AVAILABILITY AND UTILIZATION OF HANDWASHING FACILITIES AMONG PRIMARY SCHOOL PUPILS IN UGHELLI NORTH L.G.A OF DELTA STATE

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ABSTRACT

Communicable diseases have been known to exact a tremendous toll, causing increased morbidity and mortality among school age children leading to loss of valuable school days. This could have been prevented if adequate hand washing facilities are available, and were effectively utilized. It is against this backdrop that this study investigated the extent to which hand washing facilities are available, are adequately and been effectively utilized amongst primary school pupils in Ughelli North L.G.A of Delta State. The study utilised a population of 50 head teachers' selected using simple random sampling technique out of the entire population of 90 head teachers in Ughelli North LGA of Delta State. A self developed questionnaire designed from UNICEF's checklist modules for evaluating and designing hand washing facilities in schools was the instrument used for data collection. The data collected were analysed using frequency counts and arithmetic mean. The findings show that hand washing facilities in the schools were few and their usage were hindered by barriers such as lack of maintenance culture, lack of hand washing supplies among others. Based on the findings, it was recommended that all stake holders in Education should ensure constant provisions of these facilities as well as policies and laws to be put in place to meet the millennium goals.

Keywords: Hand washing, facilities, supplies

INTRODUCTION

Communicable diseases have been known to exact a tremendous toll, causing increased morbidity and mortality among school age children. These diseases have track record of higher rate in developing countries than developed countries. For instance, Sixty-two percent of all deaths in Africa and 31% of all deaths in South East Asia have been attributed to it, as against 5% of all deaths in Europe. Reducing this disparity has been a major concern globally (Global Health Council, 2005). Among the major causes of all children's death each year, diarrhoea and acute respiratory diseases cause about half, both of which are transmitted from person to person during everyday interaction, through the air, through skin contact and through contamination of the environment (Achalu, 2004).

WHO, in 2004 opined that diarrhoea alone kills almost 2 million children worldwide annually. Also, here in Nigeria, over 150,000 deaths occur annually amongst children due to diarrhoea. The effect of which is also known to contribute to the loss of 22 million school days each year. A simple hygiene habit – washing hands with soap – could halve this figure (Centres for Disease Control (CDC), 2007).

Moreover, hand washing is the single most cost effective preventive measure, for reducing the spread of contagious diseases and it is a fundamental personal hygiene practice that is often not done when necessary or is ineffectively done (Melinda, 2002). This is the reason

why the United Nation Education Fund (UNICEF) drew attention of Nigerians to the lifesaving importance of hand washing with soap, clean ash and water saying, that "simple hand washing can halve incidences of diarrhoea among children under five." And that diarrhoea is both preventable and treatable, and that there was no need for developing countries to continue to pay the price of this disease in lost lives, missed school days, reduced resistance to infections, impaired growth, malnutrition and poverty (UNICEF, 2010).

However, correct hand washing habits if learned correctly, preferably as a child, can translate into a routine habit throughout life (Utah Department of Health, 1996 as cited by Melinda, 2002). This will ultimately contribute to the achievement of two of the Millennium Development Goals (2 and 4), which support Education and Health (Curtis & Aunge, 2007; Dibier, 2001; WHO, 2003). Therefore, the correct technique needs to be demonstrated by trained teachers and monitored in schools (Okoro, 2008). This will help children learn and practice the five simple rules of hand washing:

- 1. Put soap, ash, or mud on hands.
- 2. Rub hand together well and all over.
- 3. Rinse off all the soap. This will require more than 1/2 litre of water.
- 4. Shake off water.
- 5. Dry hands with a clean piece of cloth or in the air. This should be done after using the toilet, before and after eating (Curtis & Cairncross, 2003; see also Chinakwe, Nwogwu, Okorondu, Onyemakara & Ndubuisi-Nnaji, 2012; Hoque, 2003). The supply of water for hand washing is crucial. When there is no direct supply by pipe, tap or pump, a vessel should be provided to scoop water which should be stored close to the facility (WHO, 2007).

On the other hand, a hand washing facility, even with soap, on a communal basis, where the same water is used by many people, does not constitute an adequate hand washing facility (CDC, 2007). Unfortunately, most schools in developing countries do not provide appropriate hand washing facilities. Where these facilities are available, they may be poorly located, have insufficient hand washing materials, be inaccessible, or be improperly used. These schools can become high-risk environments for children and staff (WHO, 2007). Sometimes hand washing agents and hygienic materials for drying hands after washing. This is because the materials are not available and/or the schools do not have the money to pay for them. In addition, hand washing materials such as soaps are frequently removed, especially when the facilities are located away from the school building close to the toilets at places with little or no supervision (Dibier, 2001).

A review of primary school hygiene facilities in a developed country, suggest that the physical quality of any toilet and hand washing facilities is an important determinant of whether and how it is used, especially for school children (Reeve & Poore, 2012). Hart & Roger (1997) identified Lack of time, poor adult modelling of regular hand washing and unattractive facilities as important barriers to regular hand washing in schools. In the same vein, an online survey of 512 children nearly half of them agreed that time constraints, supply shortages and untidy restrooms are among the top reasons why students say they don't wash their hands more often during the school day (American Society of Microbiology, 2005). It is in the light of this backdrop that this study investigated the availability and utilization of hand washing facilities in ughelli north local government area of Delta state.

STATEMENT OF THE PROBLEM

Learning, hygiene and health are strongly inter-linked as children miss school or perform poorly when they are suffering from diseases related to poor hand washing. These illnesses spread fast where many children are together for many hours a day. Most of these children may not have great hygiene practices. Also many parents send their children to school whether they are well or not and the spread of diseases happens very fast in schools than just about any other place in the society. These diseases according to WHO (2007) are preventable by simple hand washing with soap and can significantly reduce deaths due to these diseases by halve. There is therefore a need to examine the extent of availability of hand washing facilities and their utilization among primary schools pupils in Ughelli North LGA of Delta state.

PURPOSE OF THE STUDY

The major purpose of the study is to investigate the extent of availability and utilization of hand washing facilities among primary schools in Ughelli North LGA of Delta state. Specifically, the study aims at:

- 1. Identification of available hand washing facilities and supplies in the primary schools under study.
- 2. Enumerate possible factors that hinder utilization of available hand washing facilities

RESEARCH QUESTIONS

- 1. What are the available facilities for hand washing in the primary schools in Ughelli North LGA of Delta state?
- 2. What are the possible factors that hinder the utilization of available facilities in primary schools in Ughelli North LGA of Delta state?

METHODOLOGY

The study employed a survey research design, which is descriptive in nature (Nworgu, 1991). The target population for the study consisted of all head teachers in all government owned schools in Ughelli North LGA of Delta state. There are 26 primary schools with 26 head teachers in constituency 1 and 64 primary schools with 64 head teachers in constituency 2 totalling 90 primary schools with 90 head teachers in ughelli north LGA of Delta state (Ughelli North Local Education Authority, February, 2012).

A total of 50 head teachers were selected using the ballot system of random sampling. Representing 55.6% of the entire population. The Data were collected with the aid of a self-developed structured questionnaire designed from UNICEF's check list modules for evaluating and designing hand washing facilities in schools for 2004. This was validated by 2 experts from the department of Health and Human kinetics. This was subjected to pearson-r and it gave 0.79 as reliability level of the tool. The data collected were analysed using frequency counts, and arithmetic mean. However, the instrument was administered by 2 youth coppers (who served as research assistants recruited during the last meeting of head teachers held in January 2012 in Ughelli). The response and retrieval rate was 100 per cent.

RESULTS

Research Question 1:

What are the available hand washing facilities amongst primary school in ughelli north L.G.A of Delta state?

Table 1. Response to availability of hand washing facilities.(n=50) (A=Always, S=Sometimes, N=Never)						
		Α	S			

		A	S	Ν	-
		3	2	1	X
1.	My the school has some of these facilities (Bore hole, tap	10	10	30	1.6
	water, pump water, storing tank or hand washing bowl)	(30)	(20)	(30)	
2.	The hand washing facilities are functional	5	16	29	1.5
		(15)	(32)	(29)	
3.	Hand washing is not a prominent feature where the	25	20	5	2.4
	facilities are located	(75)	(40)	(5)	
4.	There is always soap or a suitable alternative at the hand	10	22	18	1 0
	washing facilities	(30)	(44)	(18)	1.0
5.	The toilets are close to these facilities	4	20	23	16
		(12)	(40)	(26)	1.0

The above table shows head teachers' responses on availability of hand washing facilities. Items 1, 2, 4 and 5 with mean of 1.6, 1.5, 1.8 and 1.6 indicated they sometimes or never had either bore hole, tap water, pump water, storing tank nor hand washing bowl in their schools. While a mean of 2.4 shows that hand washing is not a prominent feature where the facilities are located. This corroborates with the findings of WHO (2007) when they asserted that most schools in developing countries do not have adequate hand washing facilities and that where they are available, they may have insufficient hand washing materials and so such school can become high risk environments for children and staff.

		A 3	S 2	N 1	\bar{X}
1.	The conditions of hand washing facilities are not acceptable to me	25 (75)	18 (36)	4 (4)	2.3
2.	The facilities are not in a well considered location	28 (84)	18 (36)	4 (4)	2.5
3.	The facilities are not maintained so as to be easy to use hygienically	11 (33)	11 (22)	38 (38)	1.9
4.	There is enough hand washing supplies provided to pupils (E.g. soap, towel, dish or clean mud).	15 (45)	10 (20)	25 (25)	1.8
5.	Teachers are encouraged to constantly demonstrate hand washing practice	10 (30)	5 (10)	35 (35)	1.6
6.	The hand washing facilities and toilets are attractive to the pupils	5 (15)	5 (10)	40 (40)	1.3
7.	There is a special time allocated to hand washing practice in the school	4 (12)	6 (12)	40 (40)	1.3
8.	Removal of hand washing supplies prevents usage by pupils	30 (90)	18 (36)	12 (12)	2.8
9.	There is a format for monitoring the use of this hand washing facilities	0 (0)	21 (42)	39 (39)	1.6

Table 2. Responses on possible factors that hinders utilization of available facilities

From table 2, the data collected show that majority of the respondents indicated that there is no format for monitoring the use of facilities (1.6), facilities lack maintenance (1.9), supplies provided are inadequate (1.8), and as such teachers are not encouraged to demonstrate hand washing technique to pupils (1.6), neither is there a special time allocated to hand washing practice (1.3). The data collected also revealed that the utilization of available facilities were hindered by removal of hand washing supplies (2.8), unacceptable conditions of facilities (2.3), and removal of hand washing supplies (2.8). this findings revealed that the utilization of available facilities are hindered by unsatisfactory condition of facilities, lack of maintenance culture, inadequate supplies, unattractive toilet and hand washing facilities, lack of special time allocated to the practice lack of monitoring and removal of supplies and facilities. These are in agreement with what WHO (2007), Reeve & Poore (2012), American Society of Microbiology (2005), Hart & Roger (1997), gave as reasons why pupils do not wash their hands.

CONCLUSIONS AND RECOMMENDATIONS

Based on the analysis of data collected on available hand washing facilities and utilization amongst primary schools in Ughelli North L.G.A of Delta State, the following recommendations were made:

- 1. Hand washing facilities should be made available in every classroom to enhance effectiveness and monitoring by teachers. This can be provided and/ or enforced by every head teacher
- 2. Hand washing facilities and supplies should be a major priority in all primary schools in Ughelli North L.G.A because of its importance in preventing communicable diseases and so, all stakeholders should work in conjunction with the Parents Teachers Association of each school to ensure constant and adequate provision. This will further encourage usage and consequently reduce loss of valuable school days. This will translate into effective teaching and learning
- 3. Emphasis should be laid on proper hand washing practice by the government to promote healthy school days
- 4. Adequate supervision policies should be put in place by every school, enforced by laws and constantly monitored by the Local Education Authority, Ministry of Education, to be able to meet with the millennium Developmental goals for Education and Health.

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