HOME HYGIENE & HEALTH

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YOUR COMPLETE GUIDE TO HEALTH AND HYGIENE IN THE HOME

Abstract

Hygiene is the practices we adopt in our homes and everyday lives to protect ourselves, our families and our friends and colleague from infectious diseases.

Getting Started

Asking yourself 'what is hygiene?' and worrying about invisible germs might not seem important when you've just noticed the cat getting ready to climb on the dining table with half the litter box trailing behind them.

Luckily, getting to grips with good hygiene practices is easier than you think. Below are some great home hygiene tips to follow that'll help you keep top-notch health and hygiene at home.

THINGS YOU DIDN'T KNOW ABOUT... HYGIENE

1 "Hygiene" comes from Hygieia, the Greek goddess of health, cleanliness, and . . . the moon. Ancient Greek gods apparently worked double shifts.

2 The human body is home to some 1,000 species of bacteria. There are more germs on your body than people in the United States.

3 Not tonight dear, I just washed my hands: Antibacterial soap is no more effective at preventing infection than regular soap, and triclosan (the active ingredient) can mess with your sex hormones.

4 Save the germs! A study of over 11,000 children determined that an overly hygienic environment increases the risk of eczema and asthma.

5 Monks of the Jain Dharma (a minority religion in India) are forbidden to bathe any part of their bodies besides the hands and feet, believing the act of bathing might jeopardize the lives of millions of microorganisms.

6 It's a good thing they're monks.

7 Soap gets its name from the mythological Mount Sapo. Fat and wood ash from animal sacrifices there washed into the Tiber River, creating a rudimentary cleaning agent that aided women doing their washing.

8 Ancient Egyptians and Aztecs rubbed urine on their skin to treat cuts and burns. Urea, a key chemical in urine, is known to kill fungi and bacteria.

9 In a small victory for cleanliness, England's medieval King Henry IV required his knights to bathe at least once in their lives—during their ritual knighthood ceremonies.

10 That's their excuse, anyway: Excrement dumped out of windows into the streets in 18th-century London contaminated the city's water supply and forced locals to drink gin instead.

11 A seventh grader in Florida recently won her school science fair by proving there are more bacteria in ice machines at fast-food restaurants than in toilet bowl water.

12 There's no "five-second rule" when it comes to dropping food on the ground. Bacteria need no time at all to contaminate food.

13 The first true toothbrush, consisting of Siberian pig hair bristles wired into carved cattle-bone handles, was invented in China in 1498. But tooth brushing didn't become routine in the United States until it was enforced on soldiers during World War II.

14 Please don't squeeze the corncob. In 1935, Northern Tissue proudly introduced "splinter-free" toilet paper. Previous options included tundra moss for Eskimos, a sponge with salt water for Romans, and—hopefully splinter-free—corncobs in the American West.

15 NASA recently spent $23.4 million designing a toilet for the Space Shuttle that would defy zero gravity with suction technology at 850 liters of airflow per minute. That's a lot of money for a toilet that sucks.

16 In 1843, Oliver Wendell Holmes Sr. campaigned for basic sanitation in hospitals. But this clashed with social ideas of the time and met with widespread disdain. Charles Meigs, a prominent American obstetrician, retorted, "Doctors are gentlemen, and gentlemen's hands are clean."

17 Up to a quarter of all women giving birth in European and American hospitals in the 17th through 19th centuries died of puerperal fever, an infection spread by unhygienic nurses and doctors.

18 TV kills! University of Arizona researchers determined that television remotes are the worst carriers of bacteria in hospital rooms, worse even than toilet handles. Remotes spread antibiotic-resistant Staphylococcus, which contributes to the 90,000 annual deaths from infection acquired in hospitals.

19 It is now believed President James Garfield died not from the bullet fired by Charles Guiteau but because the medical team treated the president with manure-stained hands, causing a severe infection that killed him three months later.

20 What on earth made them think manure-stained hands were remotely acceptable to treat anyone?

I. What Is Home And Everyday Life Hygiene?

In this pdf, you'll find some exceptional guidance because it looks at hygiene "holistically" from the point of view of the family, at home and in their everyday lives and the range of actions they need to undertake (food and water hygiene, handwashing, using the toilet, coughing and sneezing, care of pets, safe disposal of waste) in order to protect from infectious disease. It also includes caring for family members who are infected, or who are at greater risk of infection e.g patients discharged from hospital or undergoing outpatient treatment, babies, pregnant mums etc.

In line with this, IFH is committed to promoting hygiene education and developing community-based projects that will empower communities and individuals to take responsibility for their health in terms of hygiene in the home and its environment.

II. Why Is Home And Everyday Life Hygiene So Important?

Infectious disease continues to exert a heavy burden on health and prosperity. Although the majority of deaths occur in the developing world, infectious disease still causes around 4% of deaths in developed countries and is a significant cause of morbidity. Social, demographic and other changes mean

that the importance of hygiene in home and everyday life is increasing rather than decreasing.

Food, waterborne and non-food-related infectious intestinal diseases remain at unacceptable levels. Despite people's general belief that foodborne infections occur outside the home, data collected from 18 European countries, suggests that about 31% of foodborne outbreaks occur in private homes. Norovirus, mainly spread from person-to-person, is the most significant cause of intestinal infections in the developed world, including 3 million cases per year in the UK, whilst rotavirus is the leading cause of gastroenteritis in children under 5.

On average, adults get 4 to 6 colds per year, while children get 6 to 8. Respiratory hygiene can limit spread of respiratory infections, particularly colds, but also influenza. Since respiratory and intestinal viral infections are not treatable by antibiotics, prevention through hygiene is key.

Governments, under pressure to fund the level of healthcare that people expect, are looking at prevention as a means to reduce health spending. Increased homecare is one approach to reducing health spending, but gains are likely to be undermined by inadequate infection prevention and control at home. Healthcare workers now accept that reducing the burden of infection in healthcare settings cannot be achieved without also reducing the circulation of pathogens such as norovirus and MRSA in the community.

Societal changes mean that people with greater susceptibility to infectious disease make up an increasing proportion of the population, up to 20% or more. The largest proportion comprises the elderly who have reduced immunity, often exacerbated by other illnesses. It also includes the very young, and family members with invasive devices such as catheters and people whose immuno-competence is impaired as a result of chronic and degenerative illness (including HIV/AIDS), or drug therapies such as cancer chemotherapy.

Emerging pathogens and new strains are a significant concern. It is remarkable that norovirus, Campylobacter and Legionella were largely unknown as human pathogens before the 1970s, with others such as E.coli O157 and O104 emerging in subsequent decades. Agencies worldwide recognise that, for threats such as new influenza strains, SARS and Ebola, hygiene is a first line of defence during the early critical period before mass measures such as vaccination become available. The low infectious dose observed for several of

the emerging pathogens, such as E.coli O157:H7 and norovirus, is an additional concern that emphasises the role that hygiene can play in prevention.

Antibiotic resistance is now a global priority. Hygiene addresses this problem by reducing the need for antibiotic prescribing and reducing "silent" spread of antibiotic resistant strains in the community and hospitals. As persistent nasal or bowel carriage of these strains spreads in the healthy population, this increases the risk of infection from resistant strains in both hospitals and the community.

Infections can act as co-factors in diseases, such as cancer and chronic degenerative diseases. Syndromes such as Guillain-Barré and triggering of allergy by viral infections add to the burden of hygiene-related infection.

A major problem is that, for the most part, both at national and international level, these various issues are handled by different health agencies. It is only when viewed together that the true size of the hygiene-related disease burden is apparent.

III. The IFH Targeted Approach To Home Hygiene

Since the 1980s, IFH has been developing a risk-management approach for hygiene in the home and everyday life – known as 'targeted hygiene'. Targeted hygiene means focusing our hygiene practices in places and at times when harmful microbes are most likely to be spreading in order to break the chain of infection:

This contrasts with historical approaches equating hygiene with eradicating dirt – incorrectly regarded as the main source of harmful microbes. An analysis of media coverage suggests that we still largely see hygiene as synonymous with cleanliness, and the terms 'cleaning' and 'hygiene' are often used interchangeably causing confusion about what hygiene really means.

Targeted hygiene means recognising that the main sources of harmful microbes are not places which are 'dirty' but contaminated food and water, domestic animals (pets), and people who are infected or are healthy carriers of potentially harmful microbes (e.g Staphylococcus aureus or its resistant form, MRSA). Since the presence of these potential sources of infection in the home is inevitable, this means that the only way to protect ourselves from infection is by preventing the spread of harmful microbes from these sources.

Targeted hygiene also means recognising that the times or situations when harmful microbes are most likely to be spread i.e. the times when we need to practice hygiene are during food handling, using the toilet, coughing, sneezing, nose blowing, caring for domestic animals, handling and disposing of refuse, or where a family member is infectious and is shedding infectious microbes into the environment by vomiting or diarrhoea or by touching foods or hand contact surfaces. In short, getting people to adopt targeted hygiene means getting them to visualise the chain of infection, and understand that hygiene is about breaking it.

Targeted hygiene also means understanding which surfaces are likely to cause spread of infection in each of these situations.

The surfaces most often responsible for spread of harmful microbes in most situations are:

- the hands
- hand contact surfaces
- food contact surfaces
- cleaning cloths

which is thus where hygiene practices are the most important.

Hygienic cleaning of hands is particularly important after handling food, using the toilet, coughing, sneezing, handling pets and disposing of waste and caring for those who are sick. Hygienic cleaning of food contact surfaces is vital after preparing raw foods such as meat and poultry, or before preparing ready to eat foods such as sandwiches and snacks. Hygienic cleaning of cleaning clothes and other cleaning utensils is important after they have been used to clean a contaminated surface.

Clothing and household linens, and toilets, sink and bath surfaces can also be part of the chain of infection, although risks associated with these surfaces are normally somewhat lower as they rely on other "chain links" such as hands to transfer the microbes from the fabric or sink surface to a susceptible person. Advising people how often to launder clothing or clean bathroom and toilet surfaces is extremely difficult, but regular cleaning and laundering can contribute to preventing spread of infection particularly where there is someone who is infected (e.g with norovirus, cold virus or food poisoning) or

who is more vulnerable to infection. For infections such as cold and flu, and norovirus, spread of infection may also be airborne and good ventilation is important.

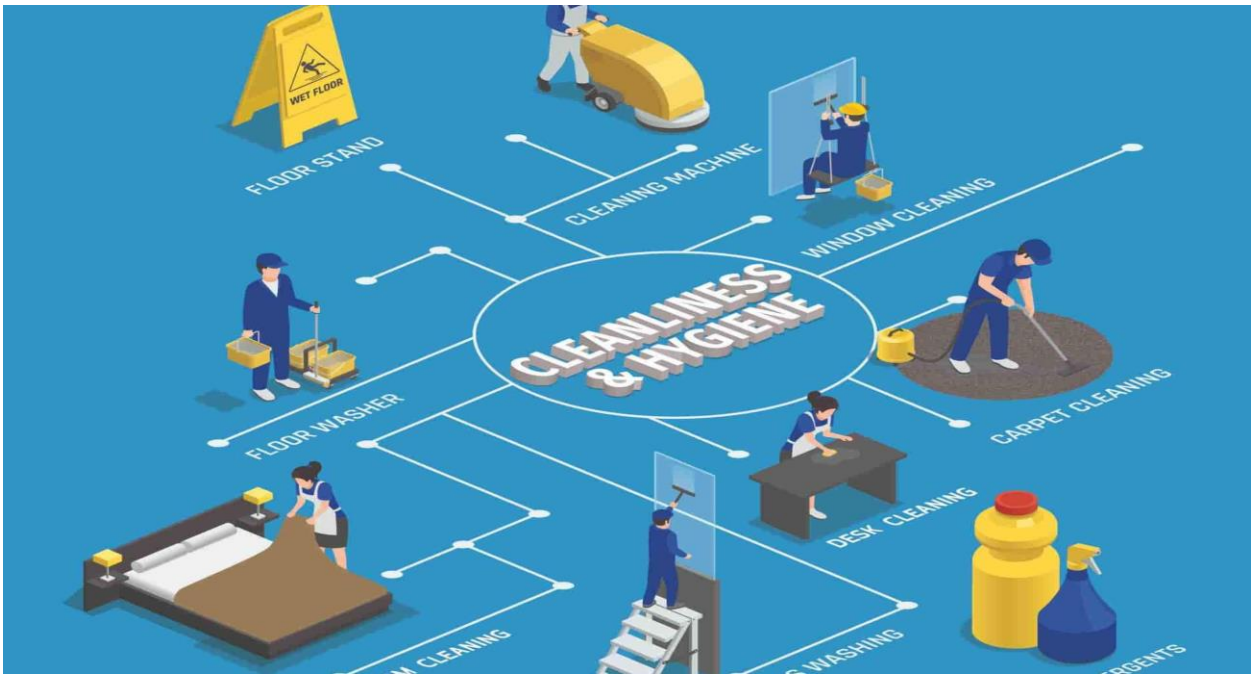
Did you know

Cleanliness achieved by routine (non-targeted) daily or weekly cleaning of floors, furniture etc may contribute to preventing exposure to harmful microbes, but there is little data to suggest that its contribution is significant relative to hygienic cleaning at critical points at key times. Although these latter surfaces may look visibly dirty and may have high levels of microbes, they are low risk because harmful microbes are unlikely to be present.

Getting the public to understand and visualize the concept of breaking the chain of infection by targeting the links in the chain is key to getting them to make informed decisions and practice effective targeted hygiene – rather than seeing hygiene as a set of rules which they may or may not remember.

IV. Hygiene And Cleanliness – Breaking The Chain Of Infection

Targeted hygiene means not only identifying time and places which represent a risk – it also means applying a suitable hygiene procedure to break the chain of infection. The objective of a hygienic cleaning procedure is to reduce contamination is to a level which is not harmful to health.



Hygienic cleaning of hands, surfaces, and fabrics can be done by:

- Mechanical/physical removal of pathogens from environmental, skin or fabric surfaces using soap or detergent-based cleaning. To be effective this must be accompanied with thorough rinsing under running water such that pathogens are not further spread around the home.
- Using an antimicrobial product or process (e.g. heat) that inactivates microbes in situ. For environmental sites and surfaces a disinfectant is used, whereas for hand surfaces a hand sanitizer is used.
- A combination of removal and inactivation; for example, as in laundering, which involves detachment by detergents, removal by rinsing and inactivation by heat in combination with an oxygen bleach-based laundry product.

Importantly the "level of microbes not harmful to health" varies significantly from one situation to another. For some microbes e.g norovirus the "infectious dose" can be very small (<10 particles) whereas for others it may be 1000 cells or particles or more. Equally those who are more vulnerable to infection may be susceptible to a lower dose.

In many situations e.g. handwashing, hygiene can be achieved using soap and water – provided hands are thoroughly rubbed to detach soil and microbes, and thoroughly rinsed to remove them from the hands. The same applies to hand contact and food preparations. In situations however – where surfaces cannot be rinsed or there is no access to running water, use of a disinfectant (antibacterial) product may be required. Studies, for example have showed that wiping of kitchen surfaces after contact with chickens contaminated with either Salmonella or campylobacteria with a cloth and detergent, or wiping surfaces typical of hand contact surfaces in toilets and bathrooms which are contaminated with a suspension of faeces containing norovirus was ineffective in removing contamination which was spread contamination to other surfaces subsequently wiped with the contaminated cloth. In both cases, however, wiping with a disinfectant rendered surfaces hygienically clean.

Although disinfectants are effective when used as part of targeted hygiene to break the chain of infection, the evidence suggests that non-targeted routine cleaning of environmental surfaces such as floors etc has little or no impact in terms of reducing infection risks.

V. Are We Too Clean For Our Own Good?

There is no doubt that in the future we are going to have to view our microbial world very differently. Microbiome science now shows that the millions of microbes that live on and within us (the human microbiome) are as essential to our health as our liver and kidneys.

Lack of exposure to the diverse microbes in our human, animal and natural environments, the key to sustaining a healthy and diverse microbiome, is now being associated with rising levels of a whole range of diseases including autoimmune diseases, inflammatory bowel disease, type 1 diabetes and other diseases.

The realisation that microbial exposure is essential to health has fundamental consequences for hygiene because it poses the question "how can we develop lifestyles that sustain exposure to the right sort of microbes, whilst at the same time protecting against those that cause disease?

Key to addressing this challenge is understanding what the essential microbes are, and why we have lost contact with them. Current evidence shows the problem lies in lifestyle, medical and public health changes over the last 40-50 years, which, particularly in early life, deprive us of exposure to microbial "Old Friends". These "Old Friends" are largely non-harmful species which inhabit the

human gut and our natural environment. Lifestyle changes which are implicated in reduced exposure to Old Friends include C-section rather than vaginal childbirth, bottle rather than breast feeding, fewer siblings, urbanisation and less outdoor activity. Since communication between "Old Friends" and the immune system is mediated by the gut microbiome, excessive antibiotic use and altered diet can affect the microbiome in a way that increases inflammatory disease risks. We are still a long way from knowing which microbes might be used to reverse the adverse effects of reduced microbial exposure, and indications are that it is exposure to a diversity of microbes which is important.

This misleading idea arose in 1989 when Dr David Strachan hypothesized that a cause of rising allergic diseases was lower incidence of infection in early childhood. He suggested an underlying cause could be "improved household amenities and higher standards of personal cleanliness". By naming it the "Hygiene" hypothesis, the notion that we have become "too clean for our own good" has arisen and continues to be publicised alongside the unsupported idea that being less "hygienic" could reverse this trend. This is despite ongoing evidence since 1989 which now refutes the link to infection. Unfortunately, despite most experts accepting that the exposures we need are Old Friends microbes not infections, and that the underlying problem is lifestyle changes not hygiene, this relationship is still being referred to as the "hygiene" hypothesis, thereby perpetuating the concept that "too much cleanliness and hygiene" is the underlying cause – to the extent that it is now received wisdom. This is illustrated by a 2018 review of UK/US media coverage. In all 70% of 36 articles published from 1998 to 2017, including more recent articles, emphasize the role of home cleanliness as a causative factor in rising allergies, etc., referring to the home environment as being too clean, hygienic, sanitized, oversanitized or sterile.

Whilst targeted hygiene was originally developed by IFH as an effective approach to hygiene practice in the home and community, 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.

Consumer responses to articles reviewed in the media survey suggest that the public fail to grasp the key concept. Many responses expressed a view that "dirt

and germs" are important for building a strong immune system – otherwise children grow up "weak, sickly, prone to every ailment – and to allergies".

By associating germs with dirt, people conclude that too much cleanliness means that children fail to build the strong immune system to not only "fight" infections but also "allergies". They need simple clear communication that allergic reactions occur when the immune system "fights" allergens rather than ignores them – which is what Old Friends exposure trains the immune system to do.

With the explosion of interest in the human microbiome, nutritionists and microbiomists are now encouraging us to reconnect with essential microbes by "getting out and getting dirty". In interviews they were asked what advice they would give families to increase their exposure to a diversity of microbes. Recommendations included getting outdoors and getting dirty, stroking pets, and avoiding antibiotics where possible. Worryingly, in some cases, the advice also included letting pets lick your face, sucking a babies pacifier to clean it, washing dishes by hand instead of using a dishwasher and, most importantly, not washing hands". Although data suggests that these actions may increase exposure to Old Friends microbes, they are also critical target surfaces and actions likely to increase the risk of exposure to infection. As yet there are no intervention studies demonstrating that lifestyle changes, such as those discussed above, actually impact on inflammatory disease rates, but significant evidence that abandoning hygiene measures such as handwashing are associated with increased rates of respiratory and gastrointestinal disease.

Getting people to adopt lifestyles which sustain exposure to necessary microbes, whilst protecting against pathogens requires a significant change in public understanding of our microbial world, and what hygiene means. Providing consumers with unambiguous messages, as our knowledge of the microbiome and its implications for health and hygiene expands, represents a considerable challenge.

VI. Hygiene And Healthy Sustainable Living

Whilst targeted hygiene was originally developed by IFH as an effective approach to hygiene practice in the home and community, it also provides an excellent framework for building sustainability into hygiene.

Hygiene at home

When it comes to coronavirus (COVID-19), a few small actions can make a big difference. Cover coughs and sneezes, wash your hands regularly and practice social distancing (stay two big steps away from others). Most importantly, if you are sick stay home and get tested.

Those small actions don't stop once you get home. To help slow the spread of germs, especially if you live with others, here are our top tips for home hygiene.

Clean common areas

Clean frequently-touched surfaces with a wet cloth and detergent at least once daily. Pay special attention to areas like remotes, doorknobs, handles, light switches, touch screens, desks, toilets, drains and sinks.

If you live with a lot of people you might even need to disinfect regularly-touched surfaces. Disinfectant is different to routine cleaning, as it uses chemicals to kill germs. A combination of cleaning and disinfecting is most effective in removing traces of COVID-19.

A clogged drain is a common problem for households and can cause a lot of mess in the bathroom and kitchen area. Over time drains accumulate debris that prevents the water from passing through. The water stagnation not only causes damage to the surfaces but also makes that place stink.

So, you must clear the drain as quickly as possible. But what is the best way to get the job done?

A clogged drain can be a matter of concern, particularly when moving out of the rental property. The best way to deal with the problem is to hire professionals who offer the best bond cleaning Brisbane. They use advanced tools and methods to deep clean the entire property, including the bathroom.

However, if you want to perform the cleaning on your own to improve the hygiene of your home, you must have the correct knowledge.

Here are the best ways to unclog a drain in seven different ways.

1. Boiling Water

Before trying any store-bought products or natural ingredients, try simple water. Take a pan can fill half with water. Then heat the water until its starts to boil. Then carefully hold the pan and pour the boiling water into the drains.

When the drain is partially blocked, the boiling water is all you need to remove the cooking grease and soap scum around the edges. To make it more effective, add salt in an appropriate quantity. If required, repeat it a couple of times.

2. Dish Detergent

Dish detergent is an excellent solution for a clogged drain. It breaks down the residue inside and also lubricates the drain. You just need to pour in a cup of

dish detergent and then half litre of boiling water. It will make the task a lot easier. Using dish detergent to unclog a drain is a simple house cleaning hack that you must always remember.

3. Store-Bought Drain Cleaner

Different brands of drain cleaners are available in the market, so you can choose as per your preference. When using such products, you need to read the instruction very carefully.

Also, open the windows of the bathroom for proper ventilation and wear a mask to avoid the fumes that come out of such cleaners. Pour the drain cleaner and then wait for some time. Finally, flush the drain with water.

4. Baking Soda And Vinegar

It is perhaps the most common way to clear the clogged drain. First, pour one cup of baking soda into the drain, followed by white vinegar in the same quantity. Wait for a few minutes and allow the bubbles to form. Then flush the drain with boiling water. Trained bond cleaners who offer quality bond cleaning in Brisbane also follow a similar approach to a clear clogged drain.

5, Washing Soda

If washing soda cannot clear the drain, opt for washing soda. Also known as sodium carbonate, it has more alkaline in comparison to baking soda. That makes it a stronger drain cleaner. Pour boiling water down your sink, followed by washing soda (around one cup).

Then, pour a cup of boiling water into the drain and leave for a couple of minutes. This should help slowly remove any gunk inside the drain. It is not clear properly, repeat the procedure again.

6. Plungers

It is another great option to clear the drain. Professionals also use it a lot to clear the clogged drain. However, you need to ensure that you use the correct size of the plunger. A simple toilet plunger may not be effective if a smaller drain is blocked, like your sink or shower. In this situation, you will need a cup plunger that is particularly designed for small-size drains.

First, unscrew the stopper or grate, and then apply the cup plunger to the drain. Try to create a seal as tight as possible and plunge vigorously. There are many hidden germ magnets in your home, and the drain is one of them, so clean it perfectly.

7. Professionals

Perhaps the easiest way to unclog a drain is by hiring experts who offer reliable bond cleaning in Brisbane. They use modern tools and know innovative methods to accomplish the task perfectly.

Tips For Preventing Clogs

If you want to keep the drain perfectly clean, you need to follow some preventive measures. These measures will keep the drain clear for a longer period and make the cleaning task quicker and easier.

- A simple and cost-effective way to prevent clogs is by using a drain strainer. Anything non-liquid will get trapped instead of flowing down the drain.
- You must never pour any cooking oils or any grease into the drains of your cooking area.
- Prevent kitchen clogs by properly scraping food scraps into the trash can before you wash the dishes.

- You should also clear the drain at least once a week or every alternate week. It will prevent the dirt from accumulating.

Clearing the clogged drain is a time-consuming, stressful and unpleasant job.

However, you can make things easier by following the ways mentioned above. Store-bought cleaners may give your quick result, but you must avoid them. The harmful chemicals pollute indoor air, which can be dangerous for people suffering from breathing problems. So, always opt for green cleaning as natural products are safe and effective.

Clean up after meals

Clean up immediately after meals using hot, soapy water or a dishwasher to kill any germs on used items like bowls, plates, knives, and forks. Also make sure to wipe down areas which are often touched during mealtimes, like tables, chairs, and benches. This makes sure the areas are clean and ready for the next meal.

No share plates

Right now, it's best not to use share plates or food platters. Instead, serve food on to your own plate using clean utensils. This lowers the risk of spreading germs by touching food that others will be eating. It's also safest not to share drinks.

If possible, use your own cutlery, plates and cups

In most large households, people often share plates, mugs, and other utensils. But it's safest to only use your personal items and avoid sharing. If you do need to share items, make sure you wash anything you use immediately after use with hot, soapy water or put it in the dishwasher.

Eat in shifts

In some homes, particularly those with a large number of people, you may find that it gets busy at mealtimes. To help slow the spread of germs, try eating in smaller groups so there is enough distance between people. All surfaces touched during a meal should be wiped down before the next group comes in.

Handling food

When preparing food for yourself or others, good hygiene is key to limiting the spread of germs. Wash your hands with soap and water before touching or preparing food, and regularly throughout the cooking process.

Always maintain good food safety by thawing, cooking, and storing food correctly. Avoid cross-contamination of bacteria on surfaces, and keep food at the right temperature.

Wash your hands, even with limited water

If water is limited, there are still things you can do to keep your hands clean and safe. If you don't have easy access to water, use an alcohol-based rub (hand sanitiser). You can also wash your hands by turning the tap on then off to quickly wet your hands, then rub soap into them for 20 seconds, then turn the tap back on to rinse the soap away.

Socially distance in shared spaces

Social distancing in share houses or group homes can be easy. Try to keep 1.5 metres (about two big steps) between yourself and others (this doesn't apply to family members that you live with).

Keeping your distance means you avoid being close enough to another person to have their sneeze or cough spray land on you – which is how viruses spread. If need be, make a roster for when people can enter shared spaces like the living room and kitchen.

When living with young children, try setting up a separate entertainment area in a bedroom or other part of the house.

When sick, stay isolated

No matter the size of the household, if members are feeling unwell or have any symptoms of COVID-19, they should get tested immediately.

Housemates or family members who have any illnesses should isolate in their personal sleeping areas. When this isn't possible, maintain good hygiene practices like washing hands regularly, avoiding touching your face (or others' faces), and covering coughs and sneezes. You should also wash shared sheets often, using soap or detergent.

If possible, those who are sick should use separate bathrooms and other shared areas. When someone who's sick does need to use a shared area, use disinfectant afterwards to remove germs on any surfaces they have touched. Wash your hands with soap and water immediately afterwards.

If children are unwell, parents should disinfect areas where the kids have been, and isolate with the kids at mealtimes to protect others in the house.

Disinfectant should always be used when people are feeling sick or showing signs of illness, whereas routine cleaning (when members of the household are well) does not require daily disinfectant. Never swallow bleach or other harsh cleaning product as this can lead to serious health issues or even death.

Final Words

It seems clear that, getting people to change hygiene behaviour depends not only on promoting hygiene practice but also changing public understanding and restoring their confidence in hygiene. We need the public to believe that infection doesn't "happen by accident or misfortune" – it is preventable in many cases. If we believe we have no control over whether we get an infection, we will not take measures to control it. We also need to persuade people of the direct benefits of hygiene to them as individuals e.g. avoiding loss of income, costs of childcare, disruption of family leisure activities, etc.

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