

Assessing the Hygiene Practices among Street Food Vendors in Mohali

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ABSTRACT

Research begets the foundation for Development and development further signals for a novel research and the cycle goes on. The present study was conducted to assess the hygiene practice among food vendors regarding food hygiene in selected areas of Mohali. Non-Experimental research design depicts overall plan of organization of specific investigation. Population consisted of food vendors of Phase-10, 9, 7, 6, 3b1, 3b2, 1 of Mohali. The present research was carried out to assess the hygiene practices among street food vendors regarding food hygiene. The present study was conducted on 50 subjects. The data analysis of data collected and interpretation of findings concluded that 62% of people had maintained good hygiene and 38% had poor hygiene. The socio demographic variable (education, type of stall) had significant association with hygiene practices.

Keywords: *Street foods, hygienic standards, health*

Street foods are very well patronized in many countries since they are affordable, easy, accessible, and also serve as an important source of income. However these street foods largely do not meet proper hygienic standards and can therefore lead to morbidity and mortality due to food borne illness and concomitant effects on trade and development. Food borne illnesses are growing public health concern worldwide and results from food contaminated by pathogenic microorganism, mycotoxins or chemical hazards. The concern is heightened by the fact that worldwide there seems to be a change in lifestyle and food

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consumption pattern as frequency at eating out is increasing and commitment to food preparation is decreasing. The reported outbreaks of food borne illnesses have been high, both in developed as well as developing countries. However problem is exacerbated in developing countries due to economic reasons, poverty, lack of adequate health care facilities, and death regarding food borne diseases. The safety of street food is therefore one of the most pressing health and Safety issues facing most developing countries since it lead to both public health and social consequences. Food contamination in developing countries is caused by many factors including traditional food processing methods, inappropriate holding temperature and poor personal hygiene of food handlers. Further prevalence of food borne illness in developing countries is intertwined with other economic and development issues, namely, legislation, infrastructure and enforcement mechanism. Specific example includes inadequacy of food safety law, laxity in regularity enforcement, and lack of education for food handlers. Street vending as a profession has been in existence in India since time immemorial .However, there number has increased manifold in recent years. According to one study Mumbai has highest no. of street vendors numbering around 250,000 while Delhi has around 200,000; Calcutta has more than 150,000 street vendors. Ahmadabad and Bangalore has around 100,000. Women constitute a large no. of food vendors. Over half of all vendors (67%) where form to contact served food with bare hands. Street food vendors in Indian cities have increased sharply during past five years, especially after 1991 when policies relating to structural adjustment and Liberalization where introduced. It is now estimated that around 2.5% of urban population is engaged in occupation. Studies on street vendors are few and are focused mainly in some cities. In 2000 National Alliance of Street Vendors in India (NASVI) organized a study on hawkers. Okojie.P.W and Lsah.E.C (2014) conducted a study on a higher proportion ,259 (90.5%) of the observed vending sites appeared clean .The following sanitary facilities were observed in and around the respective food premises of the respondents :Waste bin ,124(43.4%),refuse dumpsite, 41(14.3%) ,wash hand basin, 201(71.2%), hand towels,210(73.4%), and the presence of rates ,7(2.4%).Respondents with tertiary education, 5(38.5%),vended food in environment with good hygiene status compared to those with secondary, 45(31.7%), and primary education ,33(27.3%) . There was no statistically significant association between educational status and the hygiene status of food premise. Monney.I, Agyei. D, Owusu.W (2013) conducted a study on food vendors. How safe are they? Most vendors were educated and exhibited good hygiene behavior examination were made of 511 menu items, classified as breakfast/snacks food, main dishes, soups and sauces and cold dishes. Mesospheric bacteria were detected in 356 food (69.7%): 28 contained *Bacillus cereus* (5.5%), 163 contained *staphylococcus aureus* (39.9%) and 172 contained entero bacteria (33.7%). The microbial quantity of most of the foods was within the acceptable limits but samples of salads, macaroni and red pepper had unacceptable level of contamination. Thakur Pal Chandar, MehraRakesh, NarulaChahat, Mahapatra Swati and KalitaJyotiTapan. (2013) conducted a study to assess food safety and hygiene practice amongst street food vendor in Delhi, India. Practices and hygiene status of 200 street food vendors was studied by a questionnaire based finding and observation at the vending site. Data was entered and analyzed with the help of MS-Excel. It was found that majority of the respondents (33%) were in the age group of 25 to 34 years of age and 24%

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were illiterate. Around 36% of the vendor was permanent resident of Delhi and from rest of the respondents 55% were from Uttar Pradesh only. None of the respondent was registered. Seventy two percent were disposing garbage in open lid bins and 16% were throwing it on the road, only 3% of the vendors were using hand gloves and from rest only 2% were washing hands before and after handling raw or cooked food. Majority of respondents (72%) had short clean nails and few (4%) had open wounds present. Presence of flies /mosquitoes was observed in 45% of the vending sites 19% were washing utensils in open. Rahman MM, Arif MT, Bakar K, (2012) conducted a study to assess the level of knowledge, attitude and practice of food safety among the food vendors in kuching city, Sarawak and to determine the factors affecting them. A cross sectional study was conducted among street vendors in kuching city. A total of 361 street food vendors were selected using non-probability sampling technique. Data were collected by face interview using structured questionnaire multinomial regression analysis revealed that age and ethnicity appeared to be important factors of food safety knowledge, and training appeared to be influential factors for attitude,($P < 0.05$). On other hand knowledge, attitude, training and age of food vendors influence the food safety practice but duration of food vendors had a univariate relationship with food safety practice. Azanza Patricia V, Gatchalian F, Corazon, Ortega P, Melba (2009) conducted a study on food safety knowledge and practice of street food vendors from a representative urban university campus in Quezon city, Philippines was done. A face to face interview was conducted using a standardized survey tool containing 70 questions, which included queries on demographics and food safety knowledge and practices of street food vendors. Topics on food safety assessment in both practices and knowledge included: health and personal hygiene, good manufacturing procedures, food contamination, waste management and food legislation. The study found that among the 54 street food concepts was established particularly on topics that dealt with health and personal hygiene, food contamination and good manufacturing procedures. However, vendors were shown to be not too knowledgeable in terms of food legislation and waste management. A significant gap between knowledge and practice on these topics was established and it was primarily attributed to the tendencies of street food vendors to compromise food safety for financial issues.

METHODOLOGY

Descriptive approach is used in present study to assess the hygiene practice among food vendors regarding food hygiene in selected areas of Mohali. Non-Experimental research design depicts overall plan of organization of specific investigation. It helps the researcher in selection of subjects, manipulation of independent variables, and observation of the type of statistical analysis to be used to interpret the data. The research design selected for present study for non-experimental research design used to achieve the stated objective. Population consists of food vendors of Phase-10, 9, 7, 6, 3b1, 3b2, 1 of Mohali.

RESULTS

Table 1: Association Between Selected Socio-Demographic Variables With Hygiene Practices

Sr.No.	Sociodemographic Variable	Calculated Value (C.V.)	Table Value (T.V)	Degree Of Freedom (Df)	P Value
1.	Age	0.74	5.99	2	0.05(NS)
2.	Education	8.53	7.82	3	0.05(S)
3.	Income (Monthly)	4.87	5.99	2	0.05(NS)
4.	Type Of Stall	6.14	5.99	2	0.05(S)
5.	Residential Area	5.2	5.99	2	0.05(NS)
6.	Experience	1.43	5.99	2	0.05(NS)

**Ns= Non Significant *S= Significant*

Table 1 Depicts that there is a significant association of education and type of stall with hygiene practice and it also depicts that there is non- significant association of age, income, residential area and experience with hygiene practice. In present study 50 subjects were selected and majority of study subjects participated in study lies under the age group of more than 30 years i.e. (40%) and of which most of the study subjects were male i.e.(98%) and regarding education only (48%) of study subjects have done their primary education and (26%) have done no schooling. According to the type of stall most of study subjects (84%) had non movable stall and rest (16%) had movable. The current findings were supported by study conducted by Chandar Pal Thakur, Rakesh Mehra, Chahat Narula, Swati Mahapatra and Tapan Jyoti Kalita on “Food safety and hygiene practice among street food vendors in Delhi, India”. Practices and hygiene status of 200 street food vendors was studied by a questionnaire based finding and observation at the vending site. It was found that majority of the respondents (33%) were in the age group of 25 to 34 years of age and 24% were illiterate. It resulted that subjects with tertiary education 5(38.5%) vended food in environment with good hygiene status compared to those with secondary 45(31.7%) and primary education 33(27.3%). The results of current study were quite different from this study which could be due to large study population and different settings and sampling techniques in present study.

CONCLUSION

The present study was carried out to assess the hygiene practices among street food vendors regarding food hygiene. The setting selected for study was areas of Distt .Mohali(Phase 10,9,7,6,3b1,3b2,1). The present study was conducted on 50 subjects. The data analysis of data collected and interpretation of findings concluded that 62% of people had maintained good hygiene and 38% had poor hygiene. The socio demographic variable (education, type of stall) had significant association with hygiene practices.

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