

Impact of Environmental Pollution and Protection Through Hygiene Promotion- A Sociological Study

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Abstract

This paper deals with hygiene promotion measures. It outlines the hygiene promotion education and its importance. This paper makes a special note on diarrhoeal morbidity and mortality and mode of transmission. This paper sheds light on accurate of good hygiene practice hygiene promotion measures and cost effectiveness of hygiene promotion. This paper concludes with some interesting findings.

Keywords: Environmental Pollution, Protection and Hygiene



1. Introduction

The World Health Organisation (WHO) defines hygiene as ‘the conditions and practices that help to maintain health and prevent the spread of diseases. In Water Aid’s (2011) sanitation framework, hygiene is defined as ‘personal and household practices such as hand washing, bathing, and management of stored water in the home, all aimed at preserving cleanliness and health. There are various categories of hygiene behaviour that have a significant impact on the transmission of water- and sanitation-related diseases.

They are: Safe disposal of human excreta including that of children and infants, Water source protection and use from the water source to transportation, storage and ‘point of use’, Personal hygiene washing of hands with soap at critical times, as well as body, face and clothes, food hygiene relating to cooking, washing, storing, preventing cross and contamination, domestic and environmental hygiene with respect to disposal of solid waste and animal excreta, control of wastewater and rainwater, cleanliness of the house and its surroundings.

Hygiene is about behaviour; changing hygiene practices means changing behavior, Research demonstrates that changing behaviour does not necessarily come about due to knowledge of the potential negative repercussions of a practice towards the knowledge that not washing hands may have health implications; it is also dependent upon context – the beliefs, attitudes and opportunities of individuals and societies.

2. Hygiene Promotion vs Hygiene Education

The water and sanitation sector is gradually moving away from the term 'hygiene education'. Hygiene education is about enhancing people's knowledge by raising awareness of the links between good hygiene practices and health. It is premised upon the belief that teaching people about how disease spreads will result in them changing their behaviour for the better.

However, motivations for changing behaviour are not necessarily directly related to health benefits. They may be more closely related to 'nurture in terms of the need to protect children, affiliation the need to fit in with family or group, avoiding disputes, comfort relating to convenience, time, weather, privacy, attracting others with respect to pride, cleanliness, gaining more votes, attracting brides/bridegrooms, disgust with earlier behaviour open defecation, dignity and responsibility, economics towards saves money, makes money, and existing cultural beliefs'.

3. Hygiene

As per the report by Bartram J (2008) access to safe water, sanitation and good hygiene practices have a major role to play in the reduction of disease. Globally, improving WASH has the potential to prevent at least 9.1% of the disease burden in disability adjusted life years, or 6.3% of all deaths? Of the total burden of ill-health preventable by improvements in WASH, more than half is caused by diarrhoeal diseases. Diarrhoeal diseases also contribute to malnutrition, rendering people especially children more susceptible to other diseases. Other diseases associated with poor Wash include schistosomiasis, trachoma, soil-transmitted helminth infections and tropic enteropathy.

4. Diarrhoea

As per the report by the Cochrane Collaboration (2010), diarrhoeal diseases represent a major part of the WASH disease burden, as the pathogens that are associated with diarrhoeal diseases are passed on primarily through the faecal-oral route. UNICEF/WHO (2009) reported that young children are especially affected, Young children bear 68% of the total burden of diarrhoeal disease, Globally, approximately 2.5 billion cases of diarrhoea occur among children under five years old every year. About 80% of these cases are in Africa and South Asia diarrhoea is the second most common killer of children under five globally, and as of 2010, it is the most common killer of children under five years old in Sub-Saharan Africa, Nearly one in five child deaths is due to diarrhoea, about 1.5 million lives lost every year. This is higher than the number of deaths caused by AIDS, malaria and measles combined, Just 15 countries account for more than 70% of all annual deaths from diarrhoea among children under five.

5. The Benefits of Good Hygiene Practices

Water and sanitation interventions contribute to preventing disease transmission in various ways. For example, safe disposal of faeces is a primary barrier to prevent faeces from contaminating the environment. Pit latrines, used by both adults and children, can reduce diarrhoea by 36% or more. Furthermore, improved water quality and quantity can be associated with up to a 20% reduction in diarrhoea.

Govindan B K (2005) notes that the provision of improved water supply and sanitation facilities make it easier to practice good hygiene, on their own they are not sufficient to significantly decrease morbidity and mortality rates. It could be noted that, good hygiene practices are of critical importance as they have a greater impact on health and ensure hygienic use and maintenance of facilities. Hand washing with soap at critical times, especially before eating and after contact with excreta, can reduce diarrhoeal disease by up to 47%, the prevalence of eye infections like trachoma and conjunctivitis by approximately 45%, and

respiratory infections by about 20%. Good hygiene practices can also reduce the prevalence of respiratory infections, skin infections, blinding trachoma, endo-parasites like roundworm and hookworm, and ecto-parasites such as scabies and fleas. Hygiene practices during delivery and postpartum the period just after delivery, particularly hand washing with soap or equivalent, have been reported to reduce neonatal mortality.

As per the report by Biran A (2011) Face and body washing reduce the risk of trachoma and skin infections. Lack of food hygiene particularly of weaning food 'has been suggested as a major contributor to diarrhoea in low-income settings'. Preventing children from coming into contact with animal faeces and keeping household surfaces clean, as well as fly control, will also lessen the risk of disease.

6. Cost-Effectiveness of Hygiene Promotion

The disease burden attributed to poor water, sanitation and hygiene is proven to be extremely costly for households and health systems. Health costs are estimated at approximately US\$ 340 million globally for households lacking a water supply and sanitation. Out of all WASH interventions, hygiene promotion has proven to be particularly effective in reducing mortality and morbidity from child diarrhoea, and has been identified as the most cost-effective disease control intervention.

7. Equity and Inclusion in Hygiene Promotion

Hygiene promotion programmes take on different forms depending on their context. However, it is important that any programme is inclusive, i.e. relevant and accessible to all members of society.

8. School-Aged Children

According to WHO (2012) schools can serve as hubs for the transmission of faecal-oral diseases, which have damaging impacts on children's physical and cognitive development. According to WHO pre-school and school age children are particularly vulnerable to infections of round worm and whip worm, which, along with other water- and sanitation-related diseases, including diarrhoea, can result in significant absences from school. However, schools can also play an important role in hygiene promotion. Hygiene messages in school curricula, community outreach activities and school health clubs can play a pivotal role in promoting good hygiene practices, together with the provision of safe sanitation and drinking-water. When children are included in programmes as active participants, they can become powerful agents of change in their own households and in their communities by passing on messages about good hygiene practices. As future generations of adults, children are also critical to ensuring the sustainability of behaviour change. Child to child and child to community hygiene promotion approaches recognize the responsibility that children often have in developing countries for looking after younger siblings, and therefore the role they can play to influence their siblings and other family members to adopt safer hygiene practices.

9. Menstrual Hygiene Management

Research on menstrual hygiene management indicates that inadequate facilities for cleaning and disposing of menstrual hygiene materials can have significant health implications for women and girls, and affect school attendance rates. Hygiene promotion programmes should therefore include a focus on the 'production of easy and affordable access to sanitary napkins and related products, and their safe and dignified disposal after use' as well as adjustments to latrine construction and design that help girls and women to manage their hygiene better and in sufficient privacy during menstruation. It is important that these are

defined in context to ensure cultural appropriateness and incorporation of beliefs and attitudes around menstruation. School environments that are not 'girl-friendly' are characterised by: A lack of latrines, or a reliance on latrines that are inadequate in terms of quality, design, safety, privacy or number, A lack of a clean water supply inside the latrines to wash hands and cloths, A lack of proper disposal mechanisms, A lack of an adequate and safe washing area.

These environments, whether in schools or other public and private places, can significantly hinder the ability of women and girls to practise appropriate hygiene during their menstrual cycle. Moreover, the taboos surrounding menstruation need to be challenged so that it becomes a subject that can be openly discussed by all, and taught about in school.

10. Hygiene Promotion for Men

Hygiene is often considered to be in the domain of women and girls. However, men, women, girls and boys have different needs with regards to hygiene and have different roles to play in relation to promoting behaviour change within their families and communities. As men are often decision-makers and control household finances, their involvement is essential in supporting their partners and children to change behaviours. However, programmes often only require results based on impacts on women and children, and there is a general lack of awareness about tools to target men. Issues such as identifying what motivates men, how and where they can be targeted, how inclusion of men in hygiene promotion programmes can be resourced, and what support can be provided to health and sanitation facilitators are all important.

11. Conclusion

It could be seen clearly from the above discussion that hygiene promotion is very essential. It is noted on diarrhoeal transmission mechanism and morbidity and mortality related with hygiene practice. The good hygiene practice can prevent morbidity and mortality. The promotion of hygiene education is need of the home with a view to promote health and sanitation among the people.

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