



## **Terms of Reference for the Foodborne Disease Burden Epidemiology Reference Group (FERG)**

### **1. Burden of foodborne diseases**

Foodborne diseases are a major cause of human morbidity and mortality. According to the global estimates from the WHO Foodborne Disease Burden Epidemiology Reference Group (WHO FERG), foodborne diseases caused 600 million illnesses, 420,000 deaths, and 33 million Disability Adjusted Life Years (DALYs) in 2010. Foodborne diseases disproportionately adversely impact children. According to the WHO FERG estimates, although children <5 years of age represent only 9% of the global population, 40% of the foodborne disease burden is borne by children in this age group. There are also considerable differences in the burden of foodborne diseases among sub-regions with the highest burden per population unit observed in Africa. While this WHO report produced the first-ever global estimates of the burden of foodborne diseases, there were significant gaps in data to be more accurate in estimating the burden in large parts of the world.

### **2. History of WHO Foodborne Disease Burden Epidemiology Reference Group**

In 2006, the (then-) Department of Food Safety and Zoonoses launched the initiative to Estimate the Global Burden of Foodborne Diseases at an international consultation aimed to assemble, appraise and report on the burden of foodborne disease estimates. In 2007, WHO Director-General appointed 40 advisory panel members to establish a first Foodborne Disease Burden Epidemiology Reference Group (FERG). In total, 8 global meetings were organized between 2006–2014. The objectives of the first FERG were to:

- strengthen the capacity of countries in conducting burden of foodborne disease assessments and to increase the number of countries who have undertaken a burden of foodborne disease study;
- provide estimates on the global burden of foodborne diseases according to age, sex, and regions for a defined list of causative agents of microbial, parasitic and chemical origin;
- increase awareness and commitment among Member States for the implementation of food safety standards;
- encourage countries to use burden of foodborne disease estimates for cost-effective analyses of prevention, intervention and control measures.

The final global report of FERG was published in 2015, based on 2010 data.<sup>1</sup> As this global data requires an update, WHO plans to regularly monitor, and to report to Member States on, the global burden of foodborne diseases at national, regional and international levels, and in particular to prepare an updated report on the global burden of foodborne diseases with up-to-date estimates of

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<sup>1</sup> <https://www.who.int/publications/i/item/who-estimates-of-the-global-burden-of-foodborne-diseases>

global foodborne disease incidence, mortality and disease burden in terms of disability-adjusted life years (DALYs). For this purpose, WHO has decided to reactivate the Foodborne Disease Burden Epidemiology Reference Group (the “FERG”) to provide WHO with technical advice in these subjects.

## **I. Functions**

In its capacity as an advisory body to WHO, the FERG shall have the following functions:

1. Advise WHO on the methodology to estimate the global burden of foodborne diseases
2. Review epidemiological data on foodborne disease burden
3. Identify technical gaps and priorities for research activities
4. Make recommendations to WHO on the establishment of task forces and other means through which scientific and technical matters are addressed
5. Advise WHO on the development of and the methodology to monitor food safety-related indicator(s)

## **II. Composition**

1. The FERG shall have up to 20 members<sup>2</sup>, who shall serve in their personal capacities to represent the broad range of disciplines relevant to the burden of foodborne diseases. In the selection of the FERG members, consideration shall be given to attaining an adequate distribution of technical expertise, geographical representation and gender balance.
2. Members of the FERG, including the Chairperson, shall be selected and appointed by WHO. The Chairperson's functions include the following:
  - to chair the meeting of the FERG;
  - to liaise with the WHO Secretariat between meetings.

In appointing a Chairperson, consideration shall be given to gender and geographical representation.

3. Members of the FERG shall be appointed to serve for a period of 3 years and shall be eligible for reappointment. A Chairperson is eligible for reappointment as a member of the FERG, but is only permitted to serve as Chairperson for one term. Their appointment and/or designation as Chairperson may be terminated at any time by WHO if WHO's interest so requires or, as otherwise specified in these terms of reference or letters of appointment. Where a member's appointment is terminated, WHO may decide to appoint a replacement member.

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<sup>2</sup> Members serve as full participants and partake in the decision-making process of FERG meetings.

4. FERG members must respect the impartiality and independence required of WHO. In performing their work, members may not seek or accept instructions from any Government or from any authority external to the Organization. They must be free of any real, potential or apparent conflicts of interest. To this end, proposed members/members shall be required to complete a declaration of interests form and their appointment, or continuation of their appointment, shall be subject to the evaluation of completed forms by the WHO Secretariat, determining that their participation would not give rise to a real, potential or apparent conflict of interest.
5. Following a determination that a proposed member's participation in a FERG would not give rise to a real, potential or apparent conflict of interest, the proposed member will be sent a letter inviting them to be a member of the FERG. Their appointment to the FERG is subject to WHO receiving the countersigned invitation letter and accompanying letter of agreement.
6. As contemplated in paragraph II.4 above, WHO may, from time to time, request FERG members to complete a new declaration of interest form. This may be before a FERG meeting or any other FERG-related activity or engagement, as decided by WHO. Where WHO has made such a request, the FERG member's participation in the FERG activity or engagement is subject to a determination that their participation would not give rise to a real, potential or apparent conflict of interest.
7. Where a FERG member is invited by WHO to travel to an in-person FERG meeting, WHO shall, subject to any conflict of interest determination as set out in paragraph II.6 above, issue a letter of appointment as a temporary adviser and accompanying memorandum of agreement (together 'Temporary Adviser Letter'). WHO shall not authorize travel by a FERG member, until it receives a countersigned Temporary Adviser Letter.
8. FERG members do not receive any remuneration from the Organization for any work related to the TAG. However, when attending in-person meetings at the invitation of WHO, their travel cost and per diem shall be covered by WHO in accordance with the applicable WHO rules and policies.

### **III.      Operation**

1. The FERG shall normally meet at least once each year. However, WHO may convene additional meetings. FERG meetings may be held in person (at WHO headquarters in Geneva or another location, as determined by WHO) or virtually, via video or teleconference.

TAG meetings may be held in open and/or closed session, as decided by the Chairperson in consultation with WHO.

- (a) Open sessions: Open sessions shall be convened for the sole purpose of the exchange of non-confidential information and views, and may be attended by Observers (as defined in paragraph III.3 below).
  - (b) Closed sessions: The sessions dealing with the formulation of recommendations and/or advice to WHO shall be restricted to the members of the FERG and essential WHO Secretariat staff.
- 2. The quorum for FERG meetings shall be two thirds of the members.
- 3. Representatives from intergovernmental organizations, as well as non-state actors in official relations with WHO, and members of other technical advisory groups of the WHO may be invited by WHO to attend open sessions of FERG meetings, or parts thereof. For the purposes of these terms of reference, such invitees will be referred to as "Observers". WHO, at its discretion, may request Observers to complete a declaration of interests form prior to attending any FERG meeting. Observers shall attend meeting of the TAG at their own expense and be responsible for making all arrangements in that regard.

At the invitation of the Chairperson, Observers may be asked to present the views and policies of their organization. Observers will not participate in the process of adopting decisions and recommendations of the FERG.

- 4. The FERG may decide to establish smaller working groups (sub-groups of the FERG) to work on specific issues. Their deliberations shall take place via teleconference or video-conference. For these sub-groups, no quorum requirement will apply; the outcome of their deliberations will be submitted to the FERG for review at one of its meetings.
- 5. FERG members are expected to attend meetings. If a member misses two consecutive meetings, WHO may end his/her appointment as a member of the FERG.
- 6. Reports of each meeting shall be submitted by the FERG to WHO (the Assistant Director-General of the responsible Cluster). All recommendations from the FERG are advisory to WHO, who retains full control over any subsequent decisions or actions regarding any proposals, policy issues or other matters considered by the FERG.
- 7. The FERG shall normally make recommendations by consensus. If, in exceptional circumstances, a consensus on a particular issue cannot be reached, minority opinions will be reflected in the meeting report.

8. Active participation is expected from all FERG members, including in working groups, teleconferences, and interaction over email. FERG members may, in advance of FERG meetings, be requested to review meeting documentation and to provide their views for consideration by the FERG.
9. WHO shall determine the modes of communication by the FERG, including between WHO and the FERG members, and the FERG members among themselves.
10. FERG members shall not speak on behalf of, or represent, the FERG or WHO to any third party.

#### **IV. Secretariat**

WHO shall provide the secretariat for the FERG, including necessary scientific, technical, administrative and other support. In this regard, the WHO Secretariat shall provide the members in advance of each meeting with the agenda, working documents and discussion papers. Distribution of the aforesaid documents to Observers will be determined by the WHO Secretariat. The meeting agenda shall include details such as: whether a meeting, or part thereof, is closed or open; and whether Observers are permitted to attend.

#### **V. Information and documentation**

1. Information and documentation to which members may gain access in performing FERG related activities shall be considered as confidential and proprietary to WHO and/or parties collaborating with WHO. All proposed members will be required to sign an appropriate confidentiality undertaking and provisions on ownership.
2. FERG members and Observers shall not quote from, circulate or use FERG documents for any purpose other than in a manner consistent with their responsibilities under these Terms of Reference.
3. WHO retains full control over the publication of the reports of the FERG, including deciding whether or not to publish them.