

Epidemiology

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Epidemiology Foodborne illness refers to the illness resulting from consumption of contaminated food, or food that with parasites, bacteria and viruses. Such illnesses result from consumption of beverages or food that contains disease causing pathogens. Most of the foodborne illnesses arise from improper handling, storage or preparation of food. Also, foodborne illnesses may result from toxins which affect the environment (Lindell & David, 2001).

The consensus by the health community entails advocating for effective protection measures against the spread of foodborne diseases. This entails food safety to ensure monitoring of food to avoid causing foodborne diseases. Therefore, the research question is “ what can consumers do to protect themselves from foodborne illness.

The study is purely cross-sectional and investigates the control measures used to enhance prevention of foodborne illness among the consumers. First the study identifies the community, who are the consumers. Some of the basic steps towards prevention of foodborne illness include buy of foodstuffs from reputable sources to enhance any follow-up in case of an emergency. The consumer should ask the supplier of the standards they normally impose to ensure food safety (Lindell & David, 2001).

The consumer must choose foodstuff that is wholesome and appears fresh. Any unfamiliar color or odor causes for alarm, and any produce with excessive soil or dust on edible portions must be avoided. The foodstuff should be stored in dry and cool place, and the consumer should follow all directions for use. Washing of hands should be exercised before preparation of any food. All produce must be washed in a clean colander or sink under running water. The cutting boards should be washed in warm water, and any

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raw produce like fruits should not be chopped in a board used for poultry or raw meat (Lindell & David, 2001).

The cross-sectional design involves the collection of data at a definite time to assess the prevalence of chronic or acute conditions. The study involves the collection of special data like the questions about past, and they rely on the originally collected data (Lindell & David, 2001).

Strengths and Weaknesses of the Cross-Sectional Studies

The design is relatively easy and quick to conduct, and the collection of data on all variables happens at once. This is because the design involves observing the entire population. The method is applicable where the prevalence can be measured for all the factors investigated. Also, multiple outcomes can be studied. The prevalence of any health related characteristics or disease enhances the assessment of the burden of the diseases within the population. This is critical in allocating and planning for the health resources. Furthermore, the design enhances descriptive analysis as well as assist in generation of hypothesis (Mitchell, 2007).

The cross-sectional design is disadvantageous in that it derails the determination of whether the results obtained followed the exposure in time or the exposure followed the results. Therefore, the design is not appropriate for the study of short-term or rare diseases. The cross-sectional design measures prevalent cases rather than incident ones, hence the data obtained always reflects etiology and determinants of survival. The design may be unable to measure the incidence, and the associations identified may experience difficulties in interpretation. Also, cross-sectional design is susceptible to bias because of misclassification and low response of the recall bias (Mitchell, 2007).

In conclusion, food-borne disease indicates the need for improvement of food safety. The public health scientists are in constant research of the prevention measures among the consumers. This is a combined effort between health professionals and consumers. The health professionals propose and advocate for prevention measures and consumers should implement such measures.

References

Lindell, M., & David, J. (2001). Accounting for Common Method Variance in Cross-sectional Research Designs. *Journal of Applied Psychology* 86(1), 114-21.

Mitchell, R. (2007). Preventing Food-borne Illness in Food Service Establishments: Broadening the Framework for Intervention and Research on Safe Food Handling Behaviors. *International Journal of Environmental Health Research* 17(1), 9-24.