



AfriFOODlinks

INNTA First Quarterly Newsletter (Q1)

Urban food systems linking city nutrition and hospital care trays

*Food, Care, and Urban Resilience at the National Institute of
Nutrition and Food Technology (INNTA), Tunis*

Tunis , March 20,2026



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Within the AfriFOODlinks project, cities across Africa and Europe are experimenting with new ways to transform urban food systems so they become healthier, more resilient, and more sustainable. In Tunis, one of the most compelling examples of this transformation unfolds inside the National Institute of Nutrition and Food Technology (INNTA). Far from being a simple hospital kitchen, the Institute operates as a living ecosystem where nutrition science, Tunisian Mediterranean culinary heritage, rigorous food safety standards, and human care intersect. Observing the daily life of this institution reveals how food can function simultaneously as therapy, cultural identity, and a strategic lever for public health within the urban food system.



Figure 1: The National Institute of Nutrition and Food Technology (INNTA). (Right): A public health sanctuary in the heart of Tunis. (Left): A vibrant mural on the INNTA facade created within the framework of the AfriFOODlinks project, promoting the Tunisian Mediterranean diet as a scientific model for preventing non-communicable diseases

Walking through the corridors of INNTA, one immediately senses an atmosphere very different from the image often associated with hospitals. The air carries the scent of fresh herbs, spices, and warm meals, while conversations between patients, nurses, dietitians, and cooks create a sense of familiarity and humanity. Many patients arrive exhausted, carrying the burden of chronic diseases such as diabetes, hypertension, obesity, or cardiovascular disorders. Yet the environment gradually transforms anxiety into reassurance. Here, nutrition becomes a language of dignity: every tray sent to a patient communicates a simple message that the person receiving it is seen, respected, and cared for.

At the center of this culinary and therapeutic ecosystem stands Chef Amor Ouechtati, whose professional journey reflects the philosophy of the Institute. Raised in the fertile agricultural landscapes of Béja, often described as Tunisia's granary, his childhood was shaped by the rhythms of traditional food preparation: couscous made from pure wheat semolina, tabouna bread baked in clay ovens, and olive oil pressed from nearby groves. After formal training at the Sidi Thabet hospitality school, he began his career in prestigious restaurants in Tunis. Yet his path changed profoundly when he entered healthcare institutions. Cooking for patients transformed gastronomy into a form of care. What once was a profession became a vocation. Today he begins his day at six in the morning so that breakfast is ready by half past seven, ensuring that every meal combines nutritional precision with human warmth.



Figure 2: Chef Amor Ouechtati. "My work here transcends mere financial gain; it is a vocation"

Under his stewardship, the hospital kitchen deliberately rejects industrial shortcuts and instead celebrates the richness of Tunisian culinary heritage and the Mediterranean diet. Daily menus include emblematic dishes such as couscous, bourghul, tajines, ragouts, and vermicelli prepared with use of extra virgin olive oil for salads, often called the "liquid gold" of Mediterranean cuisine. Flavor is built through a complex palette of herbs and spices turmeric, rosemary, thyme, garlic, cumin, ginger, coriander, bay leaves, and fresh mint which allows the kitchen to significantly reduce salt while preserving the pleasure of eating for patients suffering from hypertension or metabolic diseases. Most ingredients are purchased through public procurement contracts with the Tunis wholesale market, reinforcing freshness and short supply chains within the local food system.

Behind the warmth of the dishes lies a daily dialogue between culinary craftsmanship and nutritional science. Hygienists and dietitians regularly enter the kitchen for meticulous rounds, not as inspectors but as collaborators ensuring that each meal respects strict medical

prescriptions. Although trays may appear identical to the untrained eye, each menu is in fact adapted to the physiological condition of the patient. Vermicelli might be replaced by gluten-free pasta for patients with intolerance, while those with chewing difficulties receive nutrient-rich vegetable broths enriched with proteins and seasonal vegetables. Chef Amor never substitutes ingredients without consultation; if a vegetable is unavailable, he immediately contacts the dietitian to select a nutritionally equivalent alternative. In this environment, the chef remains a constant student of nutritional science, translating medical recommendations into concrete culinary practice.

Technology also plays a crucial role in this system of care. Using the Electronic Medical Record, Chef Amor retrieves patient dietary prescriptions and prints barcode labels containing a unique identifier for each tray. This digital system guarantees that each patient receives the exact portion corresponding to their medical needs. The kitchen prepares three meals a day, adjusting production to the daily rhythm of admissions and discharges. Around 85 to 90 meals are prepared for lunch, including those served to patients who are discharged the same day but must eat before beginning their journey home to prevent hypoglycemia. Dinner service generally involves around 75 meals, lighter yet comforting, often composed of soup, salad, and a traditional tajine or ragout.



Figure 3: The Intersection of Culinary Art and Medical Data. Chef Amor printing unique identifier labels from the Electronic Medical Record (DMI) to ensure precise nutritional compliance.

Such precision is inseparable from the strict HACCP food safety system that governs the entire kitchen. Hygiene protocols are rigorous and constant. Workflows follow a strict forward flow to prevent cross-contamination, ingredients are carefully traced, and “witness trays” are stored for five days as biological archives in case of microbiological verification. These procedures ensure complete traceability and guarantee that the meals served to vulnerable patients meet the highest standards of sanitary safety.



Figure 4: The "Witness Tray". Biological archives stored for 5 days, ensuring total traceability and microbiological safety in compliance with HACCP protocols

Even when equipment fails as happened recently; when the electric grinders broke down the team simply picked up knives and hand-chopped mountains of vegetables, ensuring that meals still reached patients on time.



Figure 5: People as Infrastructure. When the electric grinders malfunction, Chef Amor and the "Guardians of the Temple" manually chop vegetables, demonstrating a profound solidarity and refusal of institutional failure

Yet the true infrastructure of the kitchen remains profoundly human. The cooks, many of them women, work with quiet dedication. One of them recounts how she learned cooking at her mother's side as a child. Initially hired in housekeeping, she asked the administration to transfer her to the kitchen because feeding others felt like her true calling. For her, cooking at the hospital is an act of devotion. She prepares meals for patients with the same care she gives to her own family. "We cook for people who are fragile," she explains. "Hygiene must always be perfect. This profession does not forgive mistakes. Her pride is evident when she describes her flawless microbiological test results.



Figure 6: The Fruits of the Guardians' Labor. Side-by-side comparison of the standard patient tray (Left) and the duty doctor's blue isothermic tray (Right). Prepared by the same female cooks, both feature identical, nutritionally balanced menus, demonstrating absolute equality in care and quality

Their sense of duty is captured in a simple sentiment; the trays must always be as full as their hearts.



Figure 7: The Fulfillment of Duty. A "Guardian of the Temple" loading the heated distribution trolley to ensure meals reach the patients warm and safe. Her smile embodies the ethos of the kitchen: "Despite the effort, the meals always arrive on time; our trays are as full as our hearts."

The therapeutic process extends beyond the kitchen through the work of dietitians, who form a closely integrated team with doctors and nurses. Their consultations aim not only to prescribe diets but also to empower patients. They teach individuals to recognize warning signs such as hypoglycemia or hyperglycemia and to manage their nutrition safely at home. Importantly, their approach avoids the language of prohibition. Instead of declaring foods “forbidden,” they help patients rebuild a healthy relationship with food through dialogue, empathy, and education. This patient-centered approach transforms dietary therapy from a restrictive obligation into a collaborative journey toward autonomy and health.

Inside the wards, meals become powerful social moments. Hospital rooms hosting several patients often resemble small communities where stories, laughter, and worries are shared. For many, this collective environment transforms hospitalization into a moment of solidarity. One patient, Naziha, a 64-year-old diabetic, explains that she eats here “as if at home—actually even better,” because the balanced meals allow her to focus on her own health, something daily family responsibilities often prevent. Another patient, Leila, whose son is gluten intolerant, expresses surprise that the kitchen can deliver two different menus on identical trays: traditional vermicelli for her, gluten-free pasta for her child. For them, the hot meals arriving on time symbolize a deeply reassuring form of care.

The hospital’s food system is also connected to the broader urban food environment of Tunis. Within the AfriFOODlinks initiative dedicated to reformulating subsidized bread, fifty volunteer bakers across the city committed to reducing the salt content of bread by 30 percent, an important measure for cardiovascular health. Among them is Chaker Garfa, an artisan baker from the El Wardia district who has supplied bread to INNTA for years through public procurement contracts. His participation in the project since March 2025 creates a tangible bridge between urban nutrition policy and hospital care. The bread served to patients therefore embodies a powerful connection between city-wide food system transformation and the clinical reality of the hospital bedside.



Figure 8: The Artisan of Resilience. Chaker Garfa in his El Wardia bakery. His voluntary commitment to the salt-reduction project embodies the vital, tangible link between the city’s urban nutrition strategy and the clinical reality of the hospital.

Beyond its clinical mission, INNTA also plays a vital role in training the next generation of hospital food professionals. In collaboration with the Gammarth Training Center, the Institute hosts apprentice cooks who undergo immersive training in hospital nutrition, hygiene standards, and therapeutic meal preparation. These young trainees quickly discover that hospital catering is not ordinary cooking but rather a precise science of care, where each ingredient and each gram matters for the recovery of patients.



Figure 9_: The Next Generation. Apprentice cooks from the Gammarth Training Center in a session with INNTA engineers and dietitians. Learning that hospital catering is a precise science of care.

The Institute also invests in strengthening national expertise in food safety. An INNTA engineer recently participated in the “HACCP Train-the-Trainer” program organized by the National Authority for Food Safety (INSSPA) as part of a Tunisian-German cooperation initiative. Through such programs, knowledge acquired at the national and international level is transmitted back into the hospital kitchens and to future professionals, reinforcing Tunisia’s capacity to maintain high standards of food safety and nutritional care.



Figure 10: National Expertise. The INNTA Engineer participating in the "HACCP Train-the-Trainer" workshop organized by the National Authority for Food Safety (INSSPA) (Feb 2024). Ensuring INNTA remains at the forefront of sanitary standards

The experience of INNTA ultimately demonstrates that hospital food systems can play a strategic role in transforming urban food systems. Through the combined efforts of chefs, dietitians, doctors, cooks, food safety experts, and local artisans such as city bakers, the hospital becomes more than a place of treatment. It becomes a living example of how science, culture, and community can converge through food. Each carefully prepared tray embodies this philosophy, showing that nourishment, when guided by knowledge and empathy, has the power not only to heal bodies but also to restore dignity, connection, and hope.

Read the full article here:
[\[expecting the link to the article on INNTA web site\]](#)

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