

# [Street food quality in ho chi minh city assignment](https://assignbuster.com/street-food-quality-in-ho-chi-minh-city-assignment/)

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Extensive participant observations, informal as well as formal interviews were conducted with 8 street food vendors and their staffs. The main issues investigated related to food safety practices and perceptions, venturesome interactions and general conditions and challenges for street food vending. Semi-structured interviews were carried out with 27 street food customers and two focus group discussions were carried out with male and female street food consumers to gain in-depth understanding of consumers’ perceptions and attitudes towards street food quality, food safety and hygiene.

Several markets, urban farms, vendors’ networks and other relevant locations were visited in and around Kumara and contaminants from town authorities, research institutions and food corporations were consulted. Analysis: The process of analysis largely followed hermeneutic interpretation principles first categorizing data into units and later analyzing it according to a suitable theoretical model. Data is thus presented and analyses using a multi- dimensional model with the five core dimensions Of social, nutritional, hygienic, aesthetic and functional food quality.

Findings: Notions of food quality among consumers and vendors are highly subjective and multidimensional and include bio-medical concerns of food safety and hygiene as well as social, cultural, aesthetic and moral factors. Functional parameters such as price, availability and accessibility were found to be particularly strong and often overruling concerns of food hygiene. But vendors and consumers are also highly concerned with neatness, which includes aspects of cleanliness, order, aesthetic appearance as well as neat manners during social interactions.

Trust in a known vendor also seems to replace many customers’ concerns of hygiene and food safety. But hygiene related practices are often not extended to include the in-visible back stages of food vending and the consequence is apparent lack of important food safety practices during food preparations (e. G. Hand washing, keeping kitchen premises clean, cleaning vegetables). Hence, hygiene practices are also strongly determined by everyday concerns and agendas, proportioning effective food preparations etc.

Future hygiene promotion should target the “ in-visible” sources of food contamination and strengthening motivating networks for vendors to gain and internalize such food safety knowledge seems like a viable strategy in Kumara. This can be brought into action in fruitful partnerships with food Cooperation’s already hosting wide ranging networks of food vendors but vendors’ networks might also turn out to be a useful self- regulatory and participatory control mechanism for the street food sector offering an important supplement to the restrictive control strategies exercised by town authorities today. Perversity Of Copenhagen, Institute Of public Health CAP: Challenge Program EH: Environmental Health Inspectors OHO: Environmental Health Officers PEP: Environmental Health Project FAA: Food and Agriculture Organization of The United Nations FIG: Focus Group Discussion KM: Kumara Metropolitan Assembly UNJUST: Awaken Markham University of Technology and Science (In Kumara, Ghana) PRI: International Food policy Research Institute MIMI: International Water Management Institute MAFIA: The Magi Fast Food Association of Ghana – Shanty Region NOR: Natural Resource Institute WHO: World Health Organization 4

Thesis by Stud. Scientist. San. Pull. Thiele Ringleader Acknowledgements This study was conducted as part of the CIGAR Challenge Program (CAP) for Water and Food in collaboration with International Water Management Institute (MIMI), Awaken Markham University of Science of Technology (UNJUST) in Kumara, Ghana and university of Copenhagen, Denmark. Being attached to this project has provided me valuable teachings and experiences On processes of international public health research. Academic assistance was provided by Ass. Proof. Fleming Condense, University of Copenhagen, Dry.

Babushka Baking and Proof. Harriet Tacky, UNJUST. Academic supervision was provided by Ass. Proof. Hell Samuels, University of Copenhagen and Phillip Baby Doing, Population Health Officer, Navigator Health Research Centre, Ghana. Translation, transcription and knowledge on the local setting was kindly provided by Ms. Gift Layer, BBS. Of Agriculture, National Service Personnel. Indispensable assistance in all kinds of practical issues during the field study was provided by Kumara based staff of MIMI. Am grateful to all of you for making it a very pleasant experience to do field work in Kumara.

Many vendors and customers have taken considerable time to answer my questions and introduce me to the world of street foods in Kumara. I would like to thank them all for their time and efforts and for giving me easy access to helpful information. Go Dustin take till Enders go Jeans! 5 Introduction: Understanding multidimensional aspects of street food quality Vending of street food in urban areas is a growing and world wide phenomenon and today street foods are important sources of daily foods for massive urban populations – not least in African towns.

But food poisoning, food borne diseases and food safety have been declared a major public health concern by international health agencies and street foods have in any studies been associated with microbiological contamination and low hygienic standards (WHO 2006). Hence, street food vendors are of massive importance for public health since they alone have influence on the health of thousands of people every day. This study Will concentrate on street food vendors and consumers in Kumara, the second largest town in Ghana, West Africa.

Several studies from the Ghanaian capital Sacra have already confirmed that the street food sector is facing serious challenges in maintaining hygiene and safety of foods (Menses 1999, 2001, King 2000, Tomlinson 2002) and with more than 10. 00 street vendors in Kumara and the town rapidly expanding Kumara is now facing the same challenges. Studies conducted in Kumara under MIMI have also identified vegetables prepared by street food vendors to be highly contaminated with fecal material and harmful micro-organisms (Amah et al. 006) and several related risk practices of food handling have been identified by Handler (2005) and Olsen (2005). However, if we in future whish to effectively encourage vendors to improve street food safety and thereby minimize the dangers of food borne diseases, it is vital to gain in-sight into he perceptions which form practices and attitudes towards food safety and hygiene. This thesis will therefore engage in understanding such perceptions among vendors and consumers in Kumara and investigate how these are linked to actual practices and decision-making when preparing and vending street foods and choosing a vendor.

As I started investigating perceptions it became evident that concepts of food as well as hygiene, contamination and health risks are deeply embedded in the social and cultural context and everyday life practices. Biomedical concepts of contamination and health risks are therefore not adequate to future the full complexity of behaviors and attitudes. Cultural and anthropological theories of contamination by Mary Douglas (1956) and Edward Green (1999) are therefore relevant to explain the variety of beliefs and attitudes towards safe and unsafe food.

Hygiene perceptions and practices also turned out to be part of a complex system of interactions between vendors and consumers, particularly concerned with appearance and presentation. The impression management theory of Coffman will therefore add to understanding such behavior patterns. Finally, I found factors such as demand and trust to be strong values and this thesis Hereford takes its point of departure in realizing that perceptions of street foods quality are multi-dimensional- dependent upon far more than hygiene and health concerns. Study objectives Instead of narrowly focusing on hygiene and food safety, I therefore choose to focus on a wider concept of Food Quality. This concept embraces hygienic as well as social, cultural, nutritional and practical aspects of food quality. To make use of findings from this study the last part of the thesis will concentrate on outlining potential target groups and strategies for future hygiene promotion in the street food sector.

Therefore, the main objectives of this thesis are: l) to determine the multiple factors which influence vendors’ and consumers’ street food practices and perceptions towards food quality in Kumara and 2) to find out how these relate to safe and unsafe food practices. 3) to identify and recommend possible future hygiene promotion strategies in the street food sector. The main objectives of this study will be obtained by using various approaches: to investigate in-depth the practices by street food vendors and their customers in urban Kumara, especially practices related to food hygiene and food safety. Explore the perceptions, attitudes and awareness of street food hygiene and food contamination among these street food vendors and their customers. To explore factors in the seller-customer relation and interactions possibly influencing practices of food hygiene and food safety among both parties to identify channels of food safety information and identify possibilities and barriers to reach these for vendors and consumers and to discuss potential future promotion strategies with vendors and key-informants. Research Methods Data collection in general Qualitative data was collected from March-June 2006 in Kumara, the capital of he Central Shanty region in Ghana (see pictures) among street food vendors and customers using various data collections methods (interviews, observations and focus group discussions, see specified schedule for field activities in Annex 2). Data was compiled in handwritten field notes, pictures and recordings during field activities, and was indexed, transcribed and entered in databases on laptop as quickly as possible during the field study.

Source: win. Burnet. Internationalization. Du. AU and www. Loneliest. Com A medical anthropological research approach This study shares the general objective of the medical anthropological research, which is to study people’s ideas and practices concerning health and illness (Harden 2001: 5). The aim was to gain indents understanding of the study object in its context and thus to include the specific culture, tradition and social society as described by Jansen (2002).

By paying attention to the values, perceptions and beliefs of vendors and consumers, the study gives emphasis to the subjectivity of health and medicine related concepts (Ibid. ). This study and the medical anthropological science are therefore mimic f nature and accept various constructs of health, whether or not they coincide with bio-medical explanations of disease. The reason for initiating this qualitative research project was partly founded in previous quantitative studies of the street food sector in Kumara.

In a questionnaire survey it was found that 52% of all customers and vendors gave “ cleanliness” as the most important criteria for purchasing lettuce (see figure 2). The researcher him self then stated: “ However, what cleanliness of lettuce means to these 8 people has to be analyses elsewhere’ (Handler 2005). What this qualitative duty offers is an opportunity to understand what constitutes such concepts of cleanliness of food and an occasion to look deeper into related practices and behavior patterns.

Figure 2: Criteria when buying lettuce Criteria for selecting lettuce in Gum ass Close Location Good Price 18% Clean 15% 52% peers. Relation Fresh Others source: Handler 2005 To interpret the world from the peoples own perspectives researchers must experience actions as performed by the people (Hastier 1994). Fieldwork and qualitative data collection is therefore necessary to gain in-depth understanding. Instead of asking why people behave and practice food