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Research Article

**A CROSS-SECTIONAL RESEARCH ON CLEANLINESS
AWARENESS OF SCHOOL GOING CHILDREN IN ORDER TO
MAINTAIN BETTER STATE OF PERSONAL HYGIENE**¹Dr. Waqas Ahmad, ²Dr. Ammar Ali Raza, ²Dr. Anum Arshad¹District Jhang²THQ Hospital Gojra**Abstract:**

Objective: In this research, we aimed to assess the awareness and knowledge about personal hygiene in the school going children.

Material and methods: We carried out a cross-sectional research on one hundred school going children who were studied from February 2017 to November 2017 at Sir Ganga Ram Hospital, Lahore. Our objective was the assessment of knowledge and awareness about the personal hygiene in children who were attending schools. Numerous considerable factors were included in the research such as hygiene, cleaning material, bathing, brushing, nails cutting, nails cleaning and washing of uniform. We did not include the secondary school students in this research. Students were enrolled on the basis of parent's permission, diversity and feasibility. Students were assessed with similar performance criteria and numbers with the interview method and questionnaire as an investigative tool. Outcomes were analyzed on SPSS software.

Results: Personal hygiene awareness was found in 91% of the students. The perianal area was cleaned by water by 98% of the students, daily bathing was observed by 51% students, daily washing of uniform was observed in 18% students and once in a day toothbrush was used by 90% of the students. Nine percent of students were not aware of the concept of personal hygiene. Paper and other materials were used by two percent of students to clean the perianal area. After two days and weekly bath was taken by 41% and 8% of students. Twice and thrice teeth brushing in a day was reported in 6% and 4% respectively. Nail cutting was carried out at an interval of seven, fifteen and thirty days by 55%, 15% and 30% respectively. Twice a week and on weekly basis uniforms were washed by 35% & 47% students respectively.

Conclusion: Number of students was not having pre-text and understanding of the personal hygiene concept and they were also not in a habit of hygienically safe and sound.

Keywords: Awareness, Knowledge, Primary School, Personal Hygiene and Students.

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INTRODUCTION:

A set of practices which keeps oneself healthy and preserves the overall healthy well-being is called hygiene. According to WHO, it is a practice which helps in the maintenance and promotion of health for disease prevention. Proper and regular hygiene helps us to protect from the adverse effects of ultraviolet (UV) and dangerous germs present in the environment and can be potentially harmful to the children. Body is very much affected by the improper hygienic condition and it helps in the disease propagation. Germs prevention is very much important at schools as it endangers the health of students. Germs can be prevented with the improved hygienic condition at schools. The better hygienic condition also presents a well-coming and soothing effect to others [1, 2].

School health services, environment, education and nutrition are a part of the health program [3]. Pakistani government started this kind of programs back in 2010. Pakistani school's healthy environment development was the primary objective of these programs which included fresh water for drinking, clean environment, cultural and gender supportive sanitation and clean toilets. Classroom was made spacious and well ventilated. Seating arrangements were made appropriate and comfortable with the provision of playgrounds in the schools. This friendly environment had a positive and better impact on the social and mental well-being of the students. These all efforts also reduced the student drop out ratio and educational quality was also improved as the children felt well in the better healthy environment. At-large there was a shift in the overall betterment of the societal health conditions [4].

An amalgamation of sufficient and adequate facilities, truthful attitude and better educational practice can bring very positive changes in the hygiene and health state of the students and overall society can also benefit from it in the present situation and even in the upcoming times. This state of hygiene cannot be measured by the installation of handpumps or with the construction of sanitation facilities but it is above these measures. Children awareness is also a sole indicator of better hygiene state. Bringing the awareness into practice is the actual demand of the time which will bring tangible gains in the reduction of germs and worse living conditions. Communicable disease burden increases with the non-conformance of hygienic protocols and inadequate sanitation infrastructure in the underdeveloped countries [5].

School is a community centre and it has a vital role to play in the development of children health as healthy behaviour can better be promoted and practised at schools with the supervision of instructional staff. A child spends his productive and valuable time in the school than at home. Schools are repositories for the development of skills, aptitudes, intelligence and social skills which mould the students into better human beings. Various authors have focused on the positive role of the school environment in the lives of students particularly in the general well-being such as personal hygiene. A healthy and sound hygienic behaviour can be promoted in the schools.

Moreover, the young generation has big futuristic dreams like ever before and they need proper motivation to keep up this motivation throughout. In the quest for these dreams, health and hygiene are those elements which can never be overlooked. Hence, in this research, we aimed to assess the awareness and knowledge about personal hygiene in the school going children in the urban setting [6, 7]. Our research found various factors those are responsible for the reduced personal hygiene which also contributes to the spread of germs and disease especially communicable diseases.

MATERIAL AND METHODS:

We carried out a cross-sectional research on one hundred school going children who were studied from February 2017 to November 2017 at Sir Ganga Ram Hospital, Lahore. Our objective was the assessment of knowledge and awareness about the personal hygiene in children who were attending schools. Numerous considerable factors were included in the research such as hygiene, cleaning material, bathing, brushing, nails cutting, nails cleaning and washing of uniform. We did not include the secondary school students in this research. Students were enrolled on the basis of parent's permission, diversity and feasibility. Students were assessed with similar performance criteria and numbers with the interview method and questionnaire as an investigative tool. Outcomes were analyzed on SPSS software.

RESULTS:

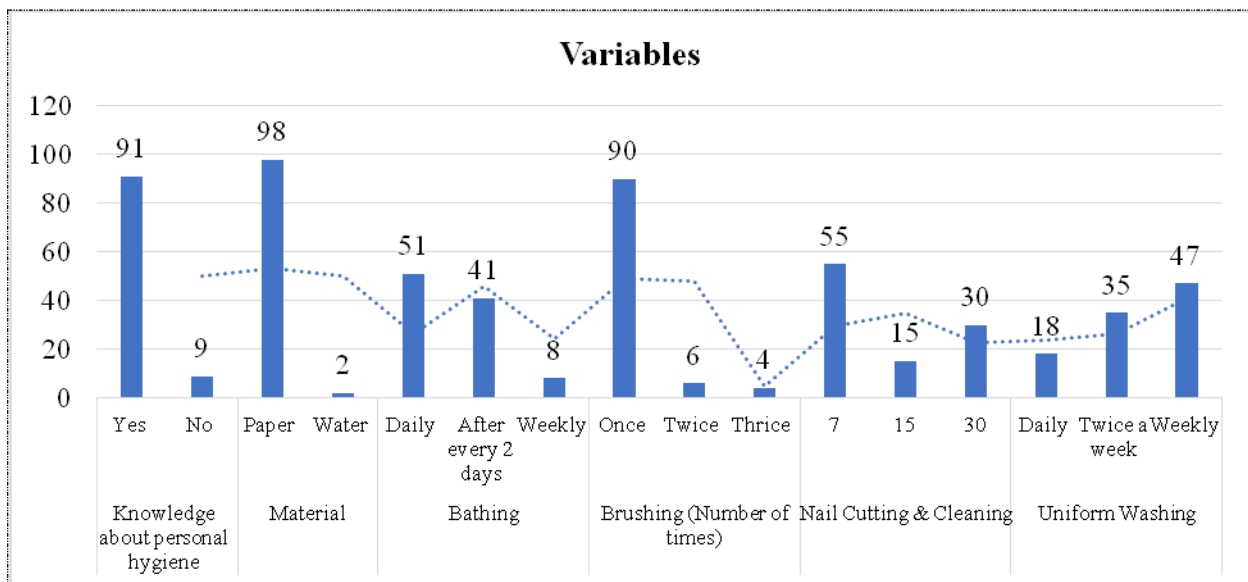
Personal hygiene awareness was found in 91% of the students. The perianal area was cleaned by water by 98% of the students, daily bathing was observed by 51% students, daily washing of uniform was observed in 18% students and once in a day toothbrush was used by 90% of the students. Nine percent students were not aware of the concept of personal hygiene. Paper and other materials were

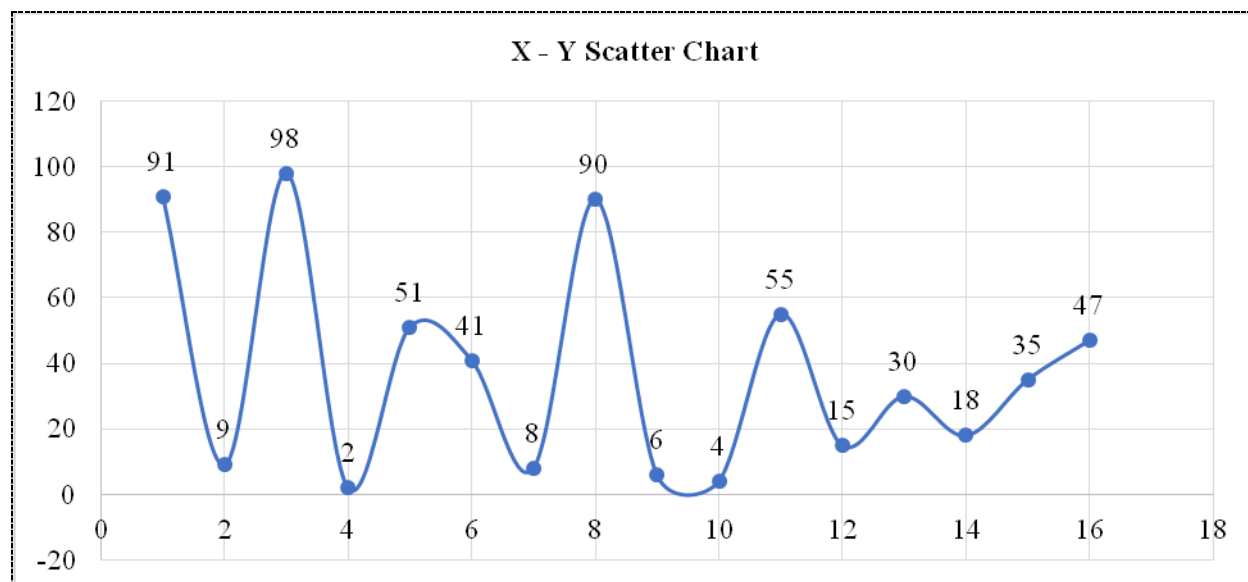
used by two percent students to clean the perianal area. After two days and weekly bath was taken by 41% and 8% of students. Twice and thrice teeth brushing in a day was reported in 6% and 4% respectively. Nail cutting was carried out at an

interval of seven, fifteen and thirty days by 55%, 15% and 30% respectively. Twice a week and on weekly basis uniformed were washed by 35% & 47% students respectively. Detailed outcomes analysis has been made in the given tabular data underneath.

Table: Frequency of Various Variables

Variables		Number	Percentage
Knowledge about personal hygiene	Yes	91	91
	No	9	9
Material	Paper	98	98
	Water	2	2
Bathing	Daily	51	51
	After every 2 days	41	41
	Weekly	8	8
Brushing (Number of times)	Once	90	90
	Twice	6	6
	Thrice	4	4
Nail Cutting & Cleaning	7	55	55
	15	15	15
	30	30	30
Uniform Washing	Daily	18	18
	Twice a week	35	35
	Weekly	47	47





DISCUSSION:

External body grooming and cleanliness maintenance can be described as personal hygiene [8]. Before and after the meals washing of hands is very important and also good for the personal hygiene which can further be enhanced by using soap [9]. Germs accumulation can be avoided by washed uniform and clean footwear. Children were in a habit of washing off their hands but they hardly used any soap or another cleaning detergent to clean their hands [10]. These steps can be helpful to avoid the production of germs which can further lead to disease. All the precautionary measures were not taken by a number of children in the research and they were most likely to be hit by a disease because of their casual attitude towards personal hygiene. Children even after knowing about the concept of personal hygiene were not abiding by it in a true sense and religious way [11]. Antiseptic material or soap was not used by the research participants for the cleaning of their hands, brushing of teeth was also not observed by a large proportion of students. Nails were also not cut at regular intervals and within the specified and safe timeframe. Before and after meals practice of handwashing was also poor. Clean uniform and neat shoes were also not worn by a number of students. School health program needs proper implementation by the school administration and proper teaching of these cleanliness habits is mandatory in collaboration with healthcare professionals. Overall health factor and germ resistance will increase with these efforts to reduce the incidence of infection and disease especially communicable disease factor [12].

CONCLUSION:

A number of students were not having pre-text and understanding of the personal hygiene concept and they were also not in a habit of hygienically safe and sound.

REFERENCES:

1. World Health Organization (1948-2005). Definition of Health. Retrieved May 25, 2005 from <http://www.who.int/about/definition/en/>
2. Dongre AR, Deshmukh PR, Boratne AV, et al. An approach to hygiene education among rural school going children. *J Health Allied Sci* 2007; 4: 2-5.
3. Oyibo PG. basic personal hygiene: knowledge and practices among school children aged 6-14 years in Abraka, Delta State, Nigeria. *Continental J Trop Med* 2012; 6: 5-11.
4. Fewtrell L, Kauffman RB, Kay D, Enanoria W, Haller L, Colford JM. Water, sanitation, and hygiene interventions to reduce diarrhea in less developed countries: a systematic review and meta-analysis. *Lancet* 2005; 5: 42-52.
5. Adams J. Water, sanitation and hygiene standards for schools in low cost settings. Geneva: World Health Organization, 2009.
6. Curtis VA, Danquah LO, Aunger RV. Planned, motivated and habitual hygiene behavior: an eleven-country review. *Health Education Res* 2009; 24:655-73.
7. American Dental Association (2005). Animation and games. Retrieved May 20, 2005 from <http://www.ada.org/public/games/animation/interface.asp>
8. Centers for Disease Control and Prevention

- (2004). Stopping germs at home, work, and school. Retrieved 26, 2005 from <http://www.cdc.gov/germstopper.home.work.school.html>
9. Bloomfield SF, Aiello AE, Cookson B, O'Boyle C, Larson EL. The effectiveness of hand hygiene procedures in reducing the risks of infections in home and community settings including hand washing and alcohol-based hand sanitizers. *Am J Infect Control* 2007;35(10): S27-64.
 10. US Department of Agriculture, Food and Nutrition Services, & National Food Services Management Institute (2000) Food safety mini posters: Hand washing. Retrieved January 8, 2009 from <http://www.nfsml.org/documentLibraryFiles/PDF/20080211042308.pdf>
 11. National Food Services Management Institute (2002). Wash your hands. Retrieved May 18, 2005 from <http://www.nfsml.org/Information/handsindex.html>
 12. Lesson plans (2004). Why wash? Retrieved May 19, 2005 from <http://www.lessonplanspage.com/PEWhyWashHygieneComics2.html>