



Unit 2: Personal Hygiene, Mental Health, and School Health

Subject: Health Education-I

Unit 2: Personal Hygiene, Mental Health, and School Health

(Personal Hygiene • Mental Health • Good Habits at School & Home • Comprehensive School Health Programme • School Health Services)

2.1 Personal Hygiene — Meaning, Definition, and Importance

Meaning. Personal hygiene is the **everyday set of behaviours** that keeps the body clean, prevents infection, preserves social comfort, and supports health.

Definition. Personal hygiene is the systematic maintenance of body cleanliness and protective routines (hand, oral, skin, hair, nail, menstrual, clothing, and environmental hygiene) to reduce disease risk and promote physical, mental, and social well-being.

2.1.1 Why hygiene matters (four payoffs)

1. **Disease prevention:** interrupts fecal-oral, droplet, and contact transmission.
2. **Functional comfort:** fewer skin, dental, and foot problems → better attendance and performance.
3. **Dignity & social ease:** fresh breath, clean clothes, and groomed nails reduce stigma.
4. **Habit gateway:** small, repeatable actions build **self-efficacy** for larger health habits.

2.1.2 Daily-weekly hygiene planner

Area	Daily	Weekly / As needed	“Watch-outs”
Hands	20-sec wash before food/after toilet; sanitizer (≥60% alcohol) when water unavailable	Nail trim (short, clean)	Remove rings during wash; clean thumbs & nail beds
Oral	Brush twice/day (fluoridated paste); scrape tongue; drink water after sugary foods	Floss/interdental brush; replace brush every 3 months	Gum bleed = see dentist; avoid harsh scrubbing
Bath & Skin	Short shower; dry skin folds well; moisturize dry skin	Gentle exfoliation; sun protection	Persistent rash/itch → clinical advice
Hair & Scalp	Comb daily; wash 2-3x/week (varies)	Clean combs; check dandruff/lice	Share no combs; dry scalp well
Feet	Wash/dry between toes; breathable socks	Rotate shoes; inspect for cracks/cuts	Fungal infections love moisture
Clothing	Fresh innerwear/socks; weather-appropriate layers	Wash uniforms/linens; air pillows/mats	Strong detergents may irritate skin
Menstrual hygiene	Clean, comfortable products; change regularly; wash with water; dispose safely	Track cycle; stock supplies; pain relief plan	Avoid fragranced washes; ensure privacy
Food & water	Safe water; clean utensils; hot food hot	Fridge hygiene; check dates	Reheat thoroughly; avoid cross-contamination

Handwashing: 5 moments—before eating/handling food, after toilet, after coughing/sneezing, after touching animals/waste, after outdoor play.

Steps (20 s): wet → soap → rub palms → backs → between fingers → thumbs → tips → wrists → rinse → dry.

2.2 Mental Health – Meaning, Determinants, Types, Symptoms, Prevention

Meaning. Mental health is a **state of well-being** enabling people to learn, manage stress, work productively, and contribute to community.

2.2.1 Factors influencing mental health

- **Biological:** genetics, neurochemistry, chronic illness, sleep deprivation.
- **Psychological:** coping style, self-talk, trauma history.
- **Social:** relationships, bullying, stigma, family support, finances.
- **Environmental:** noise/crowding, green space, digital overload, substances.
- **Lifestyle:** movement, diet quality, screen time, mindfulness/spiritual practices.

2.2.2 Types (accessible classification)

- **Common mental health concerns:** anxiety disorders, depressive disorders, stress/adjustment problems, somatic symptom presentations.
- **Severe mental illnesses:** bipolar disorder, schizophrenia spectrum.
- **Substance-use disorders:** alcohol, nicotine, other drugs.
- **Neurodevelopmental/learning:** ADHD, specific learning difficulties (school context).
(Diagnosis is the role of qualified clinicians; health educators focus on literacy, first-line support, and referral.)

2.2.3 Recognising symptoms & red flags

Domain	Possible signs (persisting ≥ 2 weeks or impairing function)
Mood/Emotion	Persistent sadness, irritability, loss of interest, excessive worry/panic
Body	Sleep/appetite change, fatigue, aches without clear cause
Thinking	Poor concentration/decisions, hopelessness, unusual beliefs/perceptions
Behaviour	Social withdrawal, drop in performance, substance misuse
Red flags (urgent referral)	Suicidal thoughts/plan, self-harm, severe agitation, hallucinations, severe eating/weight disturbances

2.2.4 Preventive measures (four levels)

Level	What to do	Examples for campus/school
Primordial	Build supportive environments	Anti-bullying policy; green corners; quiet rooms
Primary	Strengthen protective habits	Sleep routine; 45-60 min daily activity; balanced meals; limit screens at night
Secondary	Early detection & help	Screening days; peer gatekeepers; mental-health first aid; confidential referral
Tertiary	Reduce disability & relapse	Adherence support, disability accommodations, follow-up plans

Personal toolkit (teach and practise): 4-6 breaths/min with longer exhale; worry-time scheduling; thought reframing (evidence for/against); gratitude note; social connection; sunlight morning exposure; study-break cycles (50-10 rule).

2.3 School Health – Building Good Habits at School & Home

Goal: Make healthy choices **easy, normal, and fun.**

2.3.1 Keystone habits (habit → why → how)

Habit	Why	“How” cue
Breakfast daily	Glucose stability, attention	Hostel “fruit first” line; water first on waking

Habit	Why	“How” cue
Water every class change	Hydration, fewer headaches	Bottle on desk; refill rule
Handwash before lunch	Fewer GI/resp illnesses	Handwash stations near dining hall
60 min movement/day	Fitness, mood, sleep	Games period + active breaks + walk clubs
Posture & backpack hygiene	Prevent neck/back pain	Bag ≤10% body weight; hip-hinge demo
Screen/sleep hygiene	Memory consolidation	Device curfew 1 h pre-sleep; warm light
Menstrual health literacy	Attendance, dignity	Supplies, disposal bins, pain-safe stretches
Dental routine	Caries prevention	Tooth-brushing corners; 2-min music timer

2.3.2 Home-school partnership

- **Parent meetings:** nutrition on a budget, sleep and screens, supportive conversations.
- **Student health clubs:** peer demos (handwash, label reading, safe cycling).
- **Community links:** safe water drives, kitchen gardens.

2.4 Comprehensive School Health Programme (CSHP)

A **whole-school approach** that integrates policy, services, education, and environment.

2.4.1 Core components (eight pillars)

1. **Health Education curriculum** (age-appropriate, skills-based).
2. **Physical education & activity** (daily movement opportunities).
3. **Nutrition services & education** (safe mid-day meal/canteen standards; water access).
4. **School health services** (screening, referral, first aid, immunisation per national schedule).
5. **Counselling, psychological & social services** (mental-health support, anti-bullying).
6. **Healthy school environment** (WASH, ventilation, lighting, safe playgrounds).
7. **Family & community involvement** (PTAs, health camps).
8. **Staff wellness** (periodic checks, stress management, ergonomics).

2.4.2 Implementation cycle

Assess needs → Set SMART goals → Plan activities & roles → Train staff → Deliver → Monitor (attendance, incidents, BMI trends, dental caries, vision) → Review & improve.

2.5 School Health Services (SHS)

Purpose: Provide **first-contact care, screening, health education, and referral** within school.

2.5.1 Service package

Domain	Activities
Screening	Height/weight/BMI; vision (Snellen), hearing (whisper/oto check), dental, postural assessment, skin/scalp, anaemia signs
Immunisation	Coordinate per national programme; maintain consent & records
First aid & emergency	Trained first-aiders; protocols for fainting, asthma, seizures, injuries; emergency contact list
Chronic conditions	Individual health plans (asthma, epilepsy, diabetes); medication storage policies
Mental health	Gatekeeper training, counselling access, anti-bullying reporting, crisis response
WASH & infection control	Safe water, clean toilets, menstrual waste management, outbreak response plan
Record & referral	Student health cards; referral directory; follow-up tracking



2.5.2 Screening schedule (example)

Class/Grade	What to check
Entry/annually	Height, weight/BMI, dental, vision, hearing, skin/scalp
Grades 5–8	Puberty/menstrual education, posture/backpack review
Grades 9–12	Mental-health literacy, anaemia screening as per policy, lifestyle risk check

2.5.3 First-aid kit (minimum list)

Gloves, masks, handrub; adhesive bandages, sterile gauze, crepe bandage; scissors, tweezers, tape, thermometer; ORS packets, cotton, instant cold pack; splints; torch; emergency numbers. (*Medications follow local policy and parental consent.*)

2.6 Yoga & Naturopathy Integration (applied)

- **Micro-breaks:** 60–90 s every class—shoulder rolls, spinal elongation, eye palming.
- **Breath reset:** 6 cycles of **inhale 4 - exhale 6**, cue before tests.
- **Mat & space hygiene:** sun the mats; wipe with mild soap; separate storage.
- **Nature time:** 10–15 min daylight exposure for circadian rhythm and mood.
- **Hydro-routine:** encourage plain water; avoid sharing bottles; safe-water posters.

Unit Summary

Personal hygiene builds a **clean, comfortable, infection-resistant daily life** and supports dignity. Mental health is shaped by **biological, psychological, social, environmental, and lifestyle** factors; early recognition, supportive environments, and simple self-care skills reduce burden. In schools, **good habits** thrive when systems make healthy choices easy. A **Comprehensive School Health Programme** integrates curriculum, environment, services, counselling, nutrition, activity, family involvement, and staff wellness. **School Health Services** deliver screening, first aid, referral, and record-keeping that stitch the system together.

Key Terms

- **Personal hygiene • WASH • Menstrual hygiene management (MHM)**
- **Protective factors • Red flags • Gatekeeper**
- **Comprehensive School Health Programme (CSHP)**
- **Screening • Referral • First-aid protocol**
- **Self-efficacy • SMART goals**

Self-Assessment

A. MCQs

1. The **most effective single habit** to reduce GI infections in schools is:
a) Daily hair wash b) **Handwashing before meals** c) Evening walk d) Weekly nail trim
2. A **red flag** requiring urgent referral is:
a) Two late nights of study b) Short frustration after a test c) **Suicidal thoughts or plans** d) Mild nervousness before a presentation



3. In CSHP, **family involvement** is important because it:
 - a) Replaces health services
 - b) **Reinforces habits at home**
 - c) Eliminates the need for screening
 - d) Reduces teacher workload only
4. Backpack hygiene advice for students is:
 - a) Any weight is fine if carried on both shoulders
 - b) **Keep bag ≤10% of body weight** and use both straps
 - c) Single-strap bags are better for posture
 - d) Heavier bags build strength
5. A key **mental-health primary prevention** step for adolescents is:
 - a) Ignoring screens entirely
 - b) **Regular sleep routine and daily movement**
 - c) Self-medicating with herbs
 - d) Withholding emotions

Answer key: 1-b, 2-c, 3-b, 4-b, 5-b

B. Short Answer

1. List **six components** of a **Comprehensive School Health Programme** and one activity for each.
2. Write a **daily hygiene checklist** for a hostel student (8-10 items).
3. Describe **three modifiable factors** that commonly worsen student mental health and one corrective action for each.
4. Outline a **first-aid response** for a student who faints in class (five steps).
5. Differentiate **health education** and **school health services** with one example each from your campus.

C. Reflective/Application

1. Audit your class for **WASH** readiness (handwash station, soap, towels, cues). What one **low-cost change** can you implement this week?
2. Design a **10-minute homeroom routine** combining posture, breath, and hydration cues.
3. Draft a **parent info-sheet** (100-120 words) on sleep and screens for adolescents.

End of Unit 2: Personal Hygiene, Mental Health, and School Health