

Factors Mitigating Hygiene Practices among Primary School Teachers in Enugu State

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Abstract

This study investigates the factors mitigating hygiene practices among primary school teachers in Enugu State, Nigeria. Descriptive survey design was adopted for the study. The study sample was 1196 teachers, comprising of 579 males and 617 female teachers. Multistage sampling technique was used in the selection of the sample size. The instrument used for data collection was ‘Hygiene Practices Questionnaire’. Using Cronbach Alpha method, the instrument had internal consistency coefficients of 0.87. The instrument was administered to the participants in their respective schools. The data collected were analyzed using mean, standard deviation and t-test statistics and the hypothesis was tested at 0.05 level of significance. Findings revealed that poor finance of health facilities; cost of maintenance; provision of cleaning equipment; provision of sanitary products; sense of health belief; contextual factors; provision of water supply and shortage of toilets were factors mitigating hygiene practices among primary school teachers. Furthermore, the hypothesis tested in the study revealed that there is no statistically significant difference in the mean rating of male and female teachers on the factor mitigating hygiene practices among primary school teacher. Government and other stakeholders should try to finance the teachers in the areas of providing health facilities such as provisions of toilets, toiletries, towels, tissue, disinfectant, wash hand basin, soap and constantly send them for seminars to update their knowledge on hygiene practices.

Keywords: Factor, Mitigating, Hygiene practice, Primary school teachers, Enugu State

Introduction

In all aspects of human endeavour, efforts are made to maintain and uphold hygiene which is vital for development of good health. The increasing rate of diseases is due to poor hygiene practices and insufficient awareness that heads towards dilemma, having the knowledge that pupils are dynamic in their period of growth and development Vivas, Gelaye, Aboset, Kumie, Berhane, & Williams (2010). There is need to provide safe and conducive environment at this period of growth and development of a child. Poor environment may impair both the growth and cognitive development of the child. Hence, disease becomes a threat that may affect physical development of children adversely. Pupils are mostly vulnerable to diseases due to ignorance and bad practices of hygiene (Vivas et al., 2010).

Hygiene is defined as conditions or practices aimed at maintaining health and preventing diseases. However, it could be referred to all practices to ensure body cleanliness, promoting and preserving good health. According to World Bank (Kremer, 2007), hygiene is a measure to prevent diseases according to the World Bank (Kremer, 2007). These practices have been proved to reduce diseases and also help to improvement of social outcomes in the primary schools. Nzengy (2015) posited that poor hygiene in primary schools can be traced to lack of sanitary facilities and potable drinking water. Poor hygiene practices are major problem in developing countries. Hygiene related diseases are a huge burden in primary schools; causing many children to fall ill even to the expanse of death due to ignorant.

From research evidence, it was observed that schools have repeatedly been implicated in the spread of communicable disease, it is considered to be a place where children spend most of their childhood, that is why communicable diseases are high among primary school children (Van Wijk, & Tineke, 2003). Lack of knowledge, practice of and bad attitudes to hygiene practices have been identified as tools that lead to high rate of diseases among pupils, bringing about negative consequences for a child's long term overall development will also be affected (Sarkar, 2013). The author further emphasized that pupils' have been persistently involved in the spread of diseases, whereby schools have been known as an environment for health advancement. It is worth noted, that lack of awareness of hygiene practices especially by primary school teachers have led to the increase of some diseases that lead to childhood morbidity and mortality around the world (Curtis, & Cairncross, 2003). However, adequate knowledge of hygiene practices play critical role in preventing diseases thereby benefitting pupils to enjoy healthy and productive school life. To support these, research evidences, it has shown that pupils with better knowledge and practices of hygiene do not fall ill regularly, were not absent from school activities and more importantly excel in their academic activities at school (Vivas et al., 2010).

Also, previous studies have shown that hygiene practices can impede infections and in turn reduces the absenteeism in the school (Inge Nandrup-Bus, 2009). A school is an organized institution where pupils learn health education which will benefit them as they progress in life under the custody of teachers. Teachers have a tremendous influence in the development of a child as the child spends considerable time with them in the school environment. The fundamental goal of the primary school teacher is to improve the quality of hygiene in the primary school and provide an avenue for collaboration in promoting hygiene practices among pupils. These goals could be achieved through the provision of the supports needed for the implementation of school health programmes. In other words, setting up machineries for the synchronization of efforts by the government and non-governmental organizations on school health, promotion of skill-based health education and putting in place modalities for the sustainability of school health programmes.

In confirming the idea, (Sarkar, 2013; Vivas et al, 2010) noted that teachers play a vital task in imparting the knowledge about personal hygiene to children earlier in life. It is well known that children are more receptive to learning and are very likely to adopt healthy practices at their earlier stage. This implies that, when pupils practice what they learnt from their teacher they will be healthy and become agents of change by practicing what they have learnt in school to their family and community at large. Health of pupils is an essential factor in their school entry, as well as continued participation and attainment in school.

It becomes imperative to embark on hygiene practices by primary school teachers, because it is a major necessity of life that can lead to academic achievement. In other words, it is only a healthy person that can be successful in his/her career. In this regard, Nwafor-Orizu and Nwachukwu (2014) noted that the reason for hygiene practices is to ensure wellness, good life and sustainability. Therefore, the school is an important environment that can help to disseminate information for the development of stable and healthy life pattern (Nutbeam & Muscat, 2021). In other words, many school health programmes have been developed based on this and were effective in improving the health awareness, behaviour and health status of pupils. Importance of schools in health promotion with teachers play important roles since they have more influence on pupils mind set and cannot be over emphasized. Primary school teachers teach pupils, thereby impacting sustainable knowledge about general health as well as to contribute to improve the quality of hygiene practice (Nwafor-Orizu, & Nwachukwu, 2014).

Generally speaking, hygiene practice is a global campaign to promote health and wellness. It implies expansion of health information, engagement of educational and promotion of basic healthy sectors. It is also agreed in the fact that health information awareness on hygiene practices play important roles in preventing infectious disease transmission (Reeves, Priest, & Poore, 2012). Furthermore, it is agreed that hygiene generally refers to the set of practices associated with the preservation of health and healthy living. Disease can be prevented by the use of clean object, clean hands and operate in a clean environment. For a healthy living hygiene practice should involve the following cleanliness of hair, body, hands, fingers, feet and clothing, and general wellbeing are the major tools for healthy living. Improvements in hygiene practice increases knowledge, and skills to modify pupil's behavior towards effectiveness and functionality in all aspect of their lives.

In this regard, Reeves et al (2012) suggests that hygiene practice involves a broad series of healthy practices, such as hand washing before eating, after toilet use, after sneezing and safe disposal of faeces in appropriate place. The authors further supported that teaching of health education; promotion and transfer of knowledge for understanding of associated health risks behaviour among pupils are important. The hygiene practice in this context aims at preventing the spread of disease causing organisms among the primary school pupils. Unfortunately, most primary schools do not provide appropriate hygiene facilities such as availability of toilets, soap, towel, trash dust collectors, mops, disinfectant, tissue, wash hand basin water supply. When these facilities are available, factors such as poor location, insufficient materials, inaccessible, and improperly used are what they can be facing, thereby making schools to become high-risk environments for pupils and their teachers (Ashraful, Shuvo, Korima, Ariful. & Md Shahgagan. 2021).

Inadequate funding of schools is a very big problem that affects teachers in carrying out good hygiene practices, hence, the failure to prioritize the use of available funds that would cover areas such as employing qualified teachers, procuring hygiene facilities, maintaining the existing infrastructures, procuring equipment, instruments. Lack of funds has resulted in the absence of workshop in schools, in training and re-training of teachers at all levels, inadequate provision of sanitary, cleaning equipment (Ejiro, 2011).

Poor knowledge of hygiene practices and maintenance culture presently, there is a wide scale poor knowledge among teachers who do not graduate from teachers' training as there is nothing to show that they have learnt especially in hygiene practices. Hence, the issue of maintenance culture has continued to elude the schools (Ejiro, 2011).

The researcher also identified lack of finance, lack of maintenance, lack of awareness, perceptions, sense of health believe, contextual factors, lack of water supply, adult poor modeling of regular hand washing and unappealing facilities as barriers to regular good hygiene practices in a school environment. However, it is not clear from the literature whether genders influence the perception of teachers regarding hygiene practices.

For example, Keller (2011) has illustrated that gender could mar the ways teaching is being carried out in the classroom environment. In other words, Obasi (2009) perceived gender as many social and cultural constructed characteristics, qualities, behaviour and roles which different societies ascribe to male and female. Thus, there are behaviours meant for males and there are the ones meant for females. In line with this, Onyeke (2013) suggested that male teachers and female teachers are likely to differ in their level of knowledge on hygiene practices. Nwafor (2013) opined that female teachers are more likely to model hygiene practices than the male teachers in teaching in the classroom. It is against this

background that the present study sought to ascertain the gender differences on factors mitigating hygiene practice among primary school teachers. On this premise also therefore, the study investigated the factors mitigating hygiene practices among primary school teachers in Enugu State

There is an outcry on the increase rate of diseases among primary school pupils. It is estimated that due to ignorance on hygiene practices and lack of adequate hygiene facilities, lack of monitoring and supervision of cleaning activities in the primary school environment claim lives of many every year. Lack of knowledge on the mode of spread and control of disease by the teachers is one the causes of the spread of these diseases to the expense of death. Evidences have shown that large fraction of the world's illness and death is attributable to lack of knowledge on hygiene practices. Another factor include poor training given to the teachers on how to combat these infection spread and poor hygiene. It was observed that some the personnel for the training of the teachers are not expertise on the areas of hygiene practice. Some persons participate in the training due to the relationship they have with the person that is in charge of the programme. Again, poor provisions of funds, facilities and equipment have been seen as factors mitigating hygiene practices. Research evidences have shown that government, stakeholders and parents failed to make the facilities and equipment available to the teachers There is therefore need to investigate the factors mitigating hygiene practices among primary school teachers in Enugu State.

Purpose of the Study

The major purpose of the study is to investigate the factors mitigating hygiene practices among primary school teachers in Enugu State. Specifically, the study found out the:

1. factors affecting hygiene practices among primary school teachers in Enugu State.
2. mean response of male and female teachers on the factors affecting hygiene practice in the primary schools in Enugu State

Research Questions

1. What are the factors affecting hygiene practices among primary school teachers in Enugu State?
2. What are the mean responses of male and female teachers on the factors affecting hygiene practices among primary school teachers in Enugu State?

Hypothesis

1. There is no significant difference in the mean rating of male and female teachers on the factors mitigating hygiene practices ($p \leq 0.05$).

Methods and Materials

The study adopted descriptive survey design. The area of the study was Enugu State with 1196 which consists of 579 male and 617 female primary school teachers drawn through multistage sampling technique. The instrument for data collection was a questionnaire titled “Hygiene Practice. Questionnaire” (HPQ). The questionnaire consists of two sections. Section A and Section B. Section A comprised information regarding the personal data of primary school teachers: gender Section B contained items that measure factors mitigating hygiene practices. A four-point rating scale was provided for the respondents to indicate the strength of their opinion as follows: Strongly Agree (SA) = 4, Agree (A) = 3, Disagree (D) = 2 Strongly Disagree (SD) = 1 for the clusters. The instrument was subjected to face validation by three experts in a University in Nigeria. The experts were asked to add or remove any item of the instrument that they considered not useful to the study. Thereafter, the final version of the instrument was trial tested on a sample of 30 teachers. The analysis of data yielded Alpha co-efficient estimate value of 0.80. This high co-efficient estimate value revealed that the instrument is reliable to be used for the study. The choice of subjecting the items to Cronbach Alpha statistical analysis was based on the fact that the items are homogeneous and not dichotomously scored. The instrument was administered to the teachers who took part in the study and the data collected were analyzed using mean and standard deviation. In taking a decision in each of the research questions, mean scores of 2.50 and above on the four-point rating scale was considered acceptance, while those below 2.50 was regarded as rejection. The t-test statistics was employed to test the null hypothesis at 0.05 level of significance.

Table 1: Mean Responses of Primary School Teachers on the Factors Mitigating Hygiene Practices(n=1196)

SN	ITEMS	\bar{x}	SD	REMARKS
FACTORS				
1	Poor finance of health facilities	3.26	.722	Agree
2	Cost of maintenance	3.26	.883	Agree
3	Provision of cleaning equipment	3.30	.991	Agree
4	Provision of sanitary products	3.29	.748	Agree
5	Sense of health belief	3.29	.605	Agree
6	Contextual factors	3.28	.968	Agree
7	Provision of water supply	3.29	.806	Agree
8	Perception toward health practices	1.49	.829	Disagree
9	No awareness of health practices	1.52	.777	Disagree
10	Shortage of toilets	3.28	.914	Agree
Grand mean		2.92	0.82	Agree

Table 1 presents the mean responses of teachers on the factors mitigating hygiene practice. From the analysis on the table, the respondents agreed on eight out of the ten items on the list. The respondents did not agree that perception toward health practice factors that can affects hygiene practices.

In addition to this analysis, the cluster mean for the items listed, which indicates agreed is 2.92. This implies that the respondents agreed on the factors mitigating hygiene practices among primary school teachers in Enugu State.

Table 2: Mean Responses of Male and Female Teachers on the Factors Mitigating Hygiene Practices (n=1196)

SN	ITEMS	Males		Remark	Female		Remark
		\bar{x}	SD		\bar{x}	SD	
1	Poor finance of health facilities	3.18	1.00	Agree	3.24	1.03	Agree
2	Cost of maintenance	3.48	0.88	Agree	3.39	0.90	Agree
3	Provision of cleaning equipment	3.45	0.86	Agree	3.36	0.88	Agree
4	Provision of sanitary products	3.25	0.98	Agree	3.28	0.87	Agree
5	Sense of health belief	3.22	0.95	Agree	3.26	0.91	Agree
6	Contextual factors	3.17	1.05	Agree	3.25	0.98	Agree
7	Provision of water supply	3.31	0.65	Agree	3.26	0.59	Agree
8	Perception toward health practices	1.48	0.88	Disagree	1.39	0.90	Disagree
9	No awareness of health practices	1.45	0.86	Disagree	1.36	0.88	Disagree
10	Shortage of toilets	3.25	0.94	Agree	3.28	0.87	Agree

Data on table 2 above show the mean ratings of male teachers and female teachers in respect to factors mitigating hygiene practices among primary school teachers in Enugu state. From the analysis, the male and female teachers in Enugu State both agreed on the same items on factor mitigating hygiene practices. They also disagreed in the same items on factors mitigating hygiene practices among primary school teachers.

Table 3: Independent t-Test Analysis of Male and Female Teachers on the Factors Mitigating Hygiene Practices (N-1196)

Gender	N	X	SD	Df	t-cal	Sig-t	Remark
Male	579	3.31	.65	1194	1.54	0.12	Not
Female	617	3.26	.59				Significant

From Table 3, the calculated t- value at 1194 degree of freedom and 0.05 level of significance is 1.54. Since the calculated value of t = 1.54 and is not significant at 0.05 level of significance. This is because -0.12 is greater than 0.05 (P=1.54; p >0.05). Therefore, the hypothesis is not rejected. Hence, there is no significant difference in the mean ratings of male and female teachers on the factors mitigating hygiene practices among primary school teachers in Enugu state.

Discussion

The result revealed that there is need to handle the factors such as: poor finance of health facilities; cost of maintenance; provision of cleaning equipment; provision of sanitary products; sense of health belief; contextual factors; provision of water supply ;perception toward health practices; awareness of health practices and shortage of toilets towards mitigating hygiene practices. Similarly, the respondents disagreed that awareness of health practices is not a factor that can affect hygiene practice. The disagreement of the respondents on the above items is obvious, because teachers who would have undergone proper training will meet health education courses. Otherwise, it is only those that do not have the proper training of hygiene practices that can be seen as factors that can affect hygiene practices among primary school teachers.

The findings agreed that inadequate funding of schools is a very big problem that affects teachers in carrying out good hygiene practices, hence, the failure to prioritize the use of available funds that would cover areas such as employing qualified teachers, procuring hygiene facilities, maintaining the existing infrastructures, procuring equipment, instruments. Lack of funds has resulted in the absence of workshop in schools, in training and re-training of teachers at all levels, inadequate provision of sanitary, cleaning equipment (Ejiro, 2011).

The finding is in agreement with the contention of Ashrafullet al. (2021) who identified lack of finance, lack of maintenance, lack of awareness, perceptions, sense of health believe, contextual factors, lack of water supply, poor adult modeling of regular hand washing and unattractive facilities as a barriers to regular good hygiene practices in schools. It furthers revealed that there is significant relationship between teacher hygiene practices and pupils wellbeing. The results also conform to the earlier findings of Sarkar, 2013 and Vivas et al, (2010) noted that teachers can play a vital role in imparting the knowledge and practices of personal hygiene very early in the child's life. It is well known that children are more receptive to learning and are very likely to adopt healthy practices at a younger age. Lack of knowledge, practice of and bad attitudes to hygiene practices have been identified as tools that lead to high rate of diseases among pupils and therefore, negative consequences for a child's long term overall development will also be affected (Sarkar, 2013).

Also, Reeves et al. (2012) suggests that hygiene practice involves a broad series of healthy practices, such as hand washing before eating, after toileting, after sneezing and safe faeces disposal. The authors further argued that imparting health education; promotion and transfer of knowledge for understanding of associated health risks behaviour among pupils are all forms of hygiene practices. The above finding is not surprising because hygiene practices have been reemphasized in many literatures as a correlate of positive educational outcome.

Conclusions

According to the findings of this study, it is stated that the factors affecting hygiene practices among primary school pupils in Enugu State enlists poor finance of health facilities; cost of maintenance; provision of cleaning equipment; provision of sanitary products; sense of health belief; contextual factors; provision of water supply; and shortage of toilets among others. It is therefore safe to say that hygiene practices among primary school pupils will play a significant role by preventing infections and in turn reduces disease among the pupils and the teachers if it is effectively practiced. It is believed, that when teachers are provided with sufficient and adequate health facilities in the primary schools. It will help them achieve hygiene practices.

Recommendation

Effort should be made by government and other stakeholders to finance the teachers in the areas of providing health facilities such as provisions of toilets, toiletries, towels, tissue, disinfectant, wash hand basin, soap etc. While regular school inspection and a good maintenance programmes are recommended to protect the existing health facilities and equipment. Most importantly, primary school teachers should be constantly sponsored to attend workshop and seminar to update their knowledge on issues of hygiene practices.

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