

Evaluating the knowledge and implementation of food safety practices in local eateries in Malate, Manila

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INTRODUCTION

Food safety has become an important public health concern due to the increasing risk of foodborne illnesses. In the Philippines, local eateries provide affordable and accessible meals but may face challenges in maintaining proper food safety practices because of limited resources, inadequate training, and lack of awareness of hygiene standards. Although the Food Safety Act of 2013 provides a regulatory framework for food safety, proper implementation among small-scale food establishments remains a concern. In Malate, Manila, where numerous local eateries serve residents and visitors, ensuring safe food handling is particularly important. However, limited research has focused on the knowledge and implementation of food safety practices among small eateries. Therefore, this study aims to assess the food safety knowledge and practices of food vendors in selected eateries in Malate, Manila, identify areas for improvement, and provide recommendations to promote safer food handling and protect consumers from foodborne illnesses.

METHOD

This study employed a quantitative descriptive research design. Data were collected through a validated, self-administered questionnaire distributed to eatery owners and staff in Malate, Manila. Convenience sampling was utilized due to accessibility considerations during the data collection period.

The instrument consisted of three major sections:

Respondent profile (years employed, food safety training earned, role in establishment)

Knowledge of food safety practices (HBM constructs: perceived susceptibility, severity, benefits, barriers)

Implementation of food safety practices (TPB constructs: attitudes, subjective norms, perceived behavioral control)

Descriptive statistics (frequency distribution, percentage, and mean) were used to assess levels of knowledge and implementation. Pearson Product-Moment Correlation was applied to determine the relationship between knowledge and implementation levels.

FINDINGS

Profile of Respondents. Most respondents had 1–2 years of employment experience (41%). Notably, 67% reported having no formal food safety training, and only 2% possessed food safety certification. Most respondents served as waitstaff (62%), followed by cooks (15%), indicating that frontline operational staff composed the bulk of participants.

Knowledge of Food Safety Practices. Respondents demonstrated high levels of agreement across HBM constructs:

Perceived susceptibility (Mean = 2.93, Agree)

Perceived severity (Mean = 3.10, Agree)

Perceived benefits (Mean = 3.17, Agree)

Perceived barriers (Mean = 2.25, Disagree)

The findings indicate that respondents generally recognize the risks of foodborne illnesses and understand the serious consequences of non-compliance. They also acknowledge the benefits of proper hygiene practices. Interestingly, respondents did not perceive significant barriers to implementing food safety measures, suggesting confidence in their operational capacity.

Implementation of Food Safety Practices. Attitudes toward food safety implementation were positive (Mean = 3.16, Agree). Respondents expressed a sense of duty and pride in maintaining hygienic standards. Subjective norms and perceived behavioral control similarly reflected agreement, indicating that food handlers felt supported and capable of implementing food safety measures.

Pearson correlation analysis revealed a statistically significant positive relationship between knowledge and implementation levels, suggesting that higher knowledge corresponds with stronger compliance behaviors.

IMPLICATIONS OR CONCLUSION

The findings suggest that while food safety knowledge and attitudes among eatery staff in Malate are generally strong, formal training and certification remain limited. The absence of perceived barriers indicates a favorable environment for strengthening structured training programs and regulatory enforcement.

From a policy perspective, the study recommends:

Institutionalizing regular food safety training for small food establishments

Developing accessible certification systems for informal food vendors

Strengthening collaboration between local government units and public health offices

Implementing continuous monitoring and refresher programs

The integration of HBM and TPB provides a multidimensional understanding of food safety behavior, highlighting that knowledge alone is insufficient without reinforcement through social norms and perceived control. Enhancing behavioral motivation alongside formal education may significantly reduce foodborne risks in urban informal food settings.

This research contributes to the broader discourse on public health governance in informal food economies and offers a replicable framework for similar urban districts in developing countries.

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