## SY(T6)8-03

## Community readiness to improve food safety practices among informal food handlers: A qualitative analysis in the three major cities in Ecuador

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**Background and objective:** Food safety is a critical issue in low- and middle-income countries and is a barrier to healthy eating in Ecuador. This study aimed to explore community readiness to implement strategies to improve food safety among informal food handlers in urban Ecuador.

Methods: Using the Community Readiness Model (CRM), 40 in-depth interviews were conducted with key informants in the urban area of the three major cities in Ecuador (Quito, Guayaguil and Cuenca). Data collection was conducted from September to December 2020. The informants included governmental officials involved in regulatory actions regarding food safety among informal food handlers and non-governmental community members related to the preparation, transportation, and consumption of informally produced foods. The governmental informants belonged to the Ministry of Health, Food Safety Regulatory Agencies and the City council; the non-governmental informants comprised informal food handlers, consumers' advocacy groups, health professionals, food deliverers, and cleric representatives. The CRM determines the communities' willingness to implement preventive strategies for a specific problem (i.e., unsafe foods sold by informal food handlers) by exploring five critical dimensions (community knowledge of efforts, leadership, community climate, knowledge of the issue and resources). A score was assigned for each dimension (from 1 = no awareness to 9 = high level of community ownership), which was then used to generate an overall readiness score for each city. A thematic analysis was undertaken to understand the scores and identify critical factors (i.e., barriers or facilitators) for preventive strategies.

Results: The three cities were in a "denial/resistance" stage (Cuenca:  $2.9 \pm 0.4$ ; Quito  $2.9 \pm 0.4$ ; Guayaquil  $2.8 \pm 0.5$ ), regarding the need to implement strategies to improve food safety among informal food handlers. In Cuenca and Quito, the scores ranged from denial to vague awareness for all the dimensions, with community knowledge about the efforts receiving the lowest score (Cuenca: 2.4  $\pm$  0.8; Quito: 2.3  $\pm$  1.4). In Guayaquil, the community knowledge about the efforts was in a "no awareness" stage (1.8  $\pm$  0.8), while the other dimensions ranged from denial to vague awareness. Straightforward strategies to promote food safety among informal food handlers were not identified. Training sessions were mentioned as the primary strategy but seemed to be improvised. The governmental entities share roles in monitoring the food safety of informal handlers, resulting in unclear responsibilities and overlappings. Potential conflicts of interest of decision-makers were identified, and the community has several misconceptions and knows little about the problem and its consequences.

Conclusions: Food safety is not recognized as a priority in these three cities in Ecuador, even though it can have critical implications for healthy eating and overall health. Strategies aiming to improve community awareness of the consequences of consuming unsafe foods are urgently needed to pave the way for implementing appropriate preventive strategies to promote healthy diets in urban Ecuador. The generated data enables a clear understanding of existing strategies, stakeholder roles, and community perceptions, which can be the basis to co-design appropriate strategies.

**Keywords:** Community readiness, Food safety, Ecuador, Interventions, Urban

**Conflict of Interest Disclosure:** The authors declare no conflicts of interest

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## SY(T6)8-04

## How ready are community stakeholders to implement interventions to address the marketing and availability of unhealthy foods and beverages in and around schools in the Greater Accra Region of Ghana?

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**Background and objectives:** Ghana has reached an advanced stage of nutrition transition, contributing to increasing overweight and obesity, including in children and adolescents. There is widespread marketing and availability of unhealthy foods and beverages that have, in part, led to changes in dietary habits towards processed foods high in saturated fats, sugar, and salt. Emerging evidence shows a need to improve school food environments such that they promote the consumption of safer and more nutritious diets. The readiness of communities to accept a range of interventions to tackle this issue needs to be understood before appropriate interventions can be implemented. Therefore, this study assessed how ready the 'community' is to implement actions to address the marketing and availability of unhealthy foods and beverages in and around schools in the Greater Accra Region of Ghana.

**Methods:** The Community Readiness Model (CRM) protocol was used to conduct in-depth interviews with 18 key informants from various school/education/citizen sectors in Greater Accra, Ghana, which together represent the 'school community'. The CRM tool consists of 36 open questions addressing five readiness dimensions (community knowledge of efforts, leadership, community climate, knowledge of the issue and resources). Interviews were scored using the CRM protocol with a maximum