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Research Article

FOOD HANDLER'S KNOWLEDGE AND PRACTICES REGARDING FOOD HYGIENE

Ranganath D¹, Bhadra Reddy², Kokiwar Prashant R^{3*}

¹Professor of Pediatrics, Malla Reddy Institute of Medical Sciences, Hyderabad, India

²Assistant Professor of Medicine, Malla Reddy Institute of Medical Sciences, Hyderabad, India

³Professor and HOD of Community Medicine, Malla Reddy Institute of Medical Sciences, Hyderabad, India

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*Corresponding Author: **Dr. Prashant R. Kokiwar**

^{*}Professor and HOD of Community Medicine, Malla Reddy Institute of Medical Sciences, Hyderabad, India. Mobile No. 9849975943,

ABSTRACT

Food hygiene may be defined as sanitary science which aims to produce food, which is safe for the consumer and of good keeping quality. Food borne diseases represent one of the most wide spread and overwhelming public health problems of the modern world. The WHO has described that out of 493 outbreaks studied, 151 (30.62%) outbreaks were due to infected food or poor knowledge of food hygiene of food handlers. Commercial and community feeding presents the most important food hygiene problem. Basic knowledge of food hygiene is essential for all food handlers. The present cross sectional study was conducted for one month in a village among 62 food handlers working in any type of food establishment. By asking leading and probing questions, required information was recorded in pre designed proforma. Food hygiene practices of food handlers were observed. Health education regarding food hygiene and personal hygiene was imparted to food handlers. It was observed that majority of study subjects had correct knowledge regarding food hygiene, but were practicing incorrectly only having knowledge regarding food hygiene is not important but practicing correctly is very important. Education and supervision of food handlers in matters of personal hygiene, food handling, utensils, dish washing is the best means of promoting food hygiene.

Keywords: Knowledge, Practices, Food Hygiene, Food Handler, Food borne diseases.

INTRODUCTION

Procurement of food is the main objective of man in every activity, followed by other necessities. Quality of food, which the people eat, is the main determinant of their health to a large extent. A food handler is any person who handles food, regardless of whether he actually prepares or serves it. Consumers of food, handled by unhealthy / diseased individuals/ family members are at manifold magnified danger of developing certain bacterial, viral, protozoal and rickettsial diseases¹.

Food hygiene may be defined as sanitary science which aims to produce food, which is safe for the consumer and of good keeping quality. Food borne diseases represent one of the most wide spread and overwhelming public health problems of the modern world. The WHO has described that out of 493 outbreaks studied, 151 (30.62%) outbreaks were due to infected food or poor knowledge of food hygiene of food handlers. Commercial and community feeding presents the most important food hygiene problem².

Basic knowledge of food hygiene is essential for all food handlers.

With this background, the present study was carried out to assess the knowledge and practices of food handlers regarding food hygiene.

MATERIALS AND METHODS

- **Place of study:** The present study was conducted in a village among food handlers working in any type of food establishment.
- **Period of study:** Study was carried out for a period of one month.
- **Type of study:** It was a cross sectional study.
- **Study population:** A total of 62 male and 44 female food handlers were interviewed.
- **Statistical application:** By proportions.

METHODOLOGY

The present study on food handler's knowledge and practices regarding food hygiene was conducted in a village. Before starting the survey a rapport was developed with food

handlers. By asking leading and probing questions, required information was recorded in pre designed proforma. Food hygiene practices of food handlers were observed. Health education regarding food hygiene and personal hygiene was imparted to food handlers.

Socio-economic status of study subjects was calculated based on Prasad's social classification. It is based on per capita income in Rupees. The value of Rupee was updated by using the correction factor as suggested by Prasad BG³.

RESULTS AND DISCUSSION

Table 1: Distribution of study subjects as per knowledge of food hygiene:

		Male (n=62) Correct	Female (n=44) Correct	Total
1.	Hands should be washed with soap and water before food preparation and serving	57 (91.93)*	38 (86.76)	95 (89.62)
2.	Raw food material should be cleaned and washed with plenty of water	56(90.3%)	44 (100)	100 (94.33)
3.	Utensils, glass, spoons etc. should be thoroughly washed and cleaned	60(96.77)	44 (100)	104 (98.11)
4.	Floor, walls, roof should be kept clean	50(80.64)	31 (70.45)	81 (76.41)
5.	Drinking water should be kept in clean and daily washed pots	53(85.48)	34 (77.27)	87 (82.07)
6.	Habits of fingering nose is dangerous	38(61.29)	29 (65.90)	67 (63.20)
7.	Licking finger to pick up papers can recontaminate the food	28(45.16)	15 (34.09)	43 (40.56)
8.	Any boil, abscess should be kept clean	42(67.74)	13 (29.54)	55 (51.88)
9.	Prepared food should be kept in clean utensils and covered	58(93.54)	38 (86.36)	86 (90.56)
10.	Surrounding area of food establishment should be clean	53(85.48)	36 (81.83)	89 (83.96)
11.	Before resuming work after defecation, urination, hands should be washed with soap and water	59(95.16)	35 (79.54)	94 (88.67)
12.	Cloth should be kept over nose and mouth during sneezing and coughing	28(45.16)	23 (52.27)	51 (48.11)
13.	Use personal clean towel for drying hands	44(70.96)	18 (40.90)	62 (58.49)
14.	Bathe daily and wear clean clothes	59(95.16)	38 (86.36)	97 (91.50)
15.	Keep the head covered with cap or headscarf	10(16.12)	2 (4.54)	12 (11.32)

*Figures in parenthesis indicate percentage.

Majority of the study subjects that is 95(89.62%) answered questions correctly like “Hands should be washed before food preparation and serving”, “Raw food material should be cleaned and washed with plenty of water “, was answered by 100(94.33%). Sangole SS et al also reported similar findings². Knowledge regarding “Licking fingers to pick up papers can recontaminate the food “Any boil, abscess should be covered

with waterproof dressing “was found to be poor. Overall knowledge regarding the food hygiene was found to be poor in females in comparison with males. But Sangole SS et al² had reported that the knowledge regarding food hygiene was poor in males in comparison with females.

Table 2: Distribution of study subjects as per practices regarding food hygiene

		Male (n=62) Correct	Female (n=44) Correct	Total
1.	Washing hands with soap and water before food preparation and serving	54(87.09)*	35(79.54)	89(83.96)
2.	Washing raw food material with plenty of water	55(88.70)	42(95.45)	97(91.50)
3.	Washing Utensils, glass, spoons	51(82.25)	39(88.86)	90(84.90)
4.	Cleaning Floor, walls and roof	28(45.16)	18(40.90)	46(43.39)
5.	Drinking water storing in clean pots	29(46.77)	16(36.36)	45(42.45)
6.	Habits of fingering nose	22(35.48)	12(27.27)	34(32.07)
7.	Licking finger to pick up papers	32(51.61)	29(65.90)	61(57.54)
8.	Boils and abscess were covered with water proof dressing	32(51.61)	29(65.90)	61(57.54)
9.	Prepared food was kept in clean utensils and covered	30(48.38)	27(61.36)	57(53.77)
10.	Surrounding area was clean	28(45.16)	24(54.54)	52(49.05)
11.	Washing hands before resuming work, after defecation, and urination	49(79.03)	33(75)	82(77.35)
12.	Keeping clothes over nose and mouth during sneezing and coughing	26(41.93)	20(45.45)	46(43.39)
13.	Using personal clean towel for drying hands	26(41.93)	12(27.27)	38(35.84)
14.	Bathing daily and wearing clean clothes	42(67.74)	33(75)	75(70.75)
15.	Covering head by cap or head scarf	8(12.90)	0(0)	8(7.54)

*Figures in parenthesis indicate percentage.

Table shows distribution of study subjects as per practices regarding food hygiene. The difference was clearly observed, example: 96 (90.56%) study subjects had knowledge that “ prepared food should be kept in clean utensil and covered “ , but only 57 (53.77%) were practicing this, 89 (83.96%) study subjects had the knowledge that “ surrounding areas of food establishments should be clean”, but only 52 (49.05%) of them really kept their surrounding area clean, 87 (82.07%) study subjects had knowledge that “Drinking water should be kept clean and daily washed pots”, but only 45(42.45%) of them were following this practice.

CONCLUSION AND RECOMMENDATION

It was observed that majority of study subjects had correct knowledge regarding food hygiene, but were practicing incorrectly only having knowledge regarding food hygiene is not important but practicing correctly is very important. Education and supervision of food handlers in matters of personal hygiene, food handling, utensils, and dish washing is the best means of promoting food hygiene.

As the practices of food handlers regarding food hygiene were very poor and unsatisfactory and as the food handlers play a

vital role in food contamination and are responsible for food borne diseases, the following recommendations are made:

1. Health education regarding food hygiene and personal hygiene should be periodically imparted to food handlers.
2. All instructions regarding food hygiene should be pasted on the walls of food establishments.

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