



*Original Research Article*

## **Hand Washing Practices among Patients Attending RHTC Shivanagi**

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### **ABSTRACT**

The knowledge and practice of a simple act of hand washing in the community appeared to be poor even today. Public health importance of hand washing was known since 19<sup>th</sup> century. Earlier studies highlighted that simple act of hand washing could prevent diarrhea, ARI & skin infections. It is one of the most cost effective methods in public health interventions to prevent diseases. There is need to create more awareness with the help of IEC materials thus by focusing on health education. Public health concerned authorities can greatly contribute to health care. Considering all these important issues related to hand washing the present study intends to know the hand wash practices among Rural Health Training Center Shivanagi beneficiaries.

**KEY WORDS:** Patients, Hand Wash, Practice, public health

### **INTRODUCTION**

Health care is tough task to country like India due to the panges of poverty, illiteracy, ignorance & conservatism. Public health care professionals are striving hard to focus more on prevention rather than on curative & rehabilitative services as preventive services are simple, affordable, easy & most suitable techniques of handling health care. Common practices like healthy life style, vaccination, sanitation, & hygienic practices like use of handkerchief, balanced diet avoiding bare foot walking & washing hands have proved that these practices greatly contribute to the healthy life.

The knowledge & practice of hand washing in the community appeared to be poor even today. <sup>[1]</sup> Public health importance of hand washing was known since 19<sup>th</sup> century. <sup>[2]</sup> Even the Global hand washing day celebration on 15<sup>th</sup> October focuses on importance of hand washing. Earlier studies highlighted that simple act of hand washing could prevent Diarrhea, ARI & Skin infections. <sup>[3,4,5,6]</sup> It is one of the most cost effective methods in public health interventions to prevent diseases. Considering all these important issues related to hand washing the present study intends to know the hand wash practices among RHTC beneficiaries.

## Aims & Objectives

- To know the hand washing practices of patients attending RHTC Shivanagi.
- To elicit the influence of literacy status & gender on hand washing practices.

## METHODOLOGY

Type of study;	Cross sectional
Duration of study;	One month October 2009
Sample Size;	369 Adult patients attending OPD.
Method;	Interview techniques using pre- tested proforma
Setting;	Rural Health Training Centre, B.L.D.E.A's Shri.B.M.Patil Medical College, Bijapur.
Statistical Analysis;	Percentage & Chi square.

## RESULTS & DISCUSSION

**Table 1: Age and Sex distribution of Respondents**

Age in Years	Male (%)	Female (%)
18 – 30	43 (27)	102 (49)
31 – 40	29 (18)	41 (20)
41 – 50	35 (22)	30 (14)
51 – 60	29 (18)	24 (11)
61 – 70	17 (11)	09 (4)
71 & Above	06 (4)	04 (2)
Total	159 (43)	210 (57)

159 (43%) were male respondents, 210 (57%) were females, Maximum respondents were in the age group of 18 to 30 years, 264 (71%) were Hindus & 105 (29%) were Muslims.

**Table 2: Hand washing practice before handling food**

Substance used	Male			Female		
	Literate(%)	Illiterate(%)	Total	Literate(%)	Illiterate(%)	Total
Soap	60(61)	21(35)	81	32(47)	65(46)	97
Water only	34(34)	30(50)	64	33(49)	52(61)	85
Ash	03(3)	03(5)	06	02(3)	12(8)	14
Soil	02(2)	06(10)	08	01(1)	13(9)	14
Total	99	60	159	68	142	210
$X^2 = 12,269$ P =0.01			$X^2 =7.83$ P =0.05			

178 (48%) have used soap and 149 (41%) used water only. 20 (5%) used ash & 22(6%) have used soil to wash their hands before handling food. This association between substance used and literacy status was found to be highly significant. The results revealed by similar study in

Kolkata [1] by Ray S K & Dobe M et al only very few used soap & water for hand washing before meal (13%), before serving food (1%), before cooking (1%) in Rural areas.

**Table 3: Hand washing practice after Defecation**

Substance used	Male			Female		
	Illiterate (%)	Literate(%)	Total	Illiterate(%)	Literate(%)	Total
Soap	17(28)	51(52)	68	42(30)	32(47)	74
Water only	32(53)	39(39)	71	68(48)	26(38)	94
Ash	04(7)	03(3)	07	15(10)	02(3)	17
Soil	07(12)	06(6)	13	17(12)	08(12)	25
Total	60	99	159	142	68	210
X <sup>2</sup> =8.889 P =0.05			X <sup>2</sup> =8.345 P =0.05			

142 (38%) have used soap, 165 (45%) used water only, 24 (7%) used ash and 38 (10%) used soil to wash their hands after defecation. This association between substance used and literacy status was found to be highly significant. Observations by Ray S K & Dobe M et al 71% used soap, 26% used mud and ash for hand washing after defecation in rural areas.

## CONCLUSION

None of the respondents knew about steps of hand washing, they opined that only for cleaning hand washing is necessary there was no concept that “Hand washing with soap can prevent Communicable diseases”

## RECOMMENDATIONS

There is need of more IEC about hand washing as an important tool for prevention of Communicable diseases. A strong BCC activity should be conducted at grass root level with involvement of Health, ICDS and Panchayat functionaries as well as school teachers and students.

## REFERENCES

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