the Fourth Meeting of Joint Coordinating Committee. I hope that all of you had a pleasant journey and that you enjoy your stay in Thailand.

I am pleased to note that relations between the Kingdom of Thailand and Japan have become more multi-faceted, such as the frequent exchanges of visits between Thai and Japanese officials at all levels, and the close people-to-people contacts that both our countries enjoy.

Looking backwards the past, in 1994 that the Project for Strengthening of Food Sanitation Activities has started its activities in order to promote health protection programmes related to food sanitation for the people of Thailand. The purpose of this project is to assure the safety and sanitation of food produced and distributed in Thailand. This project is the technical cooperation between the Government of the Kingdom of Thailand and the Government of Japan undertaken by DMSc. and FDA of the Ministry of Public Health. The duration of technical cooperation is five years at the beginning, and it is extended for one year from April 1999 to March 2000.

The achievement of the project is successful implementation and the laboratory technology and knowledge on food sanitation are disseminated not only to Thailand but also to neighbouring countries that are LaoPDR, and Cambodia, in terms of technology transferring of TCNC programme held on 7-9 December this year.

Ladies and Gentlemen, on behalf of the Ministry of Public Health, I am very grateful to all who have made this success and I have every reason to be confident that Japanese Government assistance to Thailand in the six- year project of Strengthening of Food Sanitation Activities is meaningful and fruitful. I am also especially grateful and would like to express my sincere thanks to Evaluation Team for your valuable contribution throughout the period of the 2-day of PDM- evaluation. I hope that the spirit of close cooperation between our two countries will be further enhanced through cooperation in other areas.

Please convey to the Japanese Government and **JICA** our heartfelt thanks and sincere appreciation for the valuable support extended to Thailand and Thai people.

Finally, I would like to wish you and your team a safe and pleasant journey on your trip back to Japan and we hope we will see all of you again.

Thank you.

## Country Report Form

**Country Report  
of  
Technical Cooperation Activities  
for  
Neighboring Countries (TCNC) Program 1999**

**Name of Country : Cambodia**

**Name of Participant : Pau Ann Sivutha**

**Present Position : Chief of food safety office**

**Name of Organization : Department of Drug,  
Food, Medical Devices  
and Cosmetics**

## COUNTRY REPORT

Distinguish Delegates  
Ladies and Gentlemen

On behalf of Cambodian's delegation, may I first take this opportunity to express my appreciation to JICA Food sanitation Project, Thailand for providing financial support to join a meeting of Technical Cooperation activities for Neighboring Countries.

In connection with sharing our idea to cooperate in terms of food sanitation we would like to introduce ourself as the following : the Royal Kingdom of Cambodia is located in the southeast Asian region ( Indochina ), bordered with Thailand, Laos, Vietnam and the gulf of Thailand with a total population of approximately 11 million living in a territory of 181,035 square Kilometer.

The Kingdom of Cambodia is the tropical country with reasonable climate. The temperature ranges from 25°C to 30°C. Sometimes the temperature might reach 37°C at the hotter time of year which is April. The coolest time of year is mid- December through January when the temperature is 19°C. Cambodia depends on agriculture with most 80% of the population being Farmers and there are about 60% of total cultivated land for rice cultivation and 40% of total area for diversified crops. Cambodia people plant the rice, rubber and other crops : potatoes, corn, beans and other vegetables.

Environmental pollution problem in Cambodia is rapidly changing due to the high growth of population and unplanned growth of urban population, indiscriminate and excessive use of pesticides and insecticides, which contaminated the agricultural food products, fish and livestock produces. The pesticide and insecticide residue in food, water and soil is alarmingly high. Water pollution due to fecal contamination and industrial wastes, has made some of the river water unfit for human use and to support the life system. Some heavy metals of under ground water, normally used for drinking and agriculture have created a big threat for the safety of dietary system. Air pollution has been contaminating both and processed foods.

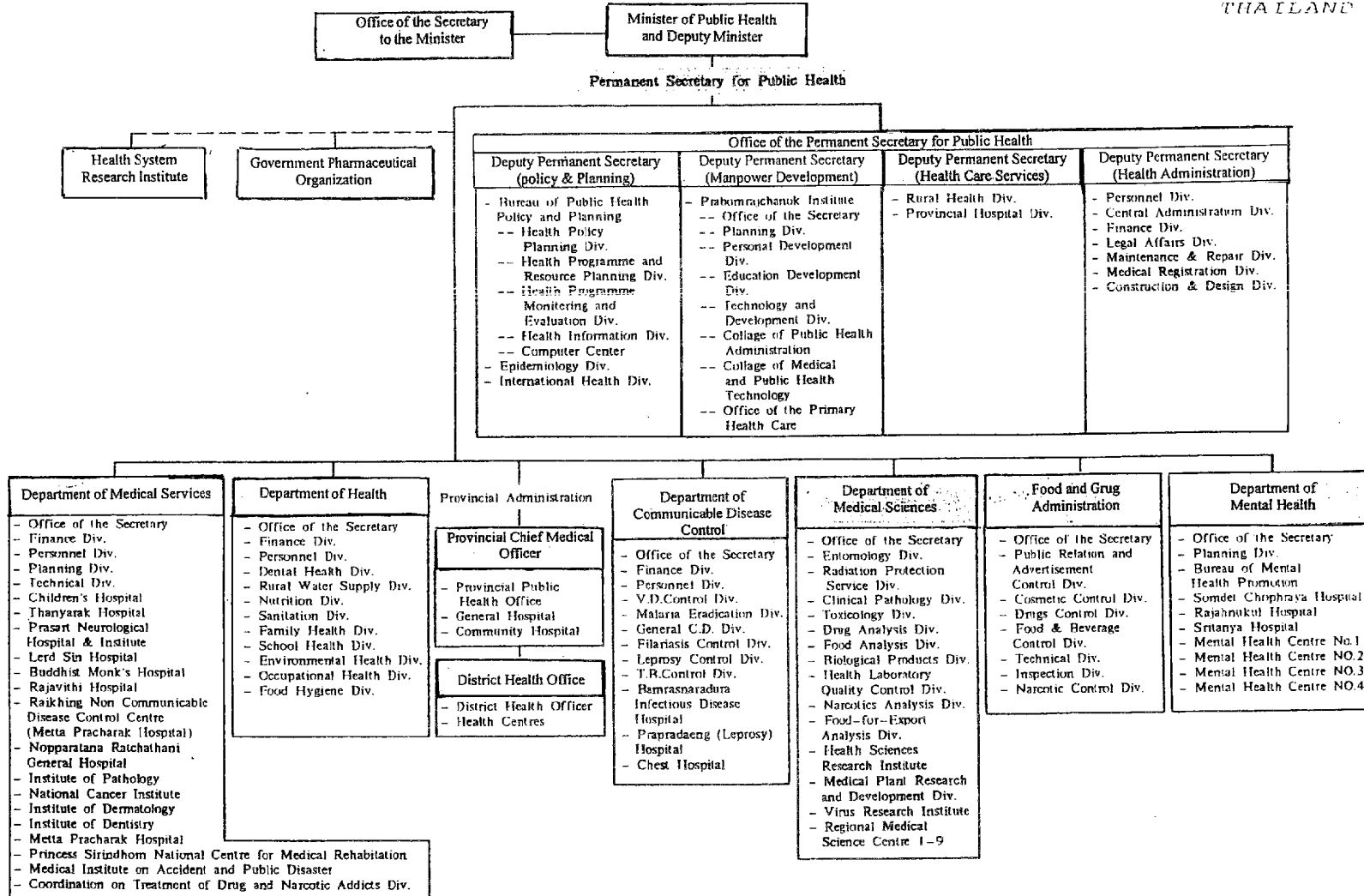
Cambodia is a country nourished by the nature and depends entirely on nature's activity like rainfall, river flows, sun ray etc. for resources to survive and develop. By and large, the people thrive on agricultural occupation. The

middle, small industrial sector is yet to play a decisive or dynamic role in the nation's economic framework. The prevailing state of environment in Cambodia is not difficult to perceive. Compared to the developed and industrialized countries, the magnitude of environmental pollution in Cambodia is relatively less. But the state of the environment is rapidly deteriorating which can be attributed to the alarmingly high rate of population growth in the country. To meet the increasing basic demand of the people, the economic activity has increased manifold ultimately creating multiple environmental problems. So far the environmental problems of the country have many facets, such as pollution of soil, water, air and all these collectively, affect the food and dietary system of the country. The effects are spread from every steps of food production in the field, food processing, marketing and to the dining table. The contamination of agricultural food products by various sources poses a big cambodian public health problem. Indiscriminate use of pesticides and fertilizers in agriculture showed an objectionable amount of pesticides residues in soil, water, food and feeds. The import and manufacture of cheap insecticides and their mislead use in the country causes major environmental contamination and increases the risk of food safety. The insecticide residues in food, soil and water cause big environmental pollution ultimately creating health hazards for all living system including human. The water of rivers and ponds is contaminated in a number of ways. Among those fecal contamination is most dangerous. Water is not only wholly unfit for drinking but also unfit for washing utensils. Now a day another notable source of water pollution is the waste from the fertilizer plant, dying industries and from some other chemical industries. The pollution decreases all the parameters of water quality needed for human and agricultural use. Among various poisonous pollutants, heavy metal is also notable. Food safety Office has been established in April 1998 in Department of Drug and Food at Ministry of Health. It consists of 3 Sections : Food Registration, Inspection and Consumer protection section and has 15 persons. They combine of Pharmacists and Food chemistry engineers. It will be responsible for manage, control the quality of variety of Food that are imported and local products in order to protect and ensure the health of consumers. The Department of Drug and Food cooperate closely with National Laboratory Control.



# ORGANIZATION CHART

THAILAND



## **Country Report Form**

**Country Report  
of  
Technical Cooperation Activities  
for  
Neighboring Countries (TCNC) Program 1999**

**Name of Country : Cambodia**

**Name of Participant : Nam Nivanna**

**Present Position : Deputy director**

**Name of Organization : National Laboratory  
for Drug Quality  
Control**



### Activities in 1999 :

In 1999 the laboratory tested 1065 samples .

Drug	939
Water	91
Alcohol	24
Other	11

### Technical assistance from other country for food sanitation :

From WHO we received

- Equipment : colorimeters with reagents kit for water analysis.
- Training :
  - Training on microbiological analysis of drinking water for a period of four weeks for one person .
  - Training on surveillance of salmonella and antimicrobial resistance in foodborne pathogens for a period of one week for one person.

### Specific fields of training needed :

- Quantitative determination of some main components in food products( sugar, protein..... )
- Identification and purity test for food additives
- Tests on plastics used for medical devices and food / drug packaging materials.
- Identification of food contaminants (e.g heavy metal, aflatoxin, pesticide residue ..... )
- Microbiological examinations of food.

### Duration :

- Physico- chemical analysis : 3 persons for 2 months
- Microbiological examination : 2 persons for 2 months

**Materials needs :**

- Some modern scientific equipments
- Reagents
- Documents related to food control ( standards of acceptance.....)

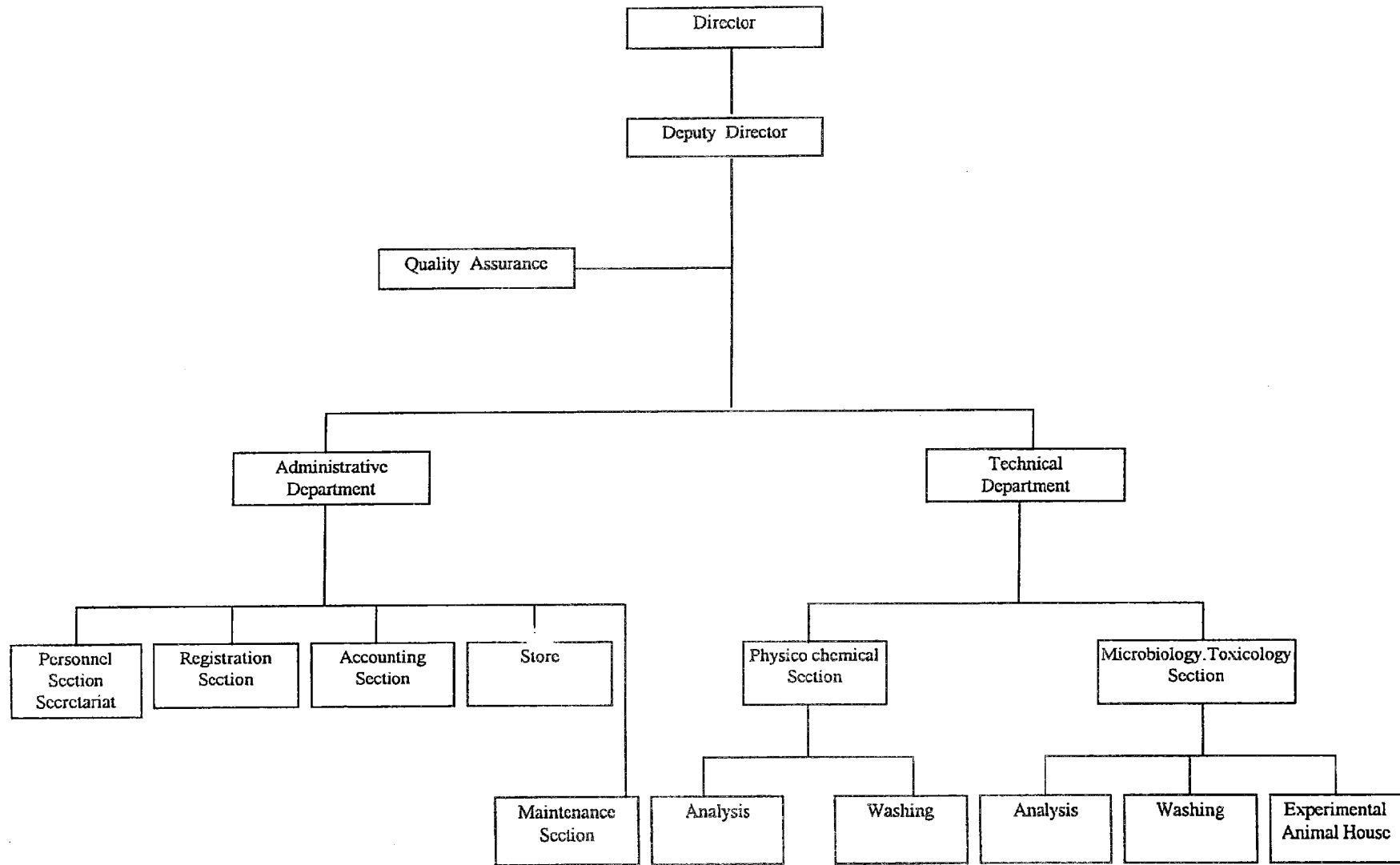
**Experiences :**

- Physico-chemical analysis of water.
- Microbiological analysis of water.
- Looking for methanol in alcoholic beverage.

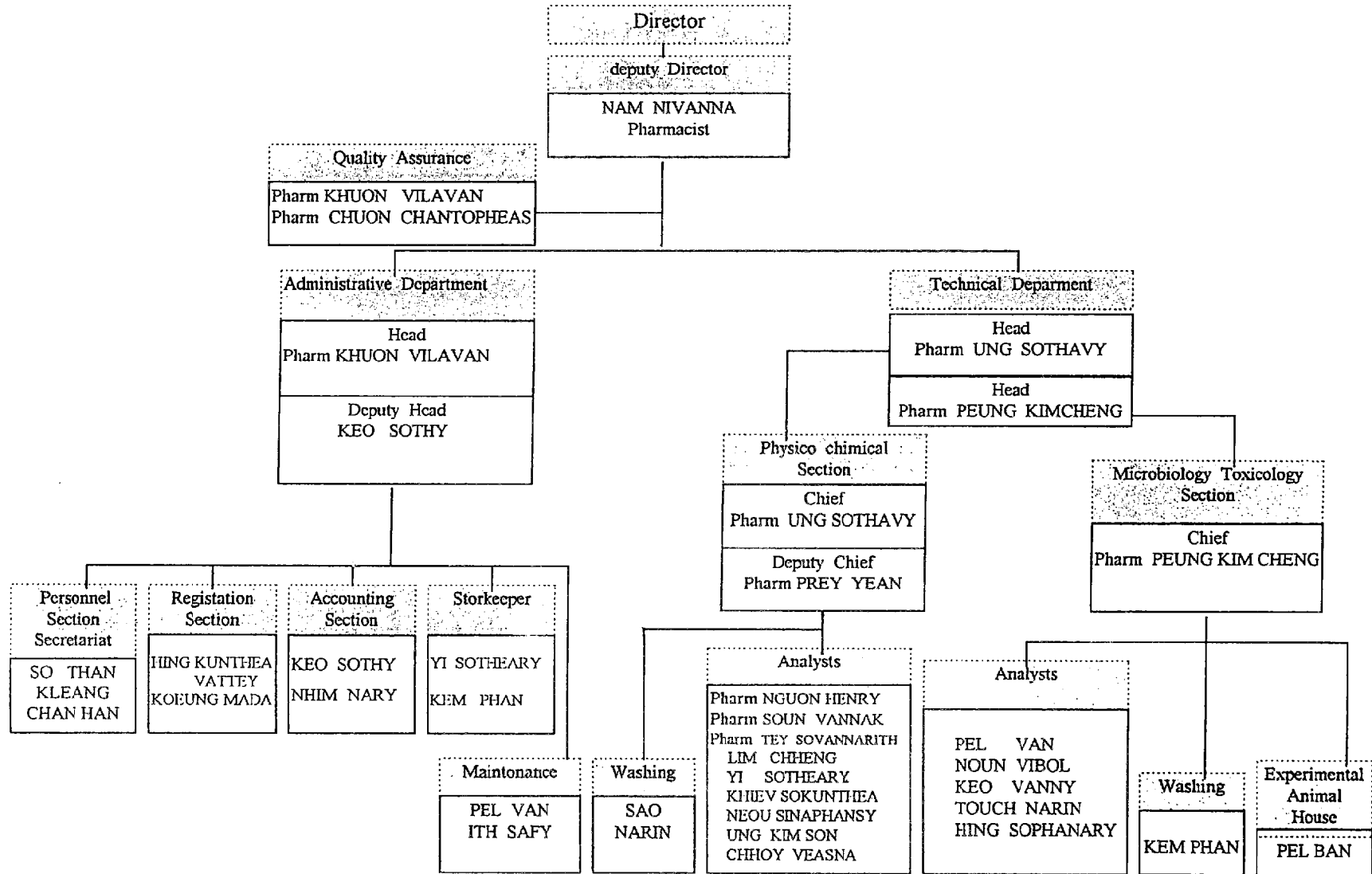
## ACTIVITIES ON FOOD PRODUCTS IN 1999

Type of samples	Nb of samples	Nb of violative samples	Chemical violation	Microbiological violation
Tap water	46	10	3	7
Drinking water	18	7		7
Ice	24	18		18
Water from other origins	3	2	1	2
Alcoholic beverage	24	11	11	

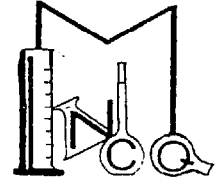
**អង្គការលេខបង្កើតសម្រាប់គ្រប់គ្រងគុណភាពគ្រឹះស្ថាន ១៥ តុលា ឆ្នាំ ១៩៩៩**  
**NATIONAL LABORATORY FOR DRUG QUALITY CONTROL PHNOM PENH CAMBODIA**  
**ORGANIZATION CHART 15 OCTOBER 1999**



**អង្គការលេខបង្កំពិសោធន៍គ្រួសារនិស្សគុណភាពគ្រឹះស្ថាន ១៥ តុលា ឆ្នាំ ១៩៩៩**  
**NATIONAL LABORATORY FOR DRUG QUALITY CONTROL PHNOM PENH CAMBODIA**  
**ORGANIZATION CHART 15 OCTOBER 1999**







No. .... មពតឌី

**PERSONNEL'S LIST OF NATIONAL LABORATORY  
 FOR DRUG QUALITY CONTROL  
 PHNOM PENH CAMBODIA**

N°	NAME	SEX	QUALIFICATION
1	NAM NIVANNA	Female	Doctor in Pharmacy
2	KHOUN VILAVANN	Female	Pharmacist with specialization in drug quality control
3	UNG SOTHAVY	Female	Pharmacist
4	POEUNG KIM CHENG	Female	Pharmacist
5	CHUON CHANTOPHEAS	Female	Pharmacist
6	PREY YEAN	Female	Pharmacist
7	TEY SOVANNARITH	Male	Pharmacist
8	CHEA YON	Male	Pharmacist
9	NGUON HENRY	Female	Pharmacist
10	SUON VANNAK	Female	Pharmacist
11	THOUK REMY	Female	Pharmacist
12	LEANG SOKHOM	Female	Pharmacist
13	TOP CHAN RASY	Female	Pharmacist's assistant
14	KONG MENG	Male	Pharmacist's assistant
15	KEO SOTHY	Female	Chemist's assistant
16	KAO PHALIN	Female	Chemist's assistant
17	LIM CHHENG	Female	Chemist's assistant
18	YI SOTHEARY	Female	Chemist's assistant

លេខ ៣៦ ផ្លូវហ្សឺអិចឌីមីត្រូវ ភ្នំពេញ កម្ពុជា  
 ទូរស័ព្ទ : (៨៥៥ ២៣) ៨៨០ ៧៣២  
 : (៨៥៥ ១២) ៨១០ ៧២០

NO 36 Georges Dimitrov Street Phnom Penh Cambodia  
 Tel (855 23) 880 732  
 Tel (855 12) 810 720

19	CHHOY VEASNA	Female	Chemist's assistant
20	KEO VANNY	Female	Chemist's assistant
21	ITH VORLAK	Female	Chemist's assistant
22	KHIEU SOKUNTHEA	Female	Chemist's assistant
23	KOEUNG MADA	Male	Administrative staff
24	SO THAN	Male	Administrative staff
25	NUON VIBOL	Male	Laboratory technician
26	HING KUNTHEA VATTEY	Female	Laboratory technician
27	PEL VAN	Male	Nurse
28	NEOU SINA PHANSY	Female	Nurse
29	OEUNG KIM SON	Female	Nurse
30	NHIM NARY	Female	Nurse
31	KUY KOSOMA	Female	Chemistry technician
32	KEM PHAN	Male	Laboratory worker
33	SAO NARIN	Female	Laboratory worker
34	KLEANG CHAN HAN	Female	Laboratory worker
35	HING SOPHANARY	Female	Laboratory worker
36	TOUCH NARIN	Female	Laboratory worker

Phnom Penh                      October 1999  
Deputy    Director

NAM NIVANNA

**Country Report  
Of  
Technical Cooperation Activities  
For  
Neighboring Countries (TCNC) Program 1999**

**Name of Country:** Lao People's Democratic Republic  
**Name of Participant:** Dr. Chittavong Siviengxay  
**Present Position:** Deputy Director of FDQCC  
**Name of Organization:** Food and Drug Quality Control Center  
Ministry of Health

**Lao People's Democratic Republic**  
**Peace Independence Democracy Unity Prosperity**



**Country Report**

**I General background**

1. Lao PDR is a small and landlocked country located in Indochina in South East Asia. Covering 236,800 square Km. and the population about 4,605 millions (1990). It has a low density of 19 inhabitants per square km. an annual growth rate of 2,6%. Life expectancy at birth is 53 years for females and 50 years for males. Rates vary dramatically according to the locality. Vientiane Municipality's rate at 62,6 years is twice as high as Sekong province's (one of Provinces in the South) at 35.3 years ( NSC 1994 )
2. Food Production system, indeed is very out of date. The harvest is fruitful or not, it's depending on the natural rain, there is shortage of irrigation. That means agricultural production is prominently natural and semi natural characteristics. Rice is the staple foodstuff for Lao people of all ethnic groups. The average of the production in the whole country is 2.63 tons/ha, estimated harvesting is around 1,577,000 tons/years. A part from that, the people also raise the animal e.g.: buffaloes, cattle, cheeps, pigs, poultry and a wide range of fruits and vegetables. Small, self-sufficient formers supplying urban markets with their excess products when available mainly provide food production. During recent years, changes in production economy and trade system have stimulated food production, but it is likely considered that small farms will remain the basic source of food in Lao society.
  - The estimated per capita income is about US \$ 370 in 1996 ranks Lao PDR as one of the world's twelve poorest countries. The structure of production and employment is dominated by subsistence agriculture, which accounts for about 65% of GDP and it is estimated that 85% of the population rely on farming practices.
3. Food industrial sector is small, contributing about 14% of GDP, and consists mainly of local raw materials, particularly food, meat, fruits, vegetables and consumer goods industries serving largely at Vientiane area.
  - In 1996, the government of Lao adopted policies embodied in its " New Econo- Mechanism" aimed to increase individual incomes and improve

living condition. Food industry has gradually developed which ranged from small home-plants to sophisticated processing and bottling line of Lao brewery and water bottling plants

- Based on the annual statistic in 1998, food plants in Lao PDR, mostly in big towns, are in a number of 780. The bottled water industry has had a major expansion in recent years. There are over 100 bottling plants in Lao PDR with 53 plants in Vientiane Prefecture alone. Only 30 plants in Vientiane are registers with FDD. Food product items are bakery, noodle, fresh milk, salt, fish-sauces, pickle in can, ice, beverage and agricultural processed products. But the food production is in an artisan scale (family level) with employees less than 10. Just only a few of them is an industrial scale with over 150 -200 employees. There is one can food plant in Laos, which produces cans of bamboo shoot, pickle, Zanzibar and baby corn.
4. Present status of food trade
- In 1997-98, the import-export provision companies have been reduced from 45 to 40. Various food are imported mainly from neighboring counties which consist by an average of 13 groups items. The major items imported included sugar, fruit and vegetable, flour and noodles, milk and dairy products, and alcoholic beverage and cigarettes. During one year, the value of food imports landed at Vientiane only was about over 28,000 tons in a value of over 25 million US\$, with majority of goods being sources from Thailand.
  - For food export, some half finished and finished products mentioned above are exported which comprise few items such as beer products, fruit juices and related products, cans of bamboo-shouts, pickled lettuce, ginger and baby corn and a number of raw materials such as: coffee beans, ground nut, maize and some kind of fruits. However, there are some food are informally exported. The quality of some exported food is formally documented through FDD in a number of 14,643 tons/year in a value of over 22 thousand US\$.

## **II General description of food safety.**

- 2.1 As result of outbreaks of food borne infections and intoxication represent a significant and continuing threat to the health and welfare of the population. Unfortunately the incidence of food transmitted diseases continue to increase, and we now have to contend with an expanded number of possible food borne diseases-As result of the lack of funds and expertise to perform the risk assessment which contribute to the lack of data collection and analysis information on food safety and food

borne disease. Only available health statistics indicate that borne diseases are the major cause of morbidity. Diarrhea diseases, frequently associated with food borne agents, are one of the leading causes of mortality particularly among children associated with food borne. Beside, the level of reporting and investigation of food borne disease is inadequate. This means that we do not have an accurate picture of the extent and impact of food poisoning, and it is far more common than most people would believe. Furthermore, surveillance of the food supply for contaminants is extremely limited. For example, we have no idea of the incidence of pathogens in the food supply, or the level of pesticide contamination of agricultural procedure, or heavy metals in fish etc... All may adversely impact on the safety of the food supply.

## **2.2 Health aspect of food safety**

- Foods borne diseases are a common experience among the Lao people. Health statistics confirms that diseases related to food borne agents are by far the leading cause of morbidity in the country. Diarrhea accounted for almost 10,421 reported cases during 6 month 1998.

The WHO estimated in a report that up to 70% of all cases of diarrhea are caused by food and additionally only a small fraction of the illness is recognized and reported as food borne in origin. Because food borne diseases are typically underdeveloped countries, the reporting rate is frequently only 10% of the actual number of cases.

- Among children in Laos, diarrhea diseases rank third as the cause of morbidity and mortality. Studies have demonstrated that a significant proportion of diarrhea cases is caused by contaminated food. As the number of children at risk increases, the need to implement basic food safety programs becomes more urgent.

## **2.3 Extent of food safety problems**

- A large segment of the population exists on a subsistence economy. Up to 85% of the people live in rural areas and very little of the food they eat passes through distribution channels. Even in urban areas, only a small proportion of meals is consumed outside the home. Generally, the urban diet is composed of few processed or semi-processed foods. Consequently, the most frequent cause of food borne diseases is mishandling in the home. While certain traditional food sites, like "lap" which is made from raw meat, contribute to the problem, lack of appreciation for food safety and personal hygiene is the major underlying cause of food contamination.
- Markets, restaurants, and street vendors operate under unsatisfactory sanitary conditions with little guidance from health authorities. Food is

often displayed on the ground with insect contamination being common. Likewise, health authorities for the purpose of advising managers on basic food safety measures do not currently visit food-processing facilities. In most plant visited, sanitation was considered a general responsibility and, consequently sanitation was often poor. In plant quality assurance program generally need strengthening. Managers do not fully recognize the essential role of food safety in assuring both the safety and quality of the final product.

- The extent of chemical contamination of food has not been reported. Preliminary studies by the National Institute of Hygiene, Epidemiologies, and Microbiology have detected the presence of aflatoxin on cereals and other foods. Report of acute aflatoxin poisoning animals indicates that the problem may be severe. Export shipments of coffee and certain spices must be certified to be free of such contamination prior to shipment. Because import data on pesticides is incomplete, the potential for contamination of food with residues of pesticides is not known. Because of the low level of industrial development, contamination by industrial chemicals and heavy metals is expected to be low.

#### **2.4 Extent of Food control problems**

- There are some problems which might be solved such as: decomposed food, expired food, sub-standard or false beverage and food and etc... Beyond half-finished products using as ingredients or food additives, variety of sweets is not complied to specific standards.
- Provisions or domestically finished food products are also not enough complied to standards such as; drinking water, fruit sauces, soybean sauces, vinegar, soft drink and some kind of drinks have been used synthetic colors in over formal concentration; adding food preservatives in a high dose. Additionally saccharin and other synthetic-sweetening agents have been used in high doses.
- Labeling of these above products is not enough clear in mentioning the composition and address of manufactures in avoiding the official staff inspection. Some import products could not be sold, their labels have been changed or falsified the trademark in order to play tricks on the people.
- Distribution or circulated food products stored in shops, mini markets such as can meat, can fish, milk products are exceeded the expiration date, rusty, distorted, swelled are still laying down for selling which are unsafe for the health of consumers.

- Though the food and drug department is implementing a food quality control network, it is still hindered by a lack of food inspectors and food analysis capacities. Consumers are not ~~to~~ sufficiently informed and do not know their rights with regards to safe food.
- The recent situation in Laos has shown, there are a lot of problems occurring every day by importers, domestically manufactures and retailers. They must parallels responsible for their own product parallels with the official organization.
- However, food and drug control agency could not be able <sup>To</sup> ~~to~~ inspect and control the quality of food perfectly in the whole country without the cooperation of consumers, national and international agencies.

### **III Laboratories**

There are three main laboratories located in Vientiane, which are responsible to carry out of physical, chemical and biological analysis food samples collected by food inspectors:

- Food and Drug Quality Control Center, Ministry of Health is staffed with pharmacists with limited experience in food analysis. However, ~~so~~ them have received training in food analysis and could increase the level of work if provided with sufficient and effective equipment. This is the main laboratory to issue certification of analysis for food processors and conduct quality assessment for the FDD. It analyses approximately 400 samples of food and water annually. Microbiological and Chemical testing protocols are based upon the Association of Official Analytical Chemists (AOAC) procedures.
- Food and Drug Analysis center of Vientiane Municipality also operates a food and drug control laboratory, which is staffed with laboratory staffs. This also participates in performing chemical and microbiological analyses.
- Laboratory is mainly carried out of pesticide and parasite analyses of the fruits, vegetable and meats.

However, all laboratories mentioned above could increase their capacity if properly resources with modern equipment, fresh chemicals and reagents, and standard method of analysis are available.



#### **IV Food Control Structure.**

Food and Drug Administration Commission (FDA)

In June 1991, FDA has been established, comprising with 9-member representative from following ministries:

- Ministry of Health.
- Organization of Science Technology and Environment.
- Ministry of Trade.
- Ministry of Agriculture and Environment.
- Ministry of Finance.
- Ministry of Industry and Handicrafts.
- Ministry of Interior.

Minister of Health is nominated as the chairman of the Commission. It has set up an organization, called "Food and Drug Department" (FDD) located with in Ministry of Health. The Director General of FDD acts as the permanent secretary of the Commission. Its task are manage, control the quality of variety of Food and Drug which are imported and domestically produced in order to protect the population rights, without the hazards, ensuring the health of consumers. FDD carries out all activities of the commission. This later has a meeting once month.

Also, the senior representatives from other ministries are shared in these activities such as:

The Organization of Science Technology and Environment is responsible to search the information on Food and Drug technology focusing on the new products.

Ministry of Agriculture and Forestry is involved in controlling chemicals, fertilizers and pesticides using for agriculture and livestock which could damage to health and life of consumers.

Ministry of trade is responsible for the circulation of food and drug throughout the country.

Ministry of Finance is participating in controlling the customs tasks and the financial affairs.

Ministry of Industry is participating in inspecting the industrial production by cooperating with the related sector to control the quality of products.

## Resources

### Food and Drug Department and Food and Drug Provincial sub-Division

Previous the permanent bureau of FDA was called " Food and Drug permanent Bureau". In 1994 in order to solve the overlap task, this bureau has been jointed with Department of Pharmacy and became " Food and Drug department". There are two of its seven divisions such as Food Control Division and Food and Drug Inspection Division is carrying out of all kind of Food Control activities in the country.

There are 15 personal staffs working in two division including Directors and Vice-directors. Almost all of them are pharmacists but just few of them have been trained in short and middle terms in food field. Only one is a Biochemist and one is nutritionist. Food and Drug inspectors are in a number of 10.

Various food control efforts at domestic, export and import levels are undertaken by FDD in cooperation with Food and Drug provincial Sub-division (Provincial Health services) with 3-5 Food and Drug inspectors in each province.

#### V Technical assistance from other country.

##### **1. WHO**

Under DAP/001 project provided local cost for workshop on Food inspection and setting up the curriculum on Food safety and Nutrition for Assistant-pharmacy College and Faculty of pharmacy. In addition some food inspectors got scholarship for short term in Thailand.

##### **2. FAO**

Under TCP/2355T, provided the technical assistance including: Draft Food Law, Training food inspectors and analysts both for local and international particularly in Thailand, some equipment for food analysis laboratory but no vehicles and inspection tools.

##### **3. Other**

CDG- Germany provided medium term training for 9 food inspectors in Germany. But no inspection tools.

## **VI Specific field of training and duration needs**

1. Food analysts both chemical and biological at least 3 months of duration.
2. Food inspectors of all kind inspection with necessary inspection tools and vehicles.
3. Microbiological Laboratories with basic equipment for regional sectors (Luangphabang and Champasak Provinces)

## **VII Conclusion**

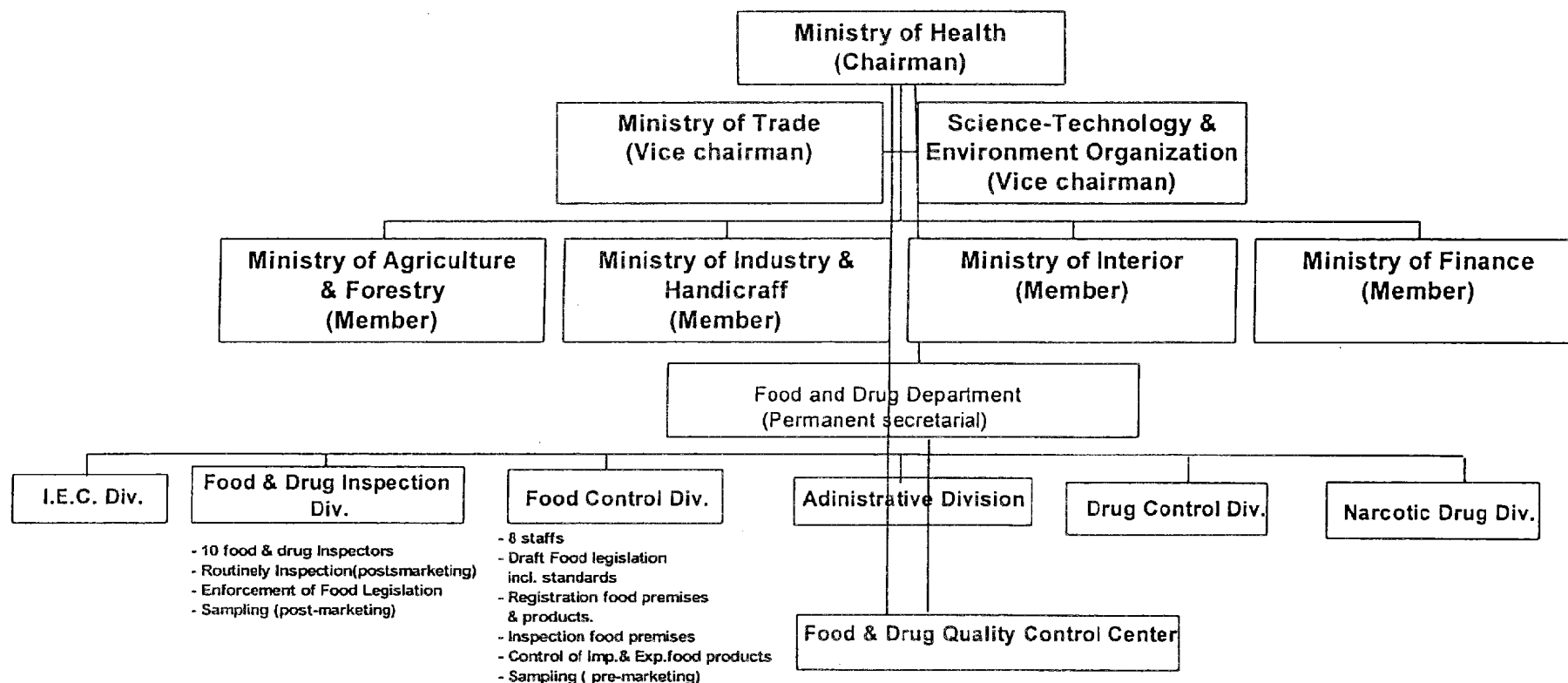
In conclusion, I would like to say that at present food safety in Lao is not completely implemented due to:

- Laos has no food law.
- Food control infrastructure is ineffective
- The essential food standards are not available.
- The capabilities of inspectors and analysis are limited and lack of experiences.
- The facilities such as laboratory equipment, reagents, materials and vehicle are not enough because of the limited government budget.

Through this opportunity, I would like to call for the international agencies in both technical assistance and financial support in order to assist as to strengthen the food control structure and to acquire good and partial guidance.

I wish the workshop would be successful.

## Organization chart of Food Control structure Food and Drug Administrative Commission (FDA)



## Organization chart of Food Control Structure

