Development of Food Hygiene Surveillance System in Plantation Sector, Sri Lanka

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Objective
To develop a food hygiene surveillance system to improve food safety measures within food establishments in the plantation sector of Sri Lanka.

Introduction
Wholesome food in adequate quantities is essential to human beings for their existence (1). However, diseases spread due to contaminated food are a common problem throughout the world and an important cause of reduced economic productivity (2,3). Food borne illness can, therefore, be considered a major international health problem and a significant cause of economic loss (4,5). Approximately 10 to 20% of food-borne disease outbreaks cause due to contamination by the food handlers. In Sri Lanka, information about food hygiene practices in plantation sector is scarce. Therefore, this study was designed as a preliminary study to identify hygiene practices in food processing in the plantation sector for the establishment of a surveillance system in Sri Lanka.

Methods
This cross-sectional study was carried out in tea plantation sector in Kandy, Sri Lanka from July to September 2013. Information regarding sanitary conditions, hygiene behavior, education status and de-worming date was obtained from food handlers using structured and pre-tested questionnaire. The data was analyzed with the SPSS version 17 statistical software.

Results
375 food handlers from 18 to 53 years were enrolled. 59.6% of them had primary education or below whereas others had secondary education. Majority (91.3%) wash their hands with soaps after the use of toilets while only 16% wash with soap before meals. When food handing, 58% wash their hands always with soaps while others wash rarely. 52% of them wash vegetables with water and 48% used salt water to wash vegetables prior to preparing the meals. 66% of them had a habit of eating raw vegetables and only 32% trim their nails in regular pattern. More than half of food handlers (54%) wash equipments and tools with soap rarely before and after food handling while others use soaps every time. Only 6% of them undergo regular deworming treatment.

Conclusions
This study revealed that knowledge of food hygiene practices among food handlers is poor. Community - Health education programs, promoting better food hygiene and improved sanitation should be considered, when planning a food hygiene surveillance system.

Keywords
Food hygiene Surveillance; Sri Lanka; Food borne illness

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References

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