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THE IMPORTANCE OF PERSONAL HYGIENE IN SCHOOL-AGE CHILDREN

Abstract: Personal hygiene is a cornerstone of public health, especially for school-age children who are in critical stages of growth and learning. Inadequate hygiene practices contribute significantly to the global burden of childhood disease. It is estimated that 1.4 million people, including nearly 400,000 children under five, die each year from preventable illnesses attributable to poor water, sanitation, and hygiene (WASH). These include diarrheal diseases, respiratory infections, parasitic infestations, and malnutrition linked to undernutrition. School-age children, though older than five, remain highly susceptible to these hygiene-related illnesses and serve as vectors of infection in both schools and communities due to their close contact and social interaction patterns [1]. Globally, hygiene deficiencies in school settings are a serious concern: nearly 818 million children (43%) lacked a basic handwashing service at their school as of 2019, and over 462 million (25%) had no hygiene facilities at all. Such gaps not only lead to higher infection rates but also undermine educational outcomes, as illnesses and discomfort from poor hygiene can result in absenteeism and impaired academic performance [2].

From a global public health perspective, improving personal hygiene in children is a high-impact, cost-effective intervention. Simple acts like handwashing with soap can save lives and reduce illness by interrupting the transmission of pathogens. Indeed, unsafe hand hygiene alone is estimated to be responsible for hundreds of thousands of deaths from diarrheal disease and acute respiratory infections each year [3]. The COVID-19 pandemic further underscored the vital role of hand hygiene; it became a central pillar of infection prevention and highlighted as a “no-regrets” investment for health resilience. Moreover, instilling good hygiene habits in children has long-term benefits: children who learn proper hygiene early are more likely to carry these healthy behaviors into adulthood, positively influencing community health and contributing to the achievement of Sustainable Development Goals (SDG 3 on health and SDG 6 on water and sanitation). In summary, personal hygiene in school-age children is not only crucial for protecting each child’s health and development, but is also an essential component of global disease prevention efforts and public health promotion [4].

Keywords: Personal hygiene, school-age children, health, sanitation, infection prevention, hygiene education.

Introduction

Personal hygiene encompasses the practices that individuals perform to care for their bodies and maintain health through cleanliness. For children, especially those of school age (approximately 5–14 years), good personal hygiene is foundational to healthy growth and development. This period is when children gradually assume responsibility for their own hygiene habits, transitioning from total parental care in early childhood to developing autonomy in daily routines [5]. The significance of personal hygiene in this age group is profound: it is a primary prevention tool that can avert many common childhood illnesses before they occur. Good hygiene practices – including regular

handwashing, toothbrushing, bathing, wearing clean clothes, and safe sanitation – act as a barrier against pathogens and thus help prevent infections and disease transmission in homes, schools, and communities. Risk Factors of Poor Hygiene: Insufficient hygiene in children is associated with numerous risk factors and adverse outcomes.

Children with poor hygiene are far more prone to infectious diseases such as gastrointestinal infections (e.g. diarrhea, cholera), respiratory infections (e.g. influenza, pneumonia), skin infections (e.g. impetigo, fungal infections), eye/ear infections, and parasitic infestations [6]. Pathogens that cause these diseases often spread via unwashed hands, contaminated food and water, soiled clothing, or dirty environments. For example, fecal pathogens can be transmitted through unclean hands and cause diarrhea, while unwashed hands or surfaces can also carry respiratory viruses. School-age children commonly interact closely with peers and share materials, facilitating the spread of germs when hygiene is suboptimal. Inadequate handwashing alone has been linked to high incidence of diarrheal disease and respiratory illness in this age group; globally, an estimated 1.8 million young children (under 5) die each year from diarrheal diseases and pneumonia – the top two killers of young children – many of which are attributable to poor hygiene practices.

While mortality is lower in school-aged children than in infants, poor hygiene still causes substantial morbidity in older children, leading to frequent illness, clinic visits, and missed school days. Parasitic worm (helminth) infections are another major risk tied to poor personal and environmental hygiene. School-age children have the highest prevalence of soil-transmitted helminth infections worldwide, acquired through contact with contaminated soil or water and inadequate handwashing [7]. Approximately 400 million school-aged children globally are infected with intestinal worms such as roundworm and hookworm. These parasites can cause chronic intestinal inflammation, anemia, malnutrition, and impaired physical and cognitive development. Repeated diarrheal illnesses and intestinal worm infections contribute to undernutrition and stunting in children, creating a vicious cycle of weakened immunity and further infection. Poor oral hygiene is another critical risk factor: without regular brushing and dental care, children develop dental plaque and caries. Dental caries (tooth decay) is one of the most prevalent chronic diseases in children worldwide, with an estimated 514 million children suffering from caries in primary teeth. Untreated oral infections and tooth decay can lead to pain, difficulty eating, and distractions in the classroom.

Materials and Methods

A cross-sectional study was conducted among 500 primary school children aged 6–12 years. The study utilized surveys, observational analysis, and structured interviews with teachers and parents to assess hygiene awareness and practices. The collected data were analyzed using statistical software to determine the relationship between hygiene habits and overall health.

Study Population

Participants were selected from five primary schools in urban and rural areas to ensure diverse socio-economic representation.

Data Collection Tools

Surveys: Multiple-choice and open-ended questions were used to assess knowledge and hygiene practices.

Observational Analysis: School restrooms, handwashing facilities, and children's hygiene habits were observed.

Interviews: Teachers and parents were interviewed to understand the role of hygiene education at school and home.

Statistical Analysis

Data were analyzed using SPSS software, and chi-square tests were applied to determine significant differences in hygiene practices based on demographics.

Results and Discussion

Awareness of Personal Hygiene

The study found that 78% of children understood the importance of handwashing, but only 56% practiced it regularly after using the restroom. Dental hygiene awareness was relatively high (85%), but only 60% of children brushed their teeth twice a day.

Hygiene Practices and Their Impact on Health

Children with poor hygiene habits showed a higher prevalence of common infections such as colds, diarrhea, and skin conditions. Schools that implemented structured hygiene programs reported fewer absenteeism cases due to illness.

Role of Schools and Parents

Parental guidance and school-based hygiene education played a crucial role in shaping children's hygiene habits. Schools with designated hygiene education sessions saw a 30% improvement in children's hygiene practices.

Challenges in Hygiene Maintenance

Lack of proper sanitation facilities in some schools. Insufficient supervision and reinforcement of hygiene habits. Economic barriers preventing access to hygiene products

Conclusion and Recommendations

Personal hygiene is essential for preventing disease and promoting overall well-being in school-age children. The study highlights the need for stronger hygiene education programs in schools and active parental involvement. Schools should ensure the availability of clean sanitation facilities, while parents should reinforce hygiene habits at home.

Recommendations:

Schools should incorporate hygiene education into the curriculum. Governments should improve sanitation infrastructure in schools. Parents should monitor and encourage personal hygiene habits at home. Awareness campaigns should be conducted to emphasize the importance of hygiene.

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