Assessment of The Hygienic Condition of Food Canteens at The University of Abuja

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Abstract

his research reports bacteriological evaluation of food contact surfaces at the Mini and Main campuses of the University of Abuja food canteens. 390 samples were collected from 43 canteens and bacterial isolation was done using Nutrient agar (HI MEDIA), Mannitol Salt Agar (HI MEDIA), Eosin Methylene Blue (TM MEDIA), and MacConkey Agar (TM MEDIA) by streak inoculation method. Ninety-five (95) questionnaires were distributed to forty-three (43) canteen owners and fifty-two (52) workers. In the face of adequate knowledge on food safety among participants, the results revealed that majority had unsafe hygiene practice, as most vendors do not wear apron, cover hair when serving or preparing food or clean food contact surfaces before and after preparing food to sell. Thus, vendors need education on safety hygiene practices knowing that knowledge without practice is vain. The percentage prevalence of bacteria organisms isolated from this study as confirmed using conventional biochemical characterization are as follows: Staphylococcus thirty (30) (22.9%), Streptococcus fifteen (15) (11.5%), Bacillus twenty-seven (27) (20.6%), Klebsiella ten (10) (7.6%), Escherichia coli forty (41) (31.3%) and Proteus eight (8) (6.1%) from both campuses. This study shows the occurrence of pathogenic bacteria organisms isolated from the food canteens in the mini and main campuses of the University of Abuja, hence the need to create awareness and enlightenment so as to eliminate or extremely decrease the prevalence of bacterial food borne Diseases around the campuses and its environs.

Keywords: Hygiene, Canteen, Bacteria, Prevalence, Knowledge

1. INTRODUCTION

1.1 Background of the Study

Food is defined by the World Health Organization as any processed, semi-processed, or raw substance that is meant for either animal or human consumption (WHO, 2022). Food is a crucial tool for meeting the body's demands on a regular basis (Kesari and Noel, 2022) and people should be concerned about improving food safety and hygiene standards since it will help avoid the spread of food-borne illnesses. Akande (2002) adopts a similar perspective when defining food as any material that individuals prepare and consume in order to meet their physiological demands. Additionally, food is defined by Wachukwu *et al.*, 2020 as any liquid or solid substance that can nourish the body when consumed and digested. Food includes any consumed item that can meet a person's nutritional needs and must be wholesome and secure before adequate and healthy food can support wellbeing, but unacceptable and contaminated food components pose a risk to animal and human health (Akintaro, 2012; Enunwaonye *et al.*, 2020). Bacteriological contaminants are important cause of food-borne illness, which may differ in severity from a mild disturbance to a chronic or critical illness (Rahman *et al.*, 2015).

Food-borne illnesses such as botulism, listeriosis, cholera, camphylobacter enteritis, colibacillosis, salmonellosis, shigellosis, leptospirosis, toxoplasmosis, amoebiasis, and yersiniosis are caused by pathogenic bacteria organisms in developing nations (Edema *et al.*, 2005). Food-borne infections are significant sources of production loss and pose serious dangers to animal and human health in Nigeria (Ajao and Atere, 2009). The presence of high bacterial loads on surfaces, plates, equipment's, cooking utensils, that comes in contact with food serves as sources of contamination which also presents a major threat to animal and human health. (Bala *et al.*, 2015). Globally, an enormous community of animal/humans will be impacted if food contamination by bacterial organisms happens within a canteen as a result of inadequate hygienic practices (Zemichael, 2019).

Hygiene is defined as any measures taken to ensure a healthy environment and prevent disease or associated health risks (Kamboj *et al.*, 2020). Thus, maintaining one's environment to avert illness and diseases is a relevant part of hygiene for a wholesome living in society. Satish *et al.*, (2020), referred to hygiene as steps taken to uphold health and stop the spread of disease. Unhygienic behaviors have been found to expose people to infections that include clinical symptoms such as fever, nausea, abdominal pain, retching, vomiting, diarrhea, dehydration, fatigue and other environmental health problem (Thomas, 2017).

Good quality food when consumed, is thought to have an influential impact on the state of health of every community, hence University institutional catering services should receive more awareness and enlightenment (Brimblecombe *et al.*, 2014), as it is most likely that staffs and students will have their primary meals away from their houses and lodging houses (Tóth and Koller, 2017). This present investigation focused on the hygiene standard of food canteen in University of Abuja.

1.2 Statement of the Problem and aim of the study

The University of Abuja is one of the leading public universities in Nigeria, with a population of over 40,000. The food vendors at the University of Abuja have been observed to have unkept hairs,

dirty foot wears, cough without the use of handkerchief, and usage of dirty water to wash utensil in an unhygienic environment. This type of scenario can lead to food contamination that may result to infection within the university community.

There is very little data available on food-borne illnesses caused by micro-organism among students and staff patronizing food canteens within the University of Abuja community.

There is low level of awareness and enlightenment of the food vendors and students on the types of bacteria organisms that can be acquired from consuming unhygienically prepared food at the University of Abuja.

This study aimed to determine the occurrence of bacteria organisms from food preparation surfaces in food canteens at University of Abuja.

1.3 Review of Related Literature

Bittsánszky *et al.*,2015 studied the hygienic conditions of canteens by means of surface microbial analysis. The kitchen surfaces of 11 different canteens were surveyed, the results showed an increase in microbial load over the regulations of Decree 4/1998 despite regular food handler's training.

Reports on the assessment of sanitary status of food and drinks catering establishments which was a descriptive observational study in south east Asmara, Eritrea. The results of the investigation of 139 different foods and beverages revealed that the sanitary state was unacceptable, and recommendations were put forward to enforce rules and regulations within the community Idris *et al.*, 2019. In 2018 Elechi and Gladys findings revealed that, there is a significant positive correlation between knowledge, attitude and practice of food hygiene among food handlers.

Ajao and Atere (2009) randomly selected six canteens to conduct a bacteriological assessment and hygiene standard of food canteens in Kwara State Polytechnic, Ilorin, and the result of their study indicated that clean plates, walls, tables and serving counters have high hygiene quality indices of 75%, 91%, 62% and 65% respectively. While floor, hand towels, apron, money and hand swabs have low hygiene quality indices of 53%, 36%, 56%, 46% and 40% respectively. (Todd, 2023). In addition, they discovered that the dessert and stew samples had lower levels of microorganisms than the water and vegetable samples, with the exception of the Enterobacter species (10.3%) and Bacillus species (12.5%) that predominated during their sampling period. Faremi *et al.*,2018 studied food safety and hygiene practices among food vendors in a tertiary educational institution in south western Nigeria using a structured questionnaire. They found that 67.2% of the respondents had inadequate knowledge on how food-borne illnesses spread. Similar to this, researchers conducted 102 interviews, and their results, along with observations of the university canteen's surroundings, revealed that food servers rarely wash their hands and this may serve as a source of food contamination Okojie *et al.*, 2005.

2. MATERIALSAND METHODOLOGY

2.1 StudyArea

The research work was carried out in Gwagwalada area council, federal capital territory (FCT) Abuja, Nigeria. Gwagwalada Area council is located between $8^{\circ}25^{11}$ and $9^{\circ}25^{11}$ North of the equator and longitudes of $6^{\circ}45^{11}$ and 7° and 45^{11} East of the Greenwich. The territory covers an area of 2,700 square kilometres. Gwagwalada is lying close to the centre of the country, and is situated wholly within the region generally referred to as the "Middle Belt" Dawn *et al.*, 2000. It shared boundaries with Kuje to the East, Abuja Municipal Area Council to the North, Abaji to the South and Zuba to the West. The federal capital territory was formed in 1976 shares boundary with Kogi, Kaduna, Niger and Nassarawa lying between latitude 8.25°N and 9.20°N of the equator and longitude 6.45°E and 7.39°E east of Greenwich Meridian.

2.2 Research Design and Sampling Technique

This study is a cross sectional study of the 43 canteens in university of Abuja main and mini campuses using convenience sampling technique.

2.3 Sample Size Determination

Sample size was determined using the formula as described by Thrusfield 2005, using 50% prevalence rate (Ajao, 2009), approximately 390 samples was selected for the microbial data collection.

$$N = \frac{Z^2 pq}{d^2}$$

Where:

N= Sample size

q=1-p

Z= 1.96 (normal distribution) from table

P= Prevalence rate from the average of previous studies

D=Desired absolute precision of 5% with 95% Confidence Interval

2.4 Sample Collection and Sample processing

Three hundred and ninety (390) swab samples were collected from table tops, plates and refrigerator handle using commercial sterile swab sticks from the 43 canteens/maishai stalls in main and mini campus, University of Abuja from January to March, 2023. 270 swab samples were obtained from main campus at convocation ground, market, hostels and faculty canteens while 120 swab samples were obtained from mini campus at different canteen location such as Mini campus gate, hostels, school field area. The swab samples were transported, packed on ice to the Microbiology laboratory of the Department of Veterinary Microbiology, University of Abuja for processing and Bacteriological analysis.

S/N	Source	Main campus	Mini campus	Total
1.0	Plate (A)	93	36	129
2.0	Refrigerator handle(B)	70	12	82
3.0	Table Top (C)	107	72	179
4.0	Total	270	120	390

Table 1 Sources of samples and Locations

2.5. Media Preparation

All media and reagent were prepared according to the manufacturer's instructions (Difco laboratories, USA, paisley, Scotland, UK; Antec, London, UK and Oxiod, London, UK).

2.6. Laboratory Culture and Identification

2.6.1 Non-selective pre-enrichment

The swab sample obtained was inoculated into the already prepared peptone water and then incubated at 37 degrees Celsius for about 24 hours.

2.6.2 Selective Plating

A loopfull of inoculum from the incubated peptone water was taken and streaked on MacConkey, Eosine methylene blue and Manitol salt agar simultaneously across the surface of a whole agar plate in a quadrant streak pattern (avoiding the edges of the plate). The plates were incubated at 37°C for 24 hours. Suspected colonies were sub-cultured into nutrient agar slant at 37°C for 24 hours to obtain a pure culture. Colonies were observed and taken for preliminary identification.

2.6.3 Non selective plating

The samples were inoculated on nutrient agar directly from the enrichment medium (peptone water) by streaking with a wire loop across the surface of a whole agar plate in a quadrant streak pattern (avoiding the edges of the plate). The plate was incubated at 37°C for 24hours and the growths were differentiated based on morphology.

2.7 Preliminary Identification

Preliminary screening and identification of the organism were conducted using Gram staining, oxidase and catalase test.

2.8 Biochemical Characterization of Isolates

Conventional Biochemical Characterization

Biochemical test such as indole test, methyl red test, citrate test, urease test, Voges proskauer test, sugars (glucose, inositol and manitol, was performed (Cheesbrough, 2006).

2.9 Questionnaire Administration

A total number of ninety-five (95) questionnaires were distributed between January and February 2023 to 43 canteen owners and 52 workers from the 43-canteen sampled to ascertain the level knowledge and analysis of risk factors that are concerned with both personal and general hygiene practices towards food consumption. Questionnaire data were analyzed using descriptive tables and graphical analysis method with the use of Statistical Package for Social Science (SPSS v.21) software.

3. **RESULTS**

Media	Growth	No Growth	Total
Nutrient agar	381 (97%)	9 (2.3%)	390
Eosine methylene	85 (21.8%)	305 (78.2%)	390
blue agar			
MacConkey agar	266 (68.2%)	124 (31.8%)	390
Mannitol salt agar	37 (9.5%)	353 (90.5%)	390

Table 2: Number of Growth of microorganisms on different media

Table 3: Biochemical reactions of the suspected bacterial isolate

S/N	Organism	BIOCHEMICAL REACTION								
			Number of Positive							
		Oxidase	Catalase	Indole	MR	VP	Citrate	Urease		
1	Staphylococcus	0	30	0	30	30	30	30		
2	Streptococcus	0	0	0	15	0	15	0		
3	E.coli	0	41	41	41	0	0	0		
4	Bacillus	0	27	0	20	27	27	0		
5	Proteus	0	8	0	8	0	8	8		
6	Klebsiella	0	10	0	0	10	10	10		
			Ν	umber of	Negat	ive				
1	Staphylococcus	30	0	30	0	0	0	0		
2	Streptococcus	15	15	15	0	15	0	15		
3	E.coli	41	0	0	0	41	41	41		
4	Bacillus	27	0	27	27	0	0	27		
5	Proteus	8	0	8	0	8	0	0		
6	Klebsiella	10	0	10	10	0	0	0		

S/N	Biochemical	al Organisms						
	Reaction	Staphylococcus	Streptococcus	Е.	Bacillus	Proteus	Klebsiella	
				coli				
1	Gram	+	+	-	+	-	-	
	reaction							
2	Catalase	+	-	+	+	+	+	
3	Oxidase	-	-	-	Variabl	-	-	
					e			
4	Indole	-	-	+	-	-	-	
	production							
5	VP	+	-	-	+	-	+	
6	MR	+	+	+	-	+	-	
7	Urease	+	-	-	-	+	+	
8	Motility	-	-	+	+	+	-	
9	Citrate	+	+	-	+	+	+	
10	Shape	Cocci	Cocci	Rod	Rod	Rod	Rod	
11	Gas	-	-	+	-	+	+	
12	H_2S	-	+	-		+	-	
	Total							

Table 4: Biochemical reaction of the bacteria suspected isolates.

Key: + positive, - negative

Ta	ıbl	le	7:	L)emo	ograp	hic	Inf	or	mati	ion
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		Frequency	Percentage (%)
•	Age		
	< 20 years	2	2.1
	21-30 years	50	52.6
	31-40 years	24	25.3
	41-50 years	16	16.8
	51-60 years	3	3.2
	Total	95	100.0
•	Educational Qualification canteen owners and staff		
	No Education	11	11.6
	Primary Level	16	16.8
	Secondary Level	46	48.4
	Tertiary Level	22	23.2
	Total	95	100.0
•	Type of duty Performed in Canteen		
	Worker	52	54.7
	Canteen Owner	43	45.3
	Total	95	100.0
•	Canteen Respondent Location		
	Main Campus Uni-Abuja	74	77.9
	Mini Campus Uni-Abuja	21	22.1
	Total	95	100.0

Table 5: Micro -organisms isolated in various swab samples from canteens at University of
Abuja

Bacteria	Plates	Refrigerator handle	Table top
Staphylococcus	+	+	+
species			
Streptococcus species	+	+	+
Escherichia coli	+	+	+
Bacillus species	-	+	+
Proteus species	-	+	-
Klebsiella species	+	-	-

Key +; present; - not present

Bacterial	Frequency	Plates	Refrigerator	Table	Percentage
isolate			handles	tops	prevalence
					(%)
Staphylococcus	30	7	8	15	22.9
species					
Streptococcus	15	4	6	5	11.5
species					
E. coli	41	10	22	9	31.3
Bacillus	27	8	7	12	20.6
species					
Proteus species	8	3	2	3	6.1
Klebsiella	10	5	3	2	7.6
species					
TOTAL	131			TOTAL	100

Table 6: Distribution of bacterial isolates and their percentage prevalence from the study.

	Frequency	Percentage (%)
• Age		
< 20 years	2	2.1
21-30 years	50	52.6
31-40 years	24	25.3
41-50 years	16	16.8
51-60 years	3	3.2
Total	95	100.0
• Educational Qualification canteen owners and staff		
No Education	11	11.6
Primary Level	16	16.8
Secondary Level	46	48.4
Tertiary Level	22	23.2
Total	95	100.0
• Type of duty Performed in Canteen		
Worker	52	54.7
Canteen Owner	43	45.3
Total	95	100.0
Canteen Respondent Location		
Main Campus Uni-Abuja	74	77.9
Mini Campus Uni-Abuja	21	22.1
Total	95	100.0

Table 7: Demographic Information

					Count	Column N %
If they use disin	fectants	to clea	n serving tables			
Canteen	Main Ca	mpus	Canteens Clean serving	No	60	63.2%
Respondent	UniAbuj	a	Tables with Disinfectants	Yes	14	14.7%
Location			on regular basis	Total	74	77.9%
	Mini Ca	mpus	Canteens Clean serving	No	18	18.9%
	UniAbuj	a	Tables with Disinfectants	Yes	3	3.2%
			on regular basis	Total	21	21.1%
If operators oft	en clean	food co	ontact surfaces before a	nd after		
preparing food	to sell					
Canteen Respondent	Main	Campus	Operators often clean Food	No	60	63.2%
Location	UniAbuja		Contact Surfaces before & after			
			preparing Food to Sell			
	Mini	Campus	Operators often clean Food	Yes	14	14.7%
	UniAbuja		Contact Surfaces before & after	Total	74	77.9%
			preparing Food to Sell	No	14	14.7%
				Yes	7	7.4%
				Total	21	22.1%

Table 8: Comparison between main and mini campus





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Figure 3: Canteen operators disagree that hand washing with soap/water is a personal hygiene practice they observed after using Bathroom





Figure 4: Uniabuja canteen staff confirmed head Tie and Apron are not used regularly while cooking

4. DISCUSSION

From the 390 samples analyzed, six (6) bacteria organisms were isolated as shown on Table 6. 30 were positive for *Staphylococcus, fifteen* (15) positive for *Steptococcus* species, forty-one (41) positive for *E.coli*, twenty-seven (27) positive for *Bacillus* species, eight (8) positive for *Proteus* species, ten (10) positive for *Klebseilla* species which shows the prevalence of 22.9%, 11.5%, 31.3%, 20.6%, 6.1%, 7.6% respectively. However the pathogen isolated in this present study are similar to microorganism reported by (Okonko *et al.*, 2008). The result obtained shows that *E. coli* has the highest prevalence in both main and mini campus which was higher than the prevalence found by (Ajao and Atere, 2009). The microbes could have contaminated the food from variety of sources including animal skin, feces, utensil and raw food product. The prevalence of *Staphylocccus* species from apron, hand towel sample, money, and palm swab. The coliform isolated from the surface sample could probably have come from the raw materials, water, dust, and palm of the food handlers. *Streptococcus, Proteus,* and *Staphylococcus* isolated from refrigerator handle, table tops and plates is evidence of cross contamination

The diversity in sociodemographic and socioeconomic position, timing of the study, and study tool utilized could all be contributing factors to the discrepancy in food hygiene practice level. More than half of the study participants practiced poor food hygiene, which could have a significant impact on the pathogenesis of disease. Foodborne illnesses are largely caused by improper food handling, according to the Codex Alimentarius Commission's 2003 report. Several other studies conducted among food handlers at universities in Ethiopia also revealed that food handlers were vehicles of disease-causing microorganisms such as *Shigella* and Salmonella (Dagnew *et al* .,2013). Research among Arba Minch University food handlers also found that 6.9% of Salmonella and 3% of Shigella isolates were found in stool cultures (Mama and Alemu 2016). To ensure proper food handling and to develop rules for food safety and hygiene, a culture of food safety is necessary (De Andrade *et al.*, 2020). Experienced food handlers had reported better food hygiene practice. This association is consistent with earlier studies conducted regarding food hygiene practice and

determinant factors (Legesse *et al.*, 2017; Meleko., 2015; Sharif *et al.*, 2013). However other studies reported that work experience has no association with level of food safety practice (Baluka *et al.*, 2015). Work experience is crucial to improving food hygiene practices since it gives employees more opportunities to receive orientation and training in this area.

It has been observed that Knowledge, attitude and practice of food safety play a basic role in preventing and controlling food poisoning outbreaks (Sani *et al.*, 2014).

From Figure 1, the grouping of canteen operators' response by location (Main and Mini Campus). 62 or 84% canteen personnel out of seventy-four (74) workforce surveys in main campus have never been trained on food safety skills, compared to only twelve (12) personnel with previous training experience. Also, for canteen group in mini campus, 76% or sixteen (16) personnel out of twenty-one (21) respondents have not had any form of training on food safety management skills.

Figure 2 shows that the higher the level of educational qualification obtained by canteen owners or workers, the higher the acceptance rate (73.7% or 70 yes responses) that incorrect handling of food prepared and served in their canteen domain can cause food contamination by microorganism.

Figure 3 combined with result in Table 9 suggest that, regardless of the age factor of the canteen owner or workers, 71.6% or 68 personnel out of 95 respondents do not wash their hands with soap after making use of toilet and bathroom.

In Figure 4, 95.8% of the canteen personnel confirmed that head covering and apron are not used regularly while cooking.

The questionnaire survey conducted during the research reveals the extent of awareness. Despite this, canteen operators and workers have not ensured proper hygiene to prevent potential transmission of pathogenic organisms to students and staff of the institution, highlighting a gap in understanding contaminants effects on humans. In the present study, the respondents were mainly within the ages of 20 - 60 years old, female with either a secondary or tertiary level of education and operating in university of Abuja which is an urban area. This trend is similarly observed in previous studies where the food vendors are predominantly female (Monney, *et al.*, 2013; Nurudeen, *et al.*, 2014; Musa and Akande, 2003; Afolaranmi, *et al.*, 2015; Tessema, *et al.*, 2014; Okojie and Isah, 2014) within the ages of 20 - 40 years old (Chukuezi, 2010; Musa and Akande, 2003) and have either a secondary or tertiary level of education (Okojie and Isah, 2014). On the contrary, some studies have observed that food vendors were predominantly male (Muinde and Kuria 2005; Duse, 2003) with no education or primary education as the highest level of education attained (Nurudeen, *et al.*, 2014; Afolaranmi, *et al.*, 2015; Musa and Akande, 2003; Bamidele, *et al.*, 2015).

In the present study, it was found that the majority of respondents had good understanding of the food vendors' knowledge of food hygiene. This finding was comparable to several previous studies conducted in Nigeria (Afolaranmi, *et al.*, 2015; Bamidele, *et al.*, 2015). The majority of food vendors, however, were found to have poor knowledge of food hygiene, according to studies from Ethiopia, Malaysia, Iran, Korea, and Thailand (Tessema *et al.*, 2014; Rahman *et al.*, 2012).

It is tempting to suggest that the majority of respondents in the current study had either a secondary or tertiary level of education, which may have served as a foundation for increased comprehension of information about food hygiene and consequently improved knowledge. This would explain



why the majority of food vendors in the study had a high level of knowledge. According to Kalua (2001), knowledge positively influences the development of attitudes; in other words, attitudes can be viewed as a reflection of knowledge, which is connected to personal beliefs and prior experiences. This explanation may help to explain the findings of the current study, which showed that the majority of respondents had good knowledge of food hygiene and an attitude toward it that was congruent with this knowledge.

This pattern was also seen in a study conducted in Malaysia (Rahman, *et al.*, 2012), where the majority of respondents had poor knowledge and attitude, and in earlier studies conducted in Nigeria (Bamidele, *et al.*, 2015), where the majority of respondents had good knowledge and attitude. Thus, the level of personal and environmental hygiene in the present study appears to be fairly high, which is comparable to some other studies (Martins, 2006; Von and Makhoane, 2006) whose authors contend that because food vendors must rely on repeat business from customers to maintain and sustain their livelihood, they are more likely inclined to produce relatively safe food by maintaining the minimum required level of hygiene standard.

According to Chukueze, (2010) it is not necessary to require food vendors to undergo medical examinations before they do business operations or at regular intervals thereafter, because doing so does not appreciably increase food safety. Nevertheless, there is always a chance that food vendors could be healthy carriers of disease and infect customers; as a result, it is in the consumer's best interest for all food vendors to be scrutinized.

Further analysis revealed that the level of knowledge, attitude and formal training were significantly associated with food hygienic practices of the respondents. This was consistent with a number of studies; in Malaysia by Rahman *et al.*, (2012), where knowledge, attitude and training were significantly associated with practice, in Nigeria by Afolaranmi *et al.*,(2015), where knowledge and training were significantly associated with practice, in Ethiopia and Thailand by Tessema *et al.*, (2014) respectively, where both studies reported that, knowledge was significantly associated with practice. On the other hand, a study in Nigeria by Out, (2014) reported that attitude was not significantly related to practice, and a study in Ghana by Rheinländer *et al.*, (2008) reported that knowledge was not significantly related to practice. These findings were attributed to the existing socio-cultural context, which most likely had a greater impact on safe food practices. The World Health Organization (WHO) has stated that the use of aprons and hair covers by food vendors has more to do with aesthetics and consumer assurances than food safety, despite the low level of food hygienic practice observed in the present study as shown by their practices like 4.1% of wearing apron and head ties as an indication of low level of hygiene (World Health Organization 1996).

5 Conclusion

The hygienic condition of foods canteens at both campuses of the University of Abuja was analyzed by means of cultural methods, well-structured questionnaire, and standard biochemical test. The prevalence of pathogenic bacteria on food preparation surfaces was also determined in this research. With regards to the findings of the current research, it can be inferred that there is high occurrence of *E. coli* that can be isolated from food contact surfaces in both campuses of the university of Abuja due to the unfavorable hygiene condition of food handlers as shown in the questionnaire survey carried out in this research

Conflict of Interest

The researchers and mentors declare no conflict of interest.

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REFERENCES

- Afolaranmi, T.O., Hassan, Z.I., Bello, D.A. and Misari, Z. (2015) Knowledge and Practice of Food Safety and Hygiene among Food Vendors in Primary Schools in Jos, Plateau State, North Central Nigeria. Journal of Medical Research, 4, 16-22.
- Ajao, A. T. and Atere, T. G. (2009) Bacteriological Assessment and Hygienic Standard of Food Canteens InKwara State Polytechnic, Ilorin, Nigeria, African Scientist Vol. 10, No. 3, September 30, 2009.
- Akande, T. M (2002). Routine Medical Examination of Food Vendors in Secondary Schools in Illorin. Nigeria Journal of Medicine, (1)11-24.
- Akintaro, O. A. (2012). Food handling, hygiene and the role of food regulatory agencies in promoting good health and development in Nigeria. International Journal of Health and Medical Information, 1(1-3), 1-8.
- Bala, K. Agarwal, M. and Gupta, L (2015) Comparative Account of Microbial Load Assessment in a University Cafeteria, International Journal of Pharma Research and Health Sciences, Volume 3 (5), Page-848-856, https://www.pharmahealthsciences.net/pdfs/volume3issue5/5-vol3-issue5-MS-15217.pdf
- Baluka SA, Miller R, Kaneene JB. Hygiene practices and food contamination in managed food service facilities in Uganda. Afri J Food Sci. 2015;9(1):31–42.
- Baluka, S. A., Miller, R., & Kaneene, J. B. (2015). Hygiene practices and food contamination in managed food service facilities in Uganda. African Journal of Food Science, 9(1), 31–42.
- Bamidele, J.O., Adebimpe, W.O., Oladele, E.A. and Adeoye, O.A. (2015) Hygiene Practices among Workers in Local Eateries of Orolu Community in South Western Nigeria. Annals of Medical and Health Sciences Research, 5, 235-240.
- Bittsánszky, A, Illes, C.B., & Fulop, L (2015) Surveying the hygiene conditions of canteens by means of surface microbiological analysis, ICOM papers 089, pg. 488

- Brimblecombe, J., Maypilama, E., Colles, S., Scarlett, M., Dhurrkay, J. G., Ritchie, J., & O'Dea, K. (2014). Factors influencing food choice in an Australian Aboriginal community. Qualitative health research, 24(3), 387-400.
- Cheesbrough, M. (2006). District laboratory practice: In tropical countries. Part 2 (2nd ed.). Cambridge University Press.
- Chukuezi, C. O. (2010). Food safety and hygienic practices of street food vendors in Owerri, Nigeria. Studies in Sociology of Science, 1, 50–57.
- Dagnew, M., Tiruneh, M., Moges, F., & Gizachew, M. (2013). Bacterial profile and antimicrobial susceptibility pattern among food handlers at Gondar University Cafeteria, Northwest Ethiopia. Journal of Infectious Diseases & Therapy, 1–6.
- De Andrade, M. L., Stedefeldt, E., Zanin, L. M., & da Cunha, D. T. (2020). Food safety culture in food services with different degrees of risk for foodborne diseases in Brazil. Food Control, 112, 107152.
- Duse, A. G., da Silva, M. P., & Zietsman, I. (2003). Coping with hygiene in South Africa, a water scarce country. International Journal of Environmental Health Research, 13, S95–S105.
- Edema MO, Atagese AO, Idowu AO (2005): Microbial quality of micro wave processed foods in the book of abstract of the 29th annual conferences and general meeting on Microbes as agents of sustainable development.
- Elechi, C. E., & Gladys, A. (2018). Knowledge, Attitude and Practice of Food Hygiene among Food Handlers in Port Harcourt Local Government Area of Rivers State. Research Journal of Food Science and Quality Control, 4(2), 9-17.
- Enunwaonye H. C, Olugbade, A. C and Uwaleme, O. C. (2020) Food Safety and Hygiene Practices among FoodHandlers in Selected Markets in Benin-City, EdoState, Nigeria, International Journal of Science and research, Vol 9, issue 4
- Faremi, F.A., Olutubi, M.A., &Nnabuife, G. (2018) Food safety and hygiene practices among food vendors in a tertiary education institution in South Western Nigeria, European Journal of Nutrition & Food Safety, vol.8, no 2, pg. 59-70
- Idris, M, Samuel, W.J., Amanuel, G. T & Habton, K. (2019) Food and drinks catering establishments: A descriptive observations study in south east Asmara, Eritrea.
- Kalua, F. (2001) The Relationship between Knowledge, Attitude and Practices of Care Givers and Food Hygiene in Day Care Centers. MTech Degree Dissertation, Technikon Pretoria, Pretoria
- Kalua, F. (2001). The relationship between knowledge, attitude and practices of caregivers and food hygiene in day care centers. MTech Degree Dissertation, Technikon Pretoria.
- Kamboj, S., Gupta, N., Bandral, J. D., Gandotra, G., & Anjum, N. (2020). Food safety and hygiene: A review. International Journal of Chemical Studies, 8(2), 358-368.
- Kesari, A. and Noel, J. Y (2022) Nutritional Assessment, National Library of Medicine, National Centre for Biotechnological Information. https://www.ncbi.nlm.nih.gov/books/NBK580496/
- Legesse, D. T. M., Agedew, E., & Haftu, D. (2017). Food handling practices and associated factors among food handlers in Arba Minch Town public food establishments in Gamo Gofa Zone, Southern Ethiopia. Epidemiology (Open Access), 2, 07.
- Mama, M., & Alemu, G. (2016). Prevalence, antimicrobial susceptibility patterns and associated risk factors of Shigella and Salmonella among food handlers in Arba Minch University, South Ethiopia. BMC Infectious Diseases, 16(1), 1–7.

- Martins, J.H. (2006) Socio-Economic and Hygiene Features of Street Food Vending in Gauteng. South African Journal of Clinical Nutrition, 19, 18-25.
- Meleko, A., Henok, A., Tefera, W., & Lamaro, T. (2015). Assessment of the sanitary conditions of catering establishments and food safety knowledge and practices of food handlers in Addis Ababa University Students' Cafeteria. Science, 3(5), 733–743.
- Monney, I., Agyei, D. and Owusu, W. (2013) Hygienic Practices among Food Vendors in Educational Institutions in Ghana: The Case of Konongo. Foods, 2, 282-294.
- Muinde, O.K. and Kuria, E. (2005) Hygienic and Sanitary Practices of Vendors of Street Foods in Nairobi, Kenya. African Journal of Food Agriculture and Nutritional Development, 5, 1-15.
- Musa, O.I. and Akande, T.M. (2003) Food Hygiene Practices of Food Vendors in Secondary Schools in Ilorin. Nigerian Postgraduate Medical Journal, 10, 192-196.
- Nurudeen, A.A., Lawal, A.O. and Ajayi, S.A. (2014) A Survey of Hygiene and Sanitary Practices of Street Food Vendors in the Central State of Northern Nigeria. Journal of Public Health and Epidemiology, 6, 174-181.
- Okojie OH, Wagbatsoma VA, Ighoroge AD. An assessment of food hygiene among food handlers in a Nigerian university campus. Niger Postgrad Med J 2005;12:93-6.
- Okojie, P.W. and Isah, E.C. (2014) Sanitary Conditions of Food Vending Sites and Food Handling Practices of Street Food Vendors in Benin City, Nigeria: Implication for Food Hygiene and Safety. Journal of Environmental and Public Health, 2014, Article ID: 701316.
- Okonko, I. O., Ogunjobi, A. A., Fajobi, E. A., Onoja, B. A., Babalola, E. T., and Adedeji A. O. (2008). Comparative Studies and Microbial Risk Assessment of different Ready-to-Eat (RTE) frozen sea-foods processed in Ijora-olopa, Lagos State, Nigeria. African Journal of Biotechnology Vol. 7 (16), pp. 2898-2901.
- Otu, A., Ebenso, B., Okuzu, O. and Osifo-Dawodu, E. (2016). Using a Health tutorial application to change knowledge and attitude of frontline health workers to Ebola virus disease in Nigeria: a before-and-after study. Human Resources for Health, 14(1): 1-9.
- Rahman, M. A., Sultan, M. Z., Rahman, M. S., & Rashid, M. A. (2015). Food adulteration: A serious public health concern in Bangladesh. Bangladesh Pharmaceutical Journal, 18(1), 1-7.
- Rahman, M.M., Arif, M.T., Bakar, K. and Tambi, Z. (2012) Food Safety Knowledge, Attitude and Hygiene Practices among the Street Food Vendors in Northern Kuching City, Sarawak. Borneo Science, 31, 94-103.
- Rheinlander, T., Olsen, M., Bakang, J.A., Takyi, H., et al. (2008) Keeping up Appearances: Perceptions of Street Food Safety in Urban Kumasi, Ghana. Journal of Urban Health, 85, 952-964.
- Sani, N. A., & Siow, O. N. (2014). Knowledge, attitudes, and practices of food handlers on food safety in food service operations at the University Kebangsaan Malaysia. Food Control, 37, 210–217.
- Satish, Kumar, Reddy, M. A., Paul, P., Das, L., Darshan, J. C., Kurian, B. P., ...& Ravindra, B. N. (2020). Importance of understanding the need of personal hygiene: A comprehensive review. Int J Res Pharm Pharm Sci, 5, 56-61.
- Sharif, L., Obaidat, M. M., & Al-Dalalah, M. R. (2013). Food hygiene knowledge, attitudes, and practices of the food handlers in the military hospitals. Food & Nutrition Science, 4(3), 245–251.

- Tessema, A. G., Gelaye, K. A., & Chercos, D. H. (2014). Factors affecting food handling practices among food handlers of Dangila Town food and drink establishments, North West Ethiopia. BMC Public Health, 14, 571.
- Tessema, A.G., Gelaye, K.A. and Chercos, D.H. (2014) Factors Affecting Food Handling Practices among Food Handlers of Dangila Town Food and Drink Establishments, North West Ethiopia. BMC Public Health, 14, 571.
- Thomas Bintsis (2017) Foodborne pathogens, AIMS Microbiol. 3(3): 529–563, Published online Jun 29. doi: 10.3934/microbiol.2017.3.529
- Thrusfield, M. (2005) Veterinary epidemiology. 2nd Edition, Blackwell Science, Oxford, 117-198.
- Todd, E. C. (2023). Personal hygiene and food worker health. In E. T. Ryser & J. T. Jianghong (Eds.), Food Safety Management (pp. 699–734). Academic Press.
- Toth, A. J., Koller, Z., Illés, C. B., & Bittsánszky, A. (2017). Development of conscious food handling in Hungarian school cafeterias. Food Control, 73, 644–649.
- Von, H. A., & Makhoane, F. M. (2006). Improving street food vending in South Africa: Achievements and lessons learned. International Journal of Food Microbiology, 111, 89–92.
- Wachukwu, C., Happiness, I., & Salomi, O. O. (2020). Street foods consumption and the nutritional status of the elderly in Obio-Akpor local government area, Rivers State, Nigeria. International Journal of Home Science, 6(1), 79–85.
- World Health Organization. (1996). Essential safety requirements for street-vended foods.
- World Health Organization. (2007). WHO global strategy for food safety: Safer food for better h e a l t h . R e t r i e v e d f r o m http://www.who.int/foodsafety//publications/general/en/strategyen.pdf
- World Health Organization. (2022). Food safety is everyone's business in traditional food markets. Retrieved from https://iris.who.int/bitstream/handle/10665/354473/WHO-HEP-NFS-AFS-2022.6-eng.pdf?sequence=1
- Zemichael Gizaw. (2019). Public health risks related to food safety issues in the food market: A systematic literature review. Environmental Health and Preventive Medicine. Retrieved from https://environhealthprevmed.biomedcentral.com/articles/10.1186/s12199-019-0825-5