

ISSN 0974 3474



**NIGERIAN
SCHOOL
HEALTH
JOURNAL**

VOLUME 26, NUMBER 2, 2014

NIGERIAN SCHOOL HEALTH JOURNAL

Volume 26, Number 2, 2014

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Nigerian School Health Association (NSHA)

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ISSN: 0794-3474

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PERSONAL HYGIENE: PREREQUISITE TO HEALTHY LIVING IN SCHOOLS

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Abstract

This article critically examines literature and empirical studies on personal hygiene and as a fundamental factor for healthy living in schools. Its main focus is on the basic concept of cleaning, grooming, caring for the body and efforts at making the body look good and attractive. The paper also looked at the roles of schools in providing sanitation facilities that will promote personal hygiene. While there is no doubt about the importance of personal hygiene to healthy living, the review revealed a poor state of personal hygiene and its effect on the health of school children. The article also shows that there are still major economic, educational, environmental, social and personal barriers to the practice of personal hygiene among Nigerian school children. The concluding part considered the importance of health education in the future of personal hygiene practices in relation to healthy school living. It recommended that health education should be used as a potent force to instil health literacy needed to predispose school children to hygienic practices.

Keywords: Personal hygiene, health, healthy living, pupils

Introduction

When children become sensitive to the preciousness of life and the potentialities of a fully awakened human being, they will consider high level of personal health-worthy of serious attention as they grow up. For this to happen, they must be taught how to set a personal goal with the ultimate expansion of awareness of both self and surrounding. But this is not an easy objective to attain. After all, we only become health-conscious when the body becomes ill partially or completely. Even close brushes with death frequently fail to bring about needed changes in an adult lifestyle. Cracking the tough crust of personal behaviour and lifestyle is the challenge. Unfortunately, behaviour is so rooted in social costumes and other variables that making children to alter disease-producing behaviour is frequently difficult.

Obviously, achieving high level of personal health relates to how much people believe that they can exercise change over their lives. Indeed, man is

responsible for his health and has the ability to maintain and improve it. It is therefore important that children should be made to understand at an early age that they are responsible for directing their future, especially regarding lifestyle choices that may affect their health. Letting them know that every area of life has fundamentals, a foundational principle upon which success or failure is largely determined—in football, it is blocking, tackling, throwing and catching. Without these, a team cannot succeed, no matter how clever its coach may be. Health also has fundamentals, without which any amount of drugs, surgeries or acupuncture needles can succeed, no matter how clever one's doctor may be. The fundamental factors affecting health, according to Cole (2000), are: good nutrition, exercise, adequate hydration, sleep, proper hygiene, fresh air, sunlight, emotional and spiritual wellbeing.

This article describes the importance of proper personal hygiene as a term that must be fundamentally taught to children or something that must exist for healthy living to take place. Childhood is a time when significant growth and development occur and functional capacity is developed. Promoting personal health in children establishes a foundation for lifelong health and wellbeing. Steiner-Asiedu, Van-Ess, Papoe, Setorglo, Asiedu and Anderson (2011) reported high incidence of communicable diseases among children and attributed this to poor personal hygiene. Hoque (2003) also reported high level of morbidity and mortality due to poor hygiene practices, especially in schools.

Hygiene is an old concept related to medicine, as well as to personal and professional care practices in most aspects of life. In medicine, homes (domestic) and everyday life settings, hygiene practices are employed as preventative measures to reduce the incidence and spread of diseases. The terms cleanliness (or cleaning) and hygiene are often used interchangeably and this could be very confusing. Generally, hygiene describes the practices that prevent spread of disease-causing organisms (Bloomfield, Cookson, Falkiner, Griffith and Cleary, 2006). While the process of cleaning (e.g., hand washing) describes the removal of infectious microbes as well as dirt and soil, they are often the means to achieve hygiene. Other uses of the term appear in connection with public health (Bloomfield, 2006).

Personal Hygiene

The American Heritage Dictionary of the English Language (2000) describes hygiene as the science that deals with the promotion and preservation of health; also called *hygienics*. It is a branch of science that deals with the promotion and

preservation of health (Bloomfield, Exner, Fara, Nath, Scott and Vendor, 2009). Personal hygiene is the first step to good grooming and good health. Unlike other forms of hygiene, as the name implies, personal hygiene is also known as self cleanliness or care of the body and efforts at making the body look good and attractive. Personal hygiene is important for many reasons. It makes our appearance attractive. People are perceived badly when they look unkempt, have bad breath and body odour. Also, people with poor personal hygiene have been reported to have low self-esteem (Strachan, 2000). Indeed, good personal hygiene is the first step to good health. It does not only protect one from poor health, but also shields and keeps the body free of bacteria, viruses, and illnesses that may arise from poor personal habits. Habits such as washing the hands regularly, bathing and brushing, may all look monotonous and boring, but they all come under important personal hygiene that must be emphasised as a prerequisite to healthy living. Ajala (2005) reported that simple health habits significantly affect health and life expectancy. Personal hygiene has been discovered as one of the most effective ways to groom and care for the body.

Personal Hygiene and Grooming

To explain the term hygiene and grooming, it is important to look at the definition of personal hygiene by Rook (2012), which states that personal hygiene is the basic concept of cleaning, grooming and caring for the body. In this context, cleaning, grooming and care have all been used synonymously. Grooming, therefore, is care; it is cleaning, and it encompasses all things that we do to keep our hair, clothes and other parts of the body neat. Self-care and self-responsibility are an important aspect of grooming. They are an active sense of accountability for one's own wellbeing, a first step in recognising that the choices we make through our lifestyle can impact our total wellbeing. Good looks are the result of careful and continuous grooming. Every external part of the body demands a basic amount of attention on a regular basis. It is therefore necessary to have a daily grooming routine as a foundation for healthy living. The following are some grooming routine (TATA, 2012): hair, skin, teeth, hands, nails, feet, menstrual hygiene

a. Hair Hygiene as a Form of Grooming Routine

'Hair' is the collective term for the slender, threadlike outgrowths of the epidermis of mammals, forming a characteristic body covering. All mammals have hair. Even such apparently hairless mammals as the rhinoceros, elephant, and armadillo have hairs around the snout, at the tip of the tail, and behind each scale, respectively. In

humans, the development of hair begins in the embryo, and by the sixth month the foetus is covered by a growth of fine hair, the lanugos. In the first few months of infancy the lanugos is shed and replaced by hair, relatively coarse over the cranium and the eyebrows, but fine and downy over the rest of the body. At puberty, coarse hair develops in the armpits and over the pubic region in both sexes; in males, facial hair begins to grow coarse to form the beard. The rate of growth of the hair varies with the age of the person and the length of the hair. When a hair is short, its rate of growth averages about 2cm per month; by the time the hair is a foot long, the rate of growth is reduced by one-half (Redmond, 2008).

Hairy parts, particularly the head and pubis, are subject to troublesome infestations by minute insects and mites, such as chiggers and lice. Children should be taught how to care for their hair by keeping it at a length and style which makes maintenance easy. Girls with especially long hair may look more very healthy if the hair is properly cared for. For grooming the hair, TATA (2012) recommends the following:

1. Hair should be washed at least once a week using soap or mild shampoo.
2. Shampoos with borax or alkalis should be avoided during wash.
3. Hair should be well rinsed and dry after wash.
4. Men's hair should be brushed three to four times a day with a soft bristled brush or a wide toothed comb.
5. Brush and comb should be washed every time we wash our hair.
6. Oil the scalp, once a week, preferably an hour before hair wash.
7. Women's hair should be plaited or styled.

Moreover, Collins (2013) advised that the hair should be washed at least every other day, as this is important to keeping the hair and scalp healthy and in good shape. Sufferers from lice or dandruff should take necessary action at the earliest. Also, it is critical that both men and women get a haircut frequently for healthy hair. The longer one waits to get a haircut, the frailer and brittle the hair becomes, especially if it is long.

b. Skin Hygiene as a Form of Grooming Routine

The skin completely covers the body; it is continuous with the membranes lining the orifice of the body and is one of the most active organs. The skin contains the nerve endings of many of the sensory nerves. It is one of the main excretory organs of the body and plays an important part in the regulation of body temperature. It protects the deeper organs from injury and the invasion of macro-organisms. The skin comprises the epidermis and the dermis or corium.

The skin is essential to a person's survival and forms a barrier that helps prevent harmful microorganisms and chemicals from entering the body, and it also prevents the loss of life-sustaining body fluids. It protects the vital structures inside the body from injury and from the potentially damaging ultraviolet rays of the sun. The skin also helps regulate body temperature, excretes some waste products, and is an important sensory organ. The skin is thickest on the body part that regularly rubs against objects, such as the palms of the hands and the soles of the feet. Both delicate and resilient, the skin constantly renews itself and has a remarkable ability to repair itself after injury (Edelson, 2008; Visual Dictionary, 2012).

To care for the skin, children should be encouraged to take their bath regularly at least once or twice a day with mild soap and clean water, especially after a sweaty activity. The purpose of bathing is to tone the skin, keep off odour and sometimes wash off germs and extra oil from the skin. For personal grooming the following are recommended by Medicine Net (2012):

1. A mild soap will do the bathing adequately.
2. Germicidal or antiseptic soaps are not necessarily essential for daily bath.
3. A bath sponge can be used for scrubbing. But do not use abrasive material.
4. The genitals and the anus need to be cleaned well because of the natural secretions of these areas. In unhygienic conditions, they can cause irritation and infection.
5. Wash off well after soaping.
6. Drying with a clean towel is important.
7. Avoid sharing soaps and towel to prevent the spread of skin disease.
8. A moisturizing oil or cream can be used. It is better to use this at night,

c. Oral Hygiene as a Form of Grooming Routine

The mouth is called oral or buccal cavity in human anatomy. It is an orifice through which food and air enter the body. The mouth opens to the outside through the lips and empties into the body at the rear; its boundaries are defined by the lips, the cheeks; hard and soft palates and glottis. It is divided into two sections: the vestibule (the area between the cheek and teeth) and the oral cavity proper, filled by the tongue. The chief structure of the mouth is the teeth.

Teeth are the body's hardest and most durable organ and they are used to tear, grind, and chew food in the first step of digestion, enabling enzymes and lubricants released in the mouth to further break down food. Teeth also play a role in human speech. The teeth, lips, and tongue are used to form words by controlling airflow through the mouth. Additionally, teeth provide structural support to muscles in the face and form the human smile (Center for Disease Control, 2001; Martin, 2009; MedicineNet, 2012).

Oral health is an essential component of personal hygiene, as poor oral health affects growth, development and learning for children, communication, nutrition and self-esteem. Oral health is considered a determinant of good personal health and emerging research reveals that a majority of oral diseases is preventable. Keeping the mouth healthy is as important as keeping the whole body in good health. Children should therefore be taught different ways to prevent oral diseases. Below are some suggestions by Buerlein (2012):

1. Brush teeth twice a day and rinse well after every meal.
2. Brush before going to bed; this is important and especially recommended for people with sweet tooth.
3. The proper technique of brushing should be taught; they should be advised that they pay attention to the fact that you are getting rid of the food particles stuck in-between the teeth and in the crevices of the flatter teeth at the back, the molars and premolars.
6. Pay attention to the tongue and the inner surface of teeth as well.
7. The brush should have resilient bristles.
8. It should be rinsed well and left to dry after use.
10. Do not share your toothbrush with anyone.

d. *Hand Hygiene/Washing as a Form of Personal Grooming*

Studies on hand hygiene have indicated that children with proper hand-washing practices are less likely to report gastrointestinal and respiratory symptoms (Ejemot, Ehiri, Meremikwu and Critchley, 2008; Snow, White and Kim, 2008 World Health Organisation, 2009). Hand-washing with soap has been reported to reduce diarrheal infections by 44% and respiration infections by 23% (Curtis, et.al, 2009; UNICEF, 2009). Children should be nurtured to wash their hands regularly.

TATA (2012) suggested the points below concerning hand hygiene:

1. Hand needs to be washed thoroughly with soap and water before and after every meal and after visiting the toilet.
2. Soaping and rinsing should cover the areas between fingers, nails and back of the hand.
3. Hands should be dried with a clean towel after wash.
4. The towel at the wash stand has to be washed and changed every day.
6. While handling food it is important to avoid scratching, or touching the ears, nose, mouth or other body orifices, If need be for that, a handkerchief or tissue should be used and hands washed after that.
7. Keeping finger nail short is also important in personal hygiene.

e. *Feet Cleaning as a Form of Grooming Routine*

The foot is the lowest structure on the leg, consisting of 26 bones and resembling the hand. Seven thick, short, tarsal bones compose the heel and back of the instep; five parallel metatarsal bones, which form the instep, spread toward the front of the foot to form the ball. Fourteen smaller phalanges make up the toes; the large toe is composed of two, and each smaller toe is made up of three. Movements of the foot are controlled by leg muscles. With the thick layer of fatty tissue under the sole, these flexible arches absorb pressure and the shocks of walking and jumping. Jefferson, Foxlee and Del Mar (2007) and Redmond (2008) identify the following as basic ways through which feet personal hygiene can be achieved.

1. Give feet a good scrub with a sponge, pumice stone or foot scrubber that is not made of very abrasive material when having a bath.
2. Dry after bath between toes.
3. Keep toenails clipped.
5. Those that use shoes constantly need to slip them off now and then. This airs the socks a bit and makes them less smelly.
6. Wear cotton socks and a clean pair every day.
7. Powder the feet before wearing socks.

f. *Menstrual Hygiene as a Form of Grooming Routine*

Menstruation is the periodic vaginal discharge in humans and other mammals, consisting of blood and cell shed from the endometrium or lining of the uterus. Menstruation accompanies a woman's childbearing years, usually beginning between the ages of 10 and 16 (at puberty) and most often ceasing between the ages of 45 and 50 (at menopause). Menstruation is part of the process that prepares a woman for pregnancy. Each month the lining of the uterus thickens; if pregnancy does not occur, this lining breaks down and is discharged through the vagina. The three to seven days that menstruation lasts is called the menstrual period. In most women, the menstrual cycle is about 28 days, but it can vary considerably even from one month to another (Richardson, 2008). For personal hygiene during menstruation, the following recommendations were made:

1. Wash your body, including the genital area, in the same way as you always do.
2. Change tampons and sanitary napkins regularly, at least 4 to 5 times a day.
3. Always wash hands before and after handling a tampon or pad.

Conditions that can be controlled by Improving Personal Hygiene

TATA (2009) explain these conditions to include: head lice, dandruff, bad breath, ear wax, body odour, perspiration, urinary infection, pinworms, and athletes foot.

a. Head Lice

Lice are tiny insects that live on the human scalp and suck blood for nourishment. They make a pinprick like puncture on the scalp, emit an anti-clotting substance and feed on the blood. Lice thrive on unclean hair. Children are especially prone to lice infestation. Lice spread from one head to another when there is close contact as in school environments. Lice eggs are wrapped in a shiny white sheath and these show up on the upper layers of hair as the infestation increases. They make the scalp itchy and are a cause of annoyance and embarrassment. In infants, they may cause disturbed sleep and bouts of crying. If unchecked, they can produce scalp infection. Anti-lice lotions can be helpful, but in persistent cases a doctor's advice can be sought. Nit picking is painstaking and requires patience. A fine toothed comb and regular monitoring can get rid of the problem.

b. Dandruff

Dead skin on the scalp comes off in tiny flakes. This is associated with some disturbance in the tiny glands of the skin, called the sebaceous glands. They excrete oil, or sebum. When there is too little oil, the skin becomes flaky and dry. When there is too much oil also, dandruff is possible. It may have a slight yellow colour. Hair wash twice or thrice a week might be necessary. Combs and brushes must be washed as well. Hair should be brushed regularly. A wholesome diet and overall cleanliness will help. Massage the scalp everyday to improve circulation. A shampoo with selenium sulphide or salicylic acid helps.

c. Bad Breath

Poor oral hygiene and infection of gums often result in bad odour emanating from the mouth. This is called halitosis. Smoking can make this worse. Proper brushing of the teeth and oral care can get rid of bad breath. There can be other reasons for bad breath. Colds, sinuses, throat infections or tonsils can cause bad breath. Diseases of the stomach, liver, intestines or uncontrolled diabetes are also possible causes. Therefore, if bad breath persists despite good dental care, it is important to see a doctor.

d. Ear wax

Cerumen or ear wax accumulates in the ear canal that leads from the outer ear to the ear drum. As the secretion comes out of the ear it collects dust particles which might have got in from outside. Daily wash with soap and water is enough to keep the outer ear clean. Putting in hairpins, safety pins or blunt edged things for cleaning purposes might harm the ear.

e. Body Odour

The body has nearly two million sweat glands. These glands produce three quarts to one pint of sweat in a day. In tropical countries, naturally, more sweat is produced. The perspiration level increases with an increase in physical exertion or nervous tension. Fresh perspiration, when allowed to evaporate, does not cause body odour. An offensive smell is caused when the bacteria present on the skin get to work on the sweat and decompose it. This is especially so in the groin, underarms, feet or in clothing that has absorbed sweat. Also, diet influences odour.

Two baths a day, with liberal lathering and change of clothes in close contact with the body should take care of the problem. Talcum powders, of the non-medicated kind can be used under the armpits. Deodorants or antiperspirants can be used. Most commercial skin deodorants contain an antiperspirant, such as aluminium chloride, which reduces sweating by forming a hydroxide gel in the sweat ducts. But sweat suppressed in one area, comes out in another. The addition of perfumes masks the odour. Deodorant soaps do not interfere with sweat secretion, but contain hexachlorophene which destroys the bacteria that causes body odour. If all the routines do not reduce body odour, it is also important to meet with a doctor.

f. Perspiration

The physiological purpose of perspiration is to control body temperature— as perspiration evaporates, the surface of the skin is cooled. Perspiration can also be triggered by emotions, such as fear, excitement, or anxiety (Redmond, 2008). The body perspires to keep the body temperature from rising. Sweat is 99% water. It has a small quantity of urea, salt and some other compounds. If the body perspires more in hot weather, a slight increase in the intake of common salt is advised, to make good what is lost through perspiration. Excessive perspiration can lead to the scaling of the skin or inflammation (dermatitis). Some people sweat more, some less due to hereditary and body composition factors. Excessive perspiration is also a symptom of diabetes, anaemia and hyperthyroidism.

g. Urinary Infection

Girls are especially prone to this infection. This happens when bacteria travel up the urethra and start breeding there. Chances of urinary infection are higher during pregnancy and after major surgery. This infection causes pain or a burning sensation during urination. Sometimes the urine is discoloured. Itching, frequent urination, fever and chills can also result from urinary infection. Though not a serious problem, it can be an irritating and an awkward one. It is easy to be

infected when toilets are not clean or when too many people share toilet facilities. To avoid this infection, improve overall standards of hygiene: both regarding toilets and personal parts. It is important to wash or wipe front to back after urinating or defecating and wearing of tight fitting synthetic underwear should be avoided. Drink plenty of water. Do not hold back when you have the tendency to urinate. If the condition persists consult a doctor.

h. Pinworms

Pinworms are about a quarter of an inch long and can cause plenty of discomfort. The worms come out of the anal opening to lay eggs at night. This leads to intense itching in the area. Disturbed sleep, mild pain and diarrhoea are possible consequences. Children are especially prone to this complaint. The urge is to scratch this area. When scratching, eggs stick to the hand and under the nails and infect anything the person touches. The eggs can pass through air or by contact with infected food or bed linen to others who share the premises. The eggs are not affected by disinfectants and remain active in the dust for a long period. Bed clothes, undergarments and nightwear of the infected person must be washed thoroughly, if possible in hot water. Sometimes all member of the family are advised to take deworming medication when one member is affected. Scrubbing hands well with soap before eating should check the problem.

i. Athletes Foot

This happens when the skin becomes scaly and there are sores or blisters between toes. Often, it spreads to the soles. This infection is caused by a fungus, which breeds in warm wet places. It is a minor irritation and often disappears by itself. But sometimes these cracks and sores become the site for other infections. Proper foot care can alleviate the condition. Rub off peelings gently. Wash feet well and apply powder. A mild fungicidal ointment at bedtime will help. Keep feet exposed. If shoes are to be worn, wear cotton socks. Sometimes the blisters begin to ooze. Then soak feet in a potassium permanganate solution of recommended strength. Soak your feet in a warm bath for 10 minutes and then apply calamine lotion. If the problem persists consult a doctor.

Excessive Body Hygiene and Allergies

The benefits of body hygiene can be diminished by the risks of excessive body hygiene, which is hypothesized to cause allergic disease and bodily irritation. Although there is substantial evidence that some microbial exposures in early childhood can in some way protect against allergies, there is no evidence that we

need exposure to harmful microbes (infection) or that we need to suffer a clinical infection (Bremner, Carey, DeWilde, Richards, Maier, Hilton, Strachan and Cook, 2006). Nor is there evidence that hygiene measures (such as hand washing, food hygiene, etc) are linked to increased susceptibility to atopic diseases (Bloomfield and Nath, 2005). If this is the case, there is no conflict between the goals of preventing infection and minimising allergies. A consensus is now developing among experts that the answer lies in more fundamental changes in lifestyle that have led to decreased exposure to certain microbial or other species, such as helminthes, that are important for the development of immunoregulatory mechanisms (Rook, 2001). However, there is still much uncertainty as to which lifestyle factors are involved.

Although media coverage of the hygiene hypothesis has declined, a strong 'collective mindset' has become established that dirt is 'healthy' and hygiene somehow 'unnatural'. This has caused concern among health professionals that everyday life hygiene behaviours, which are the foundation of public health, are being undermined. In response to the need for effective hygiene in home and everyday life settings, the International Scientific Forum on Home Hygiene has developed a 'risk-based' or targeted approach to home hygiene that seeks to ensure that hygiene measures are focussed on the places, and at the times most critical for infection transmission. Whilst targeted hygiene was originally developed as an effective approach to hygiene practice, it also seeks, as far as possible, to sustain 'normal' levels of exposure to the microbial flora of our environment to the extent that is important to build a balanced immune system (Bloomfield, Exner, Fara, Nath, Scott and Van der Voorden, 2009).

Factors Responsible for Poor Personal Hygiene Practices

Many factors combine to affect personal hygiene practices, especially among children. Poor state of water supply and sanitation in schools, especially in Ibadan was identified as a major factor responsible for the decline of personal health and productivity of school age children (Ana, Oloruntoba, Sridhar and Adekolu, 2008). In another study, Ana et al. (2008) reported diarrhoea and worm infestation as health problems among school children in Ibadan Metropolis and attributed this to poor water and personal hygiene. To a large extent, factors such as the state of the environment, income and educational level have considerable impacts on personal hygiene. Wagbatsoma and Aimiuwu (2008) surveyed the effect of sanitary provision and hygiene practices on intestinal helminth burden of primary school children in Egor area of Benin-city Nigeria. The study established a strong link

between poor hygiene practices and the burden of helminth infections. The study also found that pupils of low economic background in public schools were more infected (30.8%) than those in private schools (3.8%). The factors that affect personal hygiene, according to John and Laura (1987), include:

- The social and economic environment,
- The physical environment, and
- The person's individual characteristics and behaviours.
- Income and social status: higher income and social status are linked to better health. The greater the gap between the richest and poorest people, the greater the difference in health. For good personal hygiene to take place, items needed to achieve the said personal hygiene must be available. Unemployed individual and/or people with very low income will definitely be unable to purchase items with which personal hygiene objectives can be achieved. There is every possibility that children from parents who are employed may look good and pay more attention to their personal hygiene than those whose parents are unemployed.
- Education: low education levels are linked with poor health, more stress and lower self-confidence. Dedicating time to the looks and personal hygiene of their children may not be a priority to an illiterate. Educated individual would have acquired knowledge about the importance of personal hygiene and the consequences if this is not observed.
- Physical environment: environment plays a very important role in helping children to pay attention to their personal hygiene. The United Nations Children Fund (2007) states that the physical environment and cleanliness of a school facility can significantly affect the health and wellbeing of children. There is a high tendency that persons or individuals living in an environment that is tidy, quiet, and having all amenities may pay more attention to personal hygiene than those in an unclean environment.
- Social support networks: greater support from families, friends and communities is linked to better health and personal hygiene—especially where the individual involved cannot afford to purchase but relied on support network for items like soap, toothpaste and brush, bathroom slippers, body cream, etc, which are all needed for personal hygiene.
- Culture: customs and traditions, and the beliefs of the family and community all affect health.
- Personal behaviours: individual behaviour plays a part in determining healthiness and the likelihood of developing certain illnesses. Personal

behaviour like balanced eating, keeping active, smoking, drinking, and how we deal with life's stresses and challenges all affect health and personal hygiene.

- Health services: access and use of services that prevent and treat disease influences health. To attain personal hygiene, some situation requires meeting health practitioners and when this is not available within the reach of the individual, personal hygiene may be difficult or impossible.

Implication for Health Education

This review highlighted poor personal hygiene practices among school children. The need to revisit health education as it is being taught in our schools is important. This is especially necessary, as most studies advocated health education as the means to nurture and improve personal hygiene practices in schools. The review takes cognisance of the existence of some hindrances to the practice of personal hygiene, especially those beyond the control of health education. Nevertheless, the ability to use various creative health education methods to instil health literacy, which will bring about positive change in attitude and behaviour, is considered the antidote to improving the poor personal hygiene practices in schools. Health education must therefore facilitate voluntary action conducive to health.

Conclusion and Recommendations

Every child today is a potential parent of tomorrow who must be health conscious with regards to lifestyle and taking vital decisions concerning choices that will determine healthy living. This paper reviewed literature on personal hygiene and grooming practices among schools children as a prerequisite for healthy living. It listed some aspects of personal grooming that must be used to nurture children. The literature reviewed revealed that the supply of water to most schools in Ibadan was poor, with its negative impact on personal hygiene practices of school children. Based on the conclusion, the following recommendations are made:

- Health education should be recognised as a potent force in instilling health literacy needed to predispose school children to personal hygiene practices.
- It is important to re-train personnel, re-tool the schools with material and facilities that will aid practical demonstration of some personal hygiene concept, as well as reposition health education curriculum to meet its goal of stimulating its beneficiaries positively.
- Multifaceted approach that will cut across every point of contact must be devised to further drive home the practice of personal hygiene in schools.

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