Kayla Boner 1993–2007 | Died from Unknown Food

Eric Rosenwald 1912–1992 | Died from Oysters

Kevin Kowalcyk 1998–2001 | Died from Hamburger

Nellie Napier 1928–2009 | Died from Peanut Butter

Henry Knam 1910–1999 | Died from Orange Juice

Clifford Tousignant 1930–2009 | Died from Peanut Butter

Lauren Rudolph 1986–1992 | Died from Hamburger

Shirley Almer 1936–2008 | Died from Peanut Butter

Alex Donley 1987–1993 | Died from Hamburger

Ashley Rose Platt 2001–2005 | Died from Unknown Food

Abby Fenstermaker 2002–2009 | Died from Hamburger

Carolyn Hawkinson 1932–2006 | Died from Meatballs

Aly Rigoni 1996–1999 | Died from Unknown Food

Bobby Ray Hullett 1940–2008 | Died from Peanut Butter

Kyle Allgood 2003–2006 | Died from Spinach

Zella Ploghoft 1927–2010 | Died from Chiles Rellenos

Jacob Francisco 1997–2004 | Died from Unknown Food

Donna Hayward 1939–2009 | Died from White Pepper

Draak den Dekker 1975–1992 | Died from Pizza

Brooke Fisher 1997–2000 | Died from Hamburger
All of these people died because of something they ate. How the safety net failed them—and how to protect your family.
Kayla Boner celebrated her 14th birthday, on October 22, 2007, by getting her driver’s permit. There was no school that day—the teachers had a special training session—and Kayla impatiently kept calling her mother at work (“like a hundred times,” her mom, Dana, jokes) to remind her about the test that afternoon. “Kayla was a typical teenager,” Dana recalls. “She talked on her cell phone too much and argued about her curfew.” But she also was a good student, was involved in church activities, and played a sport every season—volleyball, basketball, softball. And she was an unusually thoughtful daughter. “She’d get home from school before I was back from work,” says Dana, “and she’d make sure the house was totally clean, even the kitchen.” What’s more, Kayla always had fresh flowers in a vase on the table for her mom. “They might have been lilacs from the garden, or even just dandelions,” says Dana, “but she knew how much I liked them.”

After Kayla got her driver’s permit that Monday afternoon, however, something odd happened: Instead of begging to get behind the wheel, she asked to go home because she didn’t feel well. Her stomach hurt that evening, and she stayed home from school the next day. “I assumed she had the flu,” says Dana. But Kayla’s symptoms quickly turned serious. She developed bloody diarrhea early Wednesday morning and was admitted to the local hospital. The doctors thought she had C. difficile—a nasty bacterial infection—and treated her with antibiotics. Indeed, Kayla seemed to be getting better when suddenly, the following Monday, her kidneys shut down. “She needs to go on dialysis,” the doctors told Dana and her husband, Rick; late that night, Kayla was transferred to Blank Children’s Hospital in Des Moines, about 40 miles from their home in Monroe, IA. Dana rode in the ambulance and was relieved that Kayla was still talkative on the trip.

At the hospital, lab results from the end of the previous week finally came through, and the Boners learned what was actually making Kayla so sick: an E. coli infection that had led to hemolytic uremic syndrome (HUS). This devastating complication occurs when E. coli bacteria from contaminated food lodge in the digestive tract and churn out toxins that go on to shred red blood cells, clogging tiny blood vessels in the kidneys. Sick as she was, Kayla still worried about her mother. “She told me she was sorry,” says Dana, who tried to reassure her daughter. “I said, ‘Honey, it’s OK. This is what mommies do.’”

Nothing seemed to help. Late Tuesday night, Kayla started dialysis. But by Wednesday, she was lethargic and confused, and then she had a seizure and had to be put on a ventilator. On Friday, November 2, she developed a racing heart and soaring blood pressure and had a series of small strokes that left her brain-dead. “Then we had to make the hardest decision of our lives,” says Dana. “We had to let our little girl go.”

With the life support disconnected, surrounded by everyone she loved—her parents; her sister, Kristin; her boyfriend and his parents; her aunt; her grandparents; and her minister, reading a prayer—Kayla died at 10 o’clock in the morning. “I had a very healthy child,” says Dana Boner. “Ten days later, she was gone.”

Adding to Dana’s grief were two mysteries that have never been solved: First, health officials have been unable to discover exactly which food made Kayla sick. Dana suspects it was a packaged pizza that was recalled around the time of her daughter’s death, but that was never proven. The second mystery is one that affects not just the Boner family, but the entire nation: Why hasn’t the government banned the culpable organism—later identified as E. coli O111—from the food supply? The U.S. Department of Agriculture (USDA) has long known it’s dangerous, yet it has not been placed in the highest-risk **continued on page 220**
No matter how strict the laws, food will always carry some contaminants. That means you need to practice due diligence when you’re preparing food or eating out. Here’s a checklist to get you started.

1. **POULTRY**
2. **LEAFY GREENS**
3. **BEEF**
4. **DAIRY**
5. **FRUITS & NUTS**
6. **TOMATOES & CUCUMBERS**
7. **PORK**
8. **FISH**
9. **EGGS**
10. **MOLLUSKS**
11. **BEANS & GRAINS**

**IN THE SUPERMARKET**

Prioritize your shopping.
- Pick up canned and packaged foods first, then fresh items.
- Keep raw meat away from other edibles, since its packaging could be leaky.
- Check that the produce cooler is cold. “Many food-borne bugs thrive in warmer temperatures,” says Trevor Suslow, Ph.D., an extension research specialist at UC Davis.
- Keep a cooler with ice packs in your trunk. In order to prevent pathogens from multiplying, food should not be at room temperature or above for more than two hours, as can happen if you have a long drive or are making several stops.
- Don’t assume greenmarket fare is always safer. There’s no guarantee that organics and local items are free of contaminants, says Christopher Raines, Ph.D., a food scientist at Penn State.

**AT HOME**

- Set your fridge at 37° and your freezer at 0°. Promptly chill groceries and leftovers, also, don’t leave buffet food out for more than two hours.
- Do not wash raw meat or poultry. You may think you’re rinsing off dangerous pathogens, but you’re actually spraying any bugs that may be on them around your sink and nearby countertops.
- Prevent cross-contamination. Place raw meat and seafood in resealable bags or containers so they can’t leak onto other foods or onto fridge shelves. Use separate cutting boards for raw meats and ready-to-eat foods like produce.
- Don’t use the same platters and utensils for raw and cooked foods. It may sound like a no-brainer, but it’s all too easy—and dangerous—to whisk burgers or chicken legs off a grill or out of the oven and put them on the same plate you used to carry them there.
- Use one of three methods to defrost meat, poultry, or fish. You can place it in the fridge, put it in a leakproof bag and submerge in cold water (changing the water every 30 minutes), or microwave it. Countertop thawing is not safe, because pathogens can multiply when meat sits out.
- When cooking meat, don’t go by color. Natural chemical interactions can make a burger look brown throughout when it’s still underdone, says Raines. Instead, use an instant-read thermometer. Of the 22 models GHRI last tested, the Taylor Weekend Warrior Digital Thermometer/Timer 808-4L ($25; taylorusa.com) and the Oxo Good Grips Digital Instant Read Thermometer 1140500 ($20; oxo.com) were tops. For safe cooking temps, go to isitdoneyet.gov.
- Wash fresh fruits and veggies. Then dry with a paper towel, which may further reduce bacteria levels. (Clean your hands and surfaces with hot, soapy water first.) But don’t wash produce labeled “ready-to-eat,” “prewashed,” or “triple-washed.” If you rinse it, you risk picking up germs from your kitchen, and if the item is contaminated, the disease-causing bugs won’t come off with at-home washing.
- Skip raw sprouts on sandwiches and salads. Their growing conditions are especially hospitable to dangerous pathogens. Sprouts are OK if cooked until very hot.

**EATING OUT**

Check the restaurant’s latest health inspection.
- This Web portal directs you to your local health authority, which will carry the salient info: allfoodbusiness.com/health_inspections.php.
- Take caution with burgers. Fast-food chains have safeguards in place, but at other kinds of restaurants, before you order a hamburger, ask your server: “How do you know when it’s done?” If the answer doesn’t involve a meat thermometer, consider another item on the menu, Raines advises.
- Be smart about salad bars. You want to see servers replacing bins (not simply dumping new batches on top of old ones) at regular intervals, says Marion Nestle, Ph.D., a nutrition and food-studies professor at NYU.

—Samantha B. Cassetty, M.S., R.D., GHRI nutrition director

Grips Digital Instant Read Thermometer 1140500 ($20; oxo.com) were tops. For safe cooking temps, go to isitdoneyet.gov.

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**Photographs, from top:** BEN GOLDSTEIN/STUDIO D (main shot); Getty Images (7); Veer (1).
Food Safety
continued from page 166

category. As Dana Boner puts it, “I feel like my kid was murdered.”

Each year, about 48 million people—one in six Americans—get sick from something they ate. Contaminated food sends 128,000 victims to the hospital, and it kills 3,000 children and adults. The Centers for Disease Control and Prevention (CDC) identifies some 1,000 disease outbreaks annually. However, these proven epidemics don’t reveal the full scope of the problem. The vast majority of reported instances of food-borne illness spring up as individual cases, but may actually be part of an unrecognized widespread outbreak. (And then, of course, there are all the cases that never get reported: You eat something contaminated, have a bad night or two, and, afterward, return to your regular life without having sought medical help.)

Even though the current numbers are lower than they were in 1999, when the last big government report on food-borne illness was published, the most dramatic decline occurred between 1996 and 2000. Since then, there’s been little additional change.

Chicken & Egg: Who’s in Charge?
Short answer: It depends. Responsibility for the safety of your breakfast shifts from one government agency to another as the egg moves from coop to kitchen. This division of labor is more than silly. It could lead to serious gaps in safety oversight and delays in recalling tainted products from the marketplace.

Headlines broadcast the ever-present threat: E. coli in ground beef. Salmonella in peppercorns. Listeria in lunch meat. Campylobacter in chicken. Last spring, an emerging strain of E. coli—dubbed O104—discovered in raw fenugreek sprouts ultimately killed at least 47 people in Germany and France and sickened thousands; this was one of the most devastating food-related epidemics on record.

And then, in August, the Cargill company recalled tens of millions of pounds of ground turkey linked to an outbreak that had sickened dozens of people. The turkey was contaminated with a particularly dangerous form of salmonella, making this a Class I recall—by USDA rules, that means there’s a “reasonable probability that eating the food will cause health problems or death.” It was one of the largest Class I recalls in U.S. history.

Last winter, there was a brief glimmer of hope that the government was responding to these dangers when President Obama signed the landmark Food Safety Modernization Act, the largest expansion of the Food and Drug Administration’s (FDA) food-safety authority since the 1930s. But the new legislation has not received funding from a bickering Congress—seriously limiting what the law can actually accomplish.

That kind of one-step-forward, two-steps-back approach frustrates food-safety advocates, some of whom have seen loved ones succumb to preventable food-borne infections. “Sometimes I just shake my head at how long we’ve been fighting this fight,” says Nancy Donley, president of STOP Foodborne Illness, an organization she helped establish in 1993 after her 6-year-old son, Alex, died from eating an E. coli–contaminated hamburger at a family cookout.

“What we need is a grassroots movement, a call to action,” says New York Senator Kirsten Gillibrand, who has taken on food safety as a legislative and personal mission. “If
Food Safety  
continued from page 220

all parents who prepare food for their children every single day understood that we are operating under laws written 100 years ago, they would be outraged that we haven’t done more.”

Why haven’t we made greater strides? It starts with understanding what needs to be fixed and what’s required to make those fixes.

THE OTHER DANGEROUS BUGS

In April 2010, Emily Grabowski piled her plate high with romaine lettuce at the salad bar in the dining hall at Daemen College in Amherst, NY. A health-conscious eater, she considered it more nutritious than iceberg. But the lettuce, distributed by Freshway Foods in Ohio, was contaminated with E. coli O145, and Grabowski went into kidney failure and was placed in the ICU. And though she eventually recovered and returned to school that summer to make up for lost time, the ordeal left her fragile, physically and emotionally. For over a year, she tired easily, and her migraines worsened. “On paper, I’m fine,” she says. “But I’m not. I can’t take certain medicines because my kidneys can’t handle them. I worry about my kidneys failing years from now. And it’s taken me a full year to stop thinking, Am I going to get sick? every time I eat.”

It may be understandable that Grabowski’s doctors initially tested only for E. coli O157. Since the Jack in the Box tragedy, it has triggered hundreds of outbreaks—in undercooked beef (especially ground meat), raw milk, and fresh fruits and vegetables, including unpasteurized apple cider, spinach, lettuce, sprouts, cole-slaw. But what most people don’t realize is that there are many strains of E. coli bacteria, and the strain that caused the 1993 outbreak is only one of a group known as STECs—for “Shiga toxin-producing E. coli.”

While O157 STEC infections have dropped over the past 15 years, the incidence of other STECs has risen to the point where they now collectively eclipse O157. Yet none of these are on the “most dangerous” adulterant list. If they were, meat producers, at the least, would have to test for each of those strains—and, if they found any, destroy the batch or cook it to kill the bacteria.

The CDC estimates that of the approximately 265,000 STEC infections that occur each year in the U.S., nearly two-thirds are now caused by non-O157s, most belonging to a group known as the Big Six. Some of these are every bit as vicious as O157, leading to excruciating abdominal cramps, watery and sometimes bloody diarrhea, and, in some cases, HUS.

These new strains have set off outbreaks via a wide variety of foods, including ground beef, milk, American cheese, and lettuce—virtually anything that can come in contact with waste from ruminant animals (primarily cattle). In the case of meat, contamination may occur during slaughter or processing; produce can become tainted if irrigation water or fertilizer contains the disease-causing bacteria.

Sometimes, though, public health authorities never do determine how a food became tainted or even which food is responsible. That’s what happened when one of the Big Six strains triggered an outbreak among people who’d eaten at the Country Cottage restaurant in Locust Grove, OK, over a 10-day period in August 2008. The O111 outbreak sickened 341 patrons, sent 70 to the hospital, and killed one, but state health department investigators never found the source.

Shiloh Johnson, then 10 years old, was one of those seriously affected. She’d enjoyed a buffet of chicken, ham, a boiled egg, a roll, olives, sunflower seeds, and chocolate cake, but two days later felt sick enough to be taken to the hospital. Within days, her kidneys failed and she had to go on dialysis; her speech slurred, she began to hallucinate, and she fell into a coma that lasted for weeks. When fluid built up around her heart, doctors performed emergency surgery to drain it. Later, Shiloh’s mother, Belinda Johnson, learned that her daughter had gone into cardiac arrest during the operation. Although
Food Safety
continued from page 222

Shiloh survived and has resumed her life—reading history books and mysteries, singing, playing with her dog—she suffers from high blood pressure and chronic kidney disease.

Belinda, who now checks restaurants’ health reports and keeps up with recalls, wants people to understand how dangerous E. coli O111 is. “This is not a simple stomach bug,” she says. “It can change your life forever.”

“It’s taken me a full year to stop thinking, Am I going to get sick? every time I eat”

You would think that outbreaks like the romaine lettuce and Country Cottager illnesses would have food-safety authorities aggressively working to make sure the Big Six do not wind up on dinner plates. But our leaders have not treated these contaminants with the same urgency as they have O157.

Part of the problem is technical: “These bugs have been around for decades,” says Bill Marler, a Seattle attorney who represents victims of food-borne illness. “But now we’re finally getting the technology to test for them efficiently.”

And for a long time, the Big Six were thought to be rare. Indeed, even today no one knows how common they really are in the food supply. To find out (and, no doubt, to provoke lawmakers into acting), Marler’s law firm privately funded a study in 2008 and 2009. The findings: Non-O157 bacteria were in 1.9% of the 5,126 ground beef packages tested—or about one in every 50 packages.

More recently, scientists at Texas Tech University found non-O157 STEC strains in nearly 7% of ground beef and over 4% of whole-muscle cuts (like roasts and steaks) from 325 samples bought at supermarkets in 32 cities between February and May.

Despite this evidence, as well as the CDC’s statistics on the growing number of Americans infected by them, the Big Six have been allowed to slip through the federal food-safety net. To be sure, the USDA isn’t completely powerless. Under law, it can seize contaminated meat from shelves when it’s linked to an outbreak, no matter what organism is causing the illness. But Elisabeth Hagen, M.D., Under Secretary for Food Safety, acknowledges that pulling a product from the market after an outbreak is hardly ideal. “We don’t want to wait for people to get sick,” she says.

And her agency has been on the case, says Dr. Hagen, who was sworn in as Under Secretary for Food Safety, acting USDA Under Secretary for Food Safety at the time, has developed its own state-of-the-art tests for identifying the presence of the Big Six. And it has been trying to develop standards for the food industry; the goal, Dr. Hagen says, is to perfect the agency’s approach so the industry will accept and “be ready to implement any kind of new policy.”

There’s another option. Back in 1994, after the Jack in the Box outbreak sickened so many, Michael Taylor, the acting USDA Under Secretary for Food Safety, took an astonishingly simple action. He declared E. coli O157 an adulterant in beef. Taylor did not go through the lengthy process of federal rule-making, but rooted his decision in the language of the existing law.

Not surprisingly, the American Meat Institute, a national trade association representing packers and processors of meat and poultry, sued. But it lost. And since then, as the industry has devised increasingly sensitive tests to detect the pathogen as well as methods for helping to eliminate it on farms and in processing plants, illness rates have dropped dramatically.

Some activists are urging that the USDA’s Dr. Hagen do exactly the same thing Taylor did in 1994: simply declare that the Big Six are adulterants in order to get them out of the food supply, and weather any legal storms from industry. Dr. Hagen explains that she has taken action: Her agency has brought the issue to the White House Office of Management and Budget—where it is bogged down in review. Meanwhile, as government groups wait for the pieces to fall into place and bureaucrats dicker over details, more people are getting sick and dying.

TOO MANY BOSSES

As many as 15 different federal agencies have a role in keeping the nation’s food safe. But the lion’s share of the responsibility goes to the USDA and the FDA.

How to Fight for Safer Food

Senator Kirsten Gillibrand of New York has just introduced legislation that would bring needed safeguards to the meat and poultry industry and to the government agencies that oversee them. To join the campaign, let Congress know that you support the Safe Meat and Poultry Act. For a sample letter that you can send to your Senators, go to goodhousekeeping.com/safe-food. Not sure how to contact your Senators? Our site will link you to the right people.

Support the Safe Meat & Poultry Act
Food Safety
continued from page 225

That seems simple—until you learn how it plays out. The USDA’s Food Safety and Inspection Service (FSIS) is required to inspect all cattle, sheep, swine, poultry, and other animals during slaughtering and processing. By law, at least one federal inspector must be present at least once each shift whenever a slaughterhouse is operating. The FDA covers virtually all other foods, including milk and other dairy products, seafood, fruits, vegetables, and most processed foods. It also ensures the safety of imported foods (except meat and poultry).

Here’s how wacky this division of oversight gets: The USDA regulates chickens, while the FDA oversees eggs, of whom about 8,000 are in the 6,300 slaughtering and processing plants nationwide.

The FDA is also assigned to assist the states in bringing up the standards of their inspection practices. But here, too, the agency is stymied, as the recession has eroded state budgets. “Some are actually cutting food-safety programs,” says Michael Taylor, the former “just call it an adulterant” USDA manager, who is now deputy commissioner for foods at the FDA.

Nor have state agencies always proved reliable. In 2008, Georgia state inspectors gave an OK to the Peanut Corporation of America (PCA) shortly before the company’s salmonella-tainted peanut butter products caused nine deaths and more than 700 illnesses in 46 states in late 2008 and early 2009. More than 2,800 peanut-containing products made by a variety of firms might have been made with the ingredients recalled by PCA. When FDA inspectors went in after the outbreak, they found evidence that the company had shipped salmonella-tainted peanuts and that peanut-paste machinery had not been cleaned after contaminated shipments had gone out—and they found salmonella itself on the floor.

One of the first to be stricken by the contaminated peanut butter was Shirley Almer of Perham, MN. She had battled lung cancer and brain cancer—and won. But in late 2008, she began suffering from cramps and diarrhea shortly before she was to be released from a short-term rehab facility where she was being treated for a minor infection. Almer quickly grew sicker, and just over a week later, she died at age 72. “Cancer couldn’t claim her, but peanut butter did,” her son Jeff Almer told a House of Representatives subcommittee in 2009.

Food-borne illness costs over $100 billion a year in medical bills and other expenses

(most of the time; see “Chicken & Egg: Who’s in Charge?” on page 220). The USDA is responsible for cows, while the FDA is in charge of milk. Pepperoni pizza? That’s the USDA. Cheese pizza? The FDA. The USDA oversees catfish; the FDA regulates tuna.

These agencies also operate in an unequal financial arrangement. About 40% of the two agencies’ combined food-safety budget goes to the FDA, but it’s responsible for at least 80% of the U.S. food supply, reports the Congressional Research Service, which provides policy and legal analysis to House and Senate committees.

Money isn’t the only shortfall for the FDA. Its food-related staff numbers only 2,800, of whom more than 1,900 are field inspectors. Yet the agency has oversight of more than 44,000 food manufacturers and 100,000 other facilities like warehouses and grain elevators, with 68,000 subject to inspection. Over at the USDA’s FSIS, there are around 9,400 staff members working on food safety threats, the two agencies follow very different rules. For example, under the law, the FDA can now invoke the “adulterant” standard before anyone gets sick. But unless the contaminant is E. coli O157, the USDA must wait for an outbreak. That means if E. coli O111—the organism that killed Kayla Boner—turned up in tests on frozen pizza, the packages could immediately be recalled by the FDA. But if E. coli O111 appeared in ground beef, the meat could stay in supermarket cases and restaurant refrigerators until people started getting sick.

Such complexities and contradictions make a case for “scrapping the whole system,” as STOP Foodborne Illness’s Nancy Donley puts it, and creating a single, independent food-safety agency that would regulate everything that we eat and drink. In 1999, the Government Accountability Office (GAO)—an independent,
nonpartisan agency that works for Congress—warned that “[our] fragmented system was not developed under any rational plan, but was patched together over many years to address specific health threats from particular food products.”

Twelve years later, in March 2011, the GAO again pointed to the dangers of fragmentation and urged a “governmentwide performance plan for food safety.” The report outlined several ways to fix the patchwork system, including the creation of a single food-safety agency. But it acknowledged that “reorganizing federal food-safety responsibilities would be a complex process...that could take years.”

IMPORTING RISKS

Elex Scheels, a mother of triplets in Voorheesville, NY, was willing to pay the extra money for gourmet organic foods for her children. That’s why, in the spring of 2007, she bought Veggie Booty snacks—puffed-rice-and-corn treats—for her then 20-month-old toddlers. Shortly afterward, two of the three—daughter Sydney and son Cole—became severely ill from a rare strain of salmonella. Sydney’s infection was especially vicious; her fever climbed to almost 106°, and blood poured out of her bowels. “It was horrible to see that come out of her tiny body,” Elex recalls.

For three months, the Scheelses used latex gloves when changing diapers and bleached the tub after the children’s baths. Hardest of all, they had to isolate their household from many of their family and friends, including other young children, to keep the infection from spreading.

Both children survived, but Sydney was a carrier of the bacterium for three months, and she may be at risk of ongoing immune system and joint problems. “It’s wait and see,” Elex says today. “No one really knows the long-term effects.”

That June, the company recalled Veggie Booty—but ultimately, the snack sickened 69 people across 23 states, almost all of them small children. Veggie Booty was made locally in New York, which appealed to health-minded locavores like Elex Scheels. In fact, though, one of its ingredients was a seasoning from China, which was tainted with a type of salmonella that had last been seen in Hong Kong in the 1970s.

The rising tide of imports—not only such traditional fare as cheese and olive oil, but ingredients used in the production of other foods, like the seasonings on Veggie Booty—may be the most daunting challenge for the FDA. In the past five years, food imports have doubled, with more than 240,000 establishments in 200 countries and territories selling products to the U.S. each year.
**Food Safety**  
*continued from page 227*

Today, between 10% and 15% of all food consumed by U.S. households is imported. With some foods, more of what we eat is imported than is produced domestically; 60% of fruits and vegetables come from abroad, for example, as does 80% of seafood. Yet the FDA can physically examine only about 2% of imported foods—and the number of outbreaks keeps growing. Over the past few years, hundreds have been sickened by tainted import-ed produce, including Guatemalan cantaloupes and Mexican peppers with salmonella and Mexican green onions with hepatitis A.

Again, it’s a question of funding. The new food-safety act directs the FDA to inspect at least 600 foreign food facilities within the next year, and to double those inspections annually for the next five years. But unless the budget is increased, that goal will be impossible to reach, a congressional report concluded earlier this year.

**YES, WE CAN AFFORD IT**

Last spring, the House of Representatives chopped $87 million from the FDA’s food-safety budget for fiscal year 2012 and $35 million from food safety at the USDA. The final budget is being debated in Congress now, and “everything’s up in the air,” says Chris Waldrop, director of the Food Policy Institute at the Consumer Federation of America.

In food-safety programs, these relatively small sums of money have an outsized impact. “We have very little flexibility in our budget,” says the USDA’s Dr. Elisabeth Hagen. “More than 80% of what we are appropriated pays salaries and benefits for our employees. There’s not a lot of wiggle room.”

For the FDA, the cost-cutting comes at a crucial time because of the Food Safety Modernization Act’s requirements. The new law includes more inspections, broader regulation of food facilities, a mandate to ensure that imported food is produced under the same standards as domestic food, and the authority to order recalls when food is contaminated—before people get sick. “It’s transformative legislation,” says Michael Taylor. “The whole thrust of the new law is to prevent food-borne outbreaks.”

Deep budget cuts not only would hamper the FDA in carrying out its new responsibilities, but could also possibly reduce staffing in the agency’s main food-related workforce: scientists, inspectors, and lab workers. Indeed, the FDA, which has been chronically underfunded on the food side, needs more money, not less.

And in these tight-budget times, for those wondering where those funds might be found, consider this: The nonpartisan Congressional Budget Office estimates that the FDA would require an extra $1.4 billion from 2011 to 2015 to carry out the new law. Food-borne illnesses cost the U.S. $152 billion each year in doctor and hospital bills, medicine, and incurred losses like disability, a former FDA economist calculated in 2010.

Though this arithmetic was based on older (and larger) estimates of the number of cases, we still spend more than $100 billion on dealing with food-borne illnesses, says Waldrop. Saving just over 1% of that for improved food-safety oversight would cover the FDA’s expanded needs for the next four years.

Or ponder this: In a preliminary report leaked last July, sources said that the Commission on Wartime Contracting had calculated that the U.S. had wasted or misspent some $34 billion in contracting for services in Iraq and Afghanistan over the past decade—vastly more than the FDA would need for the next four years.

Money is only part of the problem. Commitment on the part of our legislators is also necessary. New York Senator Kirsten Gillibrand has called for full funding for the FDA to carry out the new safety law; she has also just introduced the Safe Meat and Poultry Act, which would mandate similar safeguards at the USDA.

Specifically, Gillibrand’s bill calls for comprehensive testing for those organisms that cause the vast majority of illnesses from meat and poultry. It would require that the USDA treat the Big Six as adulterants, meaning that meat contaminated with these bacteria would be cooked or destroyed. The bill also bolsters inspections and tightens oversight of meat and poultry imports, among other provisions. (To support the legislation, see “How to Fight for Safer Food,” page 225.)

But Gillibrand has met with the same industry opposition that has stalled other food-safety bills over the years. “We share Senator Gillibrand’s desire to eradicate pathogen-ic bacteria,” the American Meat Institute stated last May, “but we don’t believe that an Act of Congress can make these bacteria disappear.” In fact, as evidenced by the dramatic decline of infections after E. coli O157 was declared an adulterant in ground beef, government action may be the only thing that will curb them.

Some industry groups aren’t waiting for new laws to tell them what they must do. In July, Beef Products Inc., a large producer of boneless lean beef, announced that it was testing its beef for the Big Six. So is Costco, which checks bagged produce for these bacteria as well. McDonald’s and Wal-mart also demand extra-stringent
testing from their suppliers. “These private companies are fiercely protective of their reputations,” says Wal-drop. “They’re putting measures in place to reduce the chance they’ll be linked to an outbreak.”

Contamination of spinach with E. coli O157 was the impetus for Earth-bound Farm, a produce company, to launch a model safety program. In that outbreak, which sickened nearly 200 people and killed three, investigators never found the source of the bacteria. “That forced us to evaluate our entire process—from field selection to putting the product on the truck,” says Will Daniels, senior vice president of operations and organic integrity for the company.

Earthbound Farm’s 150 growers cultivate more than 100 varieties of organic salads, fruits, and vegetables on nearly 37,000 acres in the coastal central California region. When the company began to explore faster testing methods, it discovered that produce-industry labs used tests that yielded results in three to five days—too long for lettuce or other greens, which would then wilt before they could reach the market.

So Daniels turned to a private lab that worked with the beef industry and had developed a rapid test that gave results for O157 and the Big Six within one day. Several companies make such tests, and, in July, one reported that it would soon be selling its test to more food companies.

But this kind of rapid testing hasn’t yet become the government norm. As Daniels sees it, “the government is about five years behind.”

Beyond testing finished products, Earthbound Farm also checks all seed lots, all water sources, all fertilizers and compost, and leafy greens coming in from the field. It makes unannounced inspections on all its farms and destroys any lots that are found to be contaminated.

And the cost for all this safety? An additional three cents for every retail package of produce—about 1% to 2% of the purchase price—says Daniels. Americans are willing to pay more for safer food, a Pew Charitable Trusts survey found earlier this year. Indeed, respondents indicated they’d fork over as much as 3% of their food dollars to support the new FDA safety measures.

Pennies’ worth of prevention that might have saved Kayla Boner’s life, or Shirley Almer’s, or the lives of the 3,000 others who are killed by foodborne illnesses each year. “My daughter died in 2007, and now it’s 2011, and we’re no further along than when she died,” says Dana Boner. “I want something positive to come out of her death. Kayla wanted to be a pediatrician and save children’s lives. By fighting for these changes, maybe I can do that for her.”