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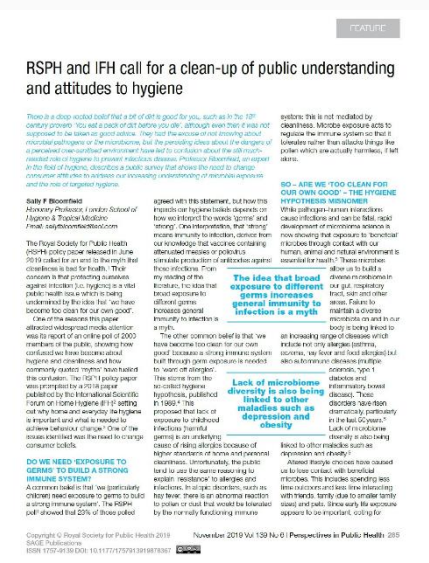
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New publication from IFH: The 9 moments for hygiene – when cleanliness really matters

This [new article](#) published in the **Royal Society of Public Health journal, Perspectives in Public Health**, examines how confused we have become about hygiene and hygiene issues. It argues that, unless or until we tackle this issue and restore confidence in hygiene, public health strategies to improve hygiene behaviour are unlikely to succeed.



The paper looks at the myths and ambiguities which continue to circulate, and be reinforced, through the media and social interaction. An online poll by the RSPH showed that 23% of those polled agree with the statement “we need exposure to germs to build a strong immune system” – although there is no way of knowing what they understand by this – whether “exposure to germs” means harmful or non harmful microbes - and whether “strong” means “immunity to infection” or “ability to ward off allergies”.

The poll showed that 68% of people still hold the traditional view that germs means microbes that are harmful, but 23% now believe it means any type of microbe, not just those which cause disease.

Equally problematic, a pilot study suggested that people have different perceptions about the meaning of the terms “hygiene” and “cleanliness” – terms fundamental to giving infection prevention advice. Whereas 53% of people thought that hygiene is more than cleanliness and is associated with protecting health, 38.5% said they are the same thing – hygiene means cleanliness and cleanliness means hygiene. Even more confusing, 8.5% thought cleanliness means using soap and water etc, whilst hygiene means using a disinfectant.

Are we too clean for our own good?

Another prevalent myth is that we are “too clean for our own good” which has its origins in the hygiene hypothesis misnomer – a concept proposed in 1989, but now largely refuted in its original form. Despite the fundamental difference between this hypothesis (less exposure to infection due to home cleanliness is a causative factor for allergies) and the now widely accepted Old Friends Hypothesis (lack of exposure to non-harmful “Old Friends” microbes due to lifestyle changes is a causative factor in allergies - and many more diseases) experts now refer to both concepts as the hygiene hypothesis, making it difficult to follow the arguments they are making. The media then pick this up and use whichever interpretation suits them - usually the “too clean” version.

Even when faced with the inevitable question “what is the underlying cause of loss of exposure to Old Friends microbes?” experts searching for a suitable term to define the diverse list of probable causes define them as “too clean” lifestyles. But, this is also totally misleading; possible causes include lack of exposure to microbes inhaled from our outdoor environment, taking too many antibiotics and less fibre in our diet, none of which could be defined as being “too clean” or “not getting dirty”! Responding to demands that we must use “plain language” in communicating with the public is important, but not at the cost of causing further confusion by using language which is ambiguous.

Is hygiene in home and everyday life important?

Despite the confusion, when people were asked the unambiguous question “Do you think being hygienic (by which we mean preventing disease by stopping the spread of harmful germs) in the home is important?”, 60% of those polled responded “very important” and 38% responded “quite important”. One in two (50%) agreed that poor hygiene contributes to antibiotic resistance and three in four (74%) believed hygiene is important to reduce pressure on the NHS by preventing ill health.

If we assume from this that the public *are* concerned about hygiene and are looking for guidance, the challenge is to communicate with them in a way which is constructive, rather than entertaining them with discussions about myths and misunderstandings about dirt and cleanliness.

The 9 key moments for hygiene – when cleanliness really matters

In recent years, IFH has been promoting a risk-based approach to home and everyday life hygiene, known as targeted hygiene. In scientific terms this means intervening in the places and at the times that matter to prevent spread of harmful microbes from an infected source. i.e. breaking the chain of infection.

Our recent work suggests that, although the public grasp the “chain of infection” idea, they still approach it by asking “what are the dirtiest **places** in my home etc. where harmful microbes are mostly found and how often do I need to clean the toilet – the floor - my pyjamas etc. If we want people to grasp the idea that hygiene is preventing **spread** of harmful microbes, we must get them to start with “when” rather than “where” by asking “what are the key moments for hygiene – when cleanliness really matters?”

Having given this some thought, IFH has come up with what we believe are the 9 key moments for hygiene in home and everyday life. This is based on the fact that, the likely sources of harmful microbes are people (who may be infected or are carriers of potentially harmful microbes), contaminated raw foods and domestic animals. However, we recognise that these microbes need to spread from the source and be routed to a person for infection to take place; it is the “journey of the germ” that is of critical importance. This means that breaking the route of infection at 9 key moments when harmful microbes are most likely to be spread is key. These 9 moments have been identified as:

1. During food handling;
2. Whilst eating with fingers;
3. Using the toilet and changing a nappy;
4. Coughing, sneezing and nose blowing;
5. Touching surfaces frequently touched by other people;
6. Handling and laundering ‘dirty’ clothing and household linens;
7. Caring for domestic animals;
8. Handling and disposing of refuse;
9. Caring for an infected family member.

It is interesting to note that mostly these moments are not traditionally associated with “being dirty”. This can then be expanded by answering the question “what are the surfaces I need to clean at these moments in order to prevent spread of harmful microbes”. Thus for example, when handling and preparing raw meat and poultry, critical surfaces which need to be cleaned are food contact surfaces, hands, hand contact surfaces, utensils and cleaning cloths.

But the bottom line message to the public is that “unless we are exposed to harmful microbes we CANNOT be infected”

In the coming months we want to do more to explore this concept and how we might use it to change consumer understanding of infection prevention and change behaviour. **As part of this we would like your comments and thoughts on these issues and the concept of a “9 moments” approach. To comment please go to <https://www.ifh-homehygiene.org/contact> and add your comments in the 'message' box.**

These issues are also discussed in the following:

Containing the burden of infectious diseases is everyone’s responsibility: a call for an integrated strategy for

developing and promoting hygiene behaviour change in home and everyday life". 2018 <https://www.ifh-homehygiene.org/review/containing-burden-infectious-diseases-everyones-responsibility-call-integrated-strategy>

RSPH 2019. Too clean or not too clean? The case for targeted hygiene in home and everyday life
<https://www.rsph.org.uk/our-work/policy/infection-control/too-clean-or-not-too-clean.html>

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