



UNIVERSITI TEKNOLOGI MARA SARAWAK

FACULTY OF ADMINISTRATIVE SCIENCE AND POLICY STUDIES

DIPLOMA IN PUBLIC ADMINISTRATION

**THE PERSONAL HYGIENE AWARENESS AMONG THE DIPLOMA IN
PUBLIC ADMINISTRATION STUDENT**

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LETTER OF SUBMITTIAL

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September 2011

Dear sir / madam

Submission of Research Report (PAD340)

Enclosed in our project paper entitled "The Personal Hygiene Awareness Among The Diploma in Public Administration Student" in fulfilment of the requirement of Faculty of Administrative Science and Policy Studies, University Technology Mara (UiTM).

This project paper is about the awareness of DPA's students towards their self hygiene in routine day in the campus. With the submission of this project paper we hope that it will enable to us to meet the academic requirement and complete this Diploma in Public Administration.

We would like to express our heartfelt gratitude, appreciation and thanks to you for the advice, guidance and supports that you had rendered us in completing this project paper on time.

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CHAPTER 1: INTRODUCTION

1.0 INTRODUCTION

Hygiene refers to the set of practices associated with the preservation of health and healthy living. Hygiene is a concept related to medicine as well as to personal and professional care practices related to most aspects of living although it is most often associated with cleanliness and preventative measures. In medicine, hygiene practices are employed to reduce the incidence and spreading of disease.

Other use of the term hygiene appear in phrases including body hygiene, domestic hygiene, dental hygiene, and occupational hygiene and is frequently used in connection with public health. The term "hygiene" is derived from Hygeia, the Greek goddess of health, cleanliness and sanitation. Hygiene is also the name of the science that deals with the promotion and preservation of health, also called hygienic (Wikipedia, 2009). Hygiene practices vary widely and what is considered acceptable in one culture might not be acceptable in another.

Our team has chosen personal hygiene for our research topic. Personal hygiene may be described as the principle of maintaining cleanliness and grooming of the external body. It is in general looking after you. Personal hygiene can be controlled by sustaining high standards of personal care and humans have been aware of the importance of hygiene for thousands of years. The ancient Greeks spent many hours in the bath, using fragrances and make-up in an effort to beautify themselves and be presentable to others.

Personal hygiene products are a billion dollar business in the commercial market, with many high profile celebrities endorsing products that aim to keep us looking our best. In fact, hygiene is actually a scientific study. Maintaining a high level of personal hygiene will help to increase self-esteem and confidence whilst minimizing the chances of developing imperfections.

1.1 BACKGROUND OF THE STUDY

The background of this research is body hygiene. Body hygiene pertains to hygiene practices performed by an individual to care for one's bodily health and well being through cleanliness. Motivations for personal hygiene practice include reduction of personal illness, healing from personal illness, optimal health and sense of well being, social acceptance and *prevention of spread of illness to others.*

Personal hygiene practices include: seeing a doctor, seeing a dentist, regular washing (bathing or showering) of the body, regular hand washing, brushing and flossing of the teeth, basic manicure and pedicure, feminine hygiene and healthy eating. Personal grooming extends personal hygiene as it pertains to the maintenance of a good personal and public appearance which need not necessarily be hygienic.

Body hygiene is achieved by using personal body hygiene products including: soap, hair shampoo, hair conditioner, toothbrushes, tooth paste, cotton swabs, deodorant, chopstick, cream, lotion, facial tissue, hair clippers, nail clippers, mouthwash, nail files, skin cleansers, razors, shaving cream, skin cream and toilet paper. Other personal body hygiene and grooming products can be used to improve health and well being.

1.2 PROBLEM STATEMENT

1.3.1 Failure to keep up a standard of hygienic lifestyle.

- Not only is there an increased risk of getting an infection or illness, but there are many social and psychological aspects that can be affected.

1.3.2 To engage in some very basic measures to prevent common sickness.

- could help prevent many coughs and colds from being passed from person to person as many people would rather alienate themselves from someone who has bad personal hygiene than to tell them how they could improve.

1.3.3 Many patients of mental illnesses like dementia or depression may need extra support and encouragement with their personal hygiene.

- Refers to the recent situation, we are facing with Influenza H1N1 which is a very dangerous disease that already killed millions of people.

1.3 RESEARCH OBJECTIVES

In this research, we highlighted few objectives that have guided and determined the significance of such study. The objectives are:

1.3.1 To identify the level of personal hygiene awareness among DPA students in UiTM Sarawak.

1.3.2 To measure the willingness of the DPA students spending their money on the hygiene products.

1.3.3 To find the best ways how to keep them on high level of awareness on personal hygiene.

1.4 SCOPE OF STUDY

These studies investigate about the daily life style among students of DPA in UiTM, Sarawak. These studies investigate the daily life style among students either the residential college or non- residential college students. This research was conducted in the campus only. We will investigate about the student routine hygiene such as cleanliness in their room, hostel, and daily routine. That includes how them keep their cleanliness before, during or after eating and choose the foods. There also to identify whether students in University Technology Mara Sarawak are practicing healthy lifestyle in their daily life and measure whether they buying hygiene products is as their routine or vice versa.

DPA Sarawak Samarahan Campus is selected to involve in this study. The amount of students were involved is 120 starting with Part 1 until Part 6 in this program. The students will distribute the questionnaires and need answer it with choosing only 20 of students for every part. It not excludes either male or female students. They choose randomly from that class.

These studies involved routine cleaning of hand, food and drinking water sites and surfaces such as toilet seats and flush handles, door and tap handles, work surfaces, bath and basin surfaces in the, bathroom and toilet reduces the risk of spread of germs. The infection risk from the toilet itself is not high, provided it is properly maintained, although some splashing and aerosol formation can occur during flushing, particularly where someone in the family has diarrhoea. Germs can survive in the scum or scale left behind on baths and wash basins after washing and bathing. Water left stagnant in the pipes of showers can be contaminated with germs that become airborne when the shower is turned on. Thorough cleaning is important in preventing the spread of fungal infections. Cleaning of toilets and hand wash facilities is important to prevent odours and make them socially acceptable. Social acceptability is an important part of encouraging people to use toilets and wash their hands, particularly in low income communities.

Besides that laundry hygiene pertains to the practices that prevent or minimize disease and the spreading of disease via soiled clothing and household linens such as towels. Items most likely to be contaminated with pathogens are those that come into direct contact with the body such as underwear, personal towels, facecloths, nappies. Micro-organisms can also be transferred between contaminated and uncontaminated items of clothing and linen during laundering.

Research on our thesis started in our fifth semester as DPA students. The lifestyle of students among in UiTM Sarawak regarding on awareness about their own personal care by educating them the right hygiene products that is suitable for their style. The involvement of all elements is very important because they can give the impact on the result of the study.

1.5 HYPOTHESIS

A hypothesis can be defined as a logically conjectured relationship between two or more variables expressed in the form of a testable statement. Relationships are conjectured on the basis of the network of associations established in the theoretical framework formulated for the research study. By testing the hypotheses and confirming the conjectured relationships, it is expected that solutions can be found to correct the problem encountered.

In field of this study, hygiene related to the life style of students in campus. There are several hypothesis can be made in this study regarding the daily life style of students in campus especially for those students that involved to be respond our investigating process.

- The way for those students concerned about their daily life style gives impact to the increasing of cleanliness level.
- Level of awareness for cleanliness related to the students' daily life style.
- The students are giving facilities and services in order to increase the level of their self- cleanliness.

- By buying the hygiene product, then should able to improve the students' cleanliness in their life routine.
- Does facilities and services given in residential college exhibit students' awareness regarding to their daily life style.
- Are the students satisfied with the facilities and services given by in residential college?

1.6 ASSUPMTIONS

During completing the research, we assume that the respondents/ students need to face so many problems in order to keep on the awareness regarding their daily life hygiene level among of them. This because students are majority is the residential students and minority is non- residential students.

The student's schedules for this semester might be pack and there is not enough time to them aware about themselves. During doing the research, we only got one semester to complete the mini case studies. Besides that, respondent feedback due to the fact that our respondents are students, probabilities of misinterpretation is large in possibilities.

The problems might be faces are:

- The level of cleanliness food that serving/ selling at canteen and cafeteria.
- Not enough facilities that provide in residential for students, then students need to share those facilities with others.
- The students' attitudes that they are careless in keep their cleanliness in themselves including food, appearance in daily life as a student.
- Not enough time to keep the cleanliness among them because they are too busy.
- Condition of residential college is not comfortable.
- Students are not giving full respond/ awareness regarding their daily life style level.

1.7 SIGNIFICANCE OF THE STUDY

Personal hygiene awareness among DPA student lifestyle in UiTM has been researched and adopted its significance. From the research, the main purpose of study is the student can improve their awareness on hygienic matters which is importance for them to care off. They will realize what their weaknesses toward this matter are even though the hygiene is a light matter.

In addition, this research also contributes on making the recommendation with the problems of the personal hygiene among the DPA student in UiTM. The recommendation that being studied which they can be awarded in appearance, and the cleanliness of the institution. As a result, the student will be more alert about their external cleanliness.

Besides that, the significance of the study of the personal hygiene awareness among DPA student lifestyle in UiTM is to achieve the standard of comfortability between students, appearance and surrounding. Means that, the surrounding area for study in the class for example will be more efficient and comfortable. Furthermore, the student hygienic such on their appearance also make themselves feel comfort and make the study environment become easier and focus.

As we know, many of the disease come from dirt's and infections. These elements are detected when people are not properly care about themselves. For instance, the student not follows the right direction of washing hands. The bacteria left will unite with the foods and become infection to the student. This is important for the student to aware about their hygienic level.

This study also can maintain the cleanliness of the student of DPA especially and indirectly preserve the image of the DPA student compare to the other students. However, when the others student realizes about the DPA student hygiene level are higher, they can compete with positively and as a result, the entire student will aware about their hygiene of lifestyle.

When student become healthy and hygiene, their confident level may higher and lead the improvement of productivity and performance in study. This is because the comfortability that had gained due the awareness of the DPA student itself helps them much.

Last but not least, the relationship of the all student generally, and the relationship of the DPA student specifically can be strengthening. When this study has been completed, the student can practice the way to maintain their hygiene. In personally, they also can advice the other student about the importance of hygiene in their lifestyle or if anything's that related to the hygiene matters.

1.8. LIMITATION OF THE STUDY

1.8.1 Accessibility of data

- The internets in the university are very difficult to sustain causing the research unable to gather proper information that is required by our group.

1.8.2 Time constraint

- We only got short time to complete the research because we have to do the other assignment, quizzes and test.

1.8.3 Respondent feedback

- Due to the fact that our respondents are students, probabilities of misinterpretation are large in possibilities as we can see from the feedback that we gain from student that almost of them did not understand the question.

CHAPTER 2: LITERATURE REVIEW

2.0 INTRODUCTION

Literature review is the documentation of a comprehensive review of the published and unpublished work from secondary resources of data in the area of specific interest to the researcher. In this research, the sources of data and information collected from books, articles and also sources from the internet regarding benefit of retail therapy. From this data and information collected, summaries are made. The purpose of having literature review of having literature review is to ensure that the important variables that has in the past been found repeatedly and being ignored.

2.1 LITERATURE REVIEW

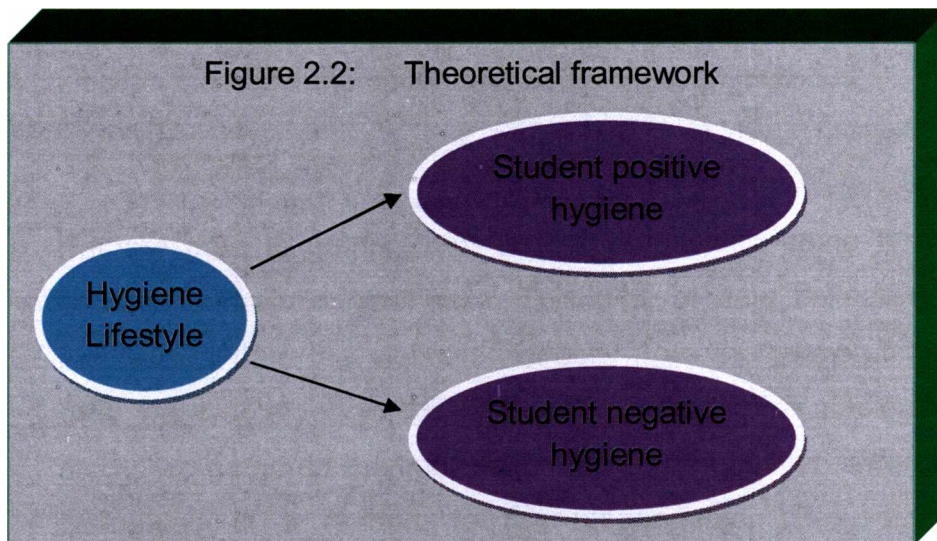
Esrey (1991) found that better hygiene through hand washing, food protection and domestic hygiene brought a reduction of 33% in diarrhoea incidence, whereas improved water supply led to an average reduction of only 15-20%. Subsequent studies have also shown the health benefits of improved hygiene (Fewtrell et al. 2005).

Although the quality of many of the studies is not optimal, the general consensus is that hygiene promotion to bring about improved hygiene behaviour and thus health is a worthwhile investment. This fact sheet focuses on personal hygiene as a sub-set of general hygiene behaviour (IFH, 2002).

A study of 305 Detroit school children found that youngsters who washed their hands four times a day had 24% fewer sick days due to respiratory illness, and 51% fewer days lost because of stomach upset. Under the supervision of Dr. Susan Longe (then at Providence Hospital and Medical Centres, Southfield, MI) teachers in six classrooms had children wash their hands on arrival, before lunch, after recess, and before leaving for the day. The students' sick days for a 37-day period were compared to eight other classrooms that did not have scheduled hand washing. Although the hand washing reduced sick days, it had no effect on visits to the doctor, prescription or OTC drug use, or parents' loss of time at work. (Reported by Reuters New Media, 12/10/96)

A review of surveillance data for U.S. food borne disease outbreaks over a five-year period (1988 - 1992) by the Centres for Disease Control and Prevention found that, of 2874 outbreaks, contributing factors were reported in 1435 and that poor personal hygiene was a contributing factor in over a third (514) of them. (Nancy H. Bean et al., Journal of Food Protection, Vol. 60, No. 10, 1997; 1265-1286)

2.2 THEORETICAL FRAMEWORK



2.2.1 STUDENT POSITIVE HYGIENE

Student positive hygiene is a student who follow the hygienic procedure at a critical points, appropriate times, to break the chain of infection. For example they eliminate the germs before the germs can spread further. They also use the mechanical removal such as soap.

2.2.2 STUDENT NEGATIVE HYGIENE

Student negatives hygiene is a student who does not care about his or her hygiene. Due to that they cannot prevent from getting the disease in their everyday life. Beside that the student with negative hygiene also the one who were the absentee in the class. This is because they do not have the healthy lifestyle. Therefore they easy to get the germs infection.

CHAPTER 3: RESEARCH METHODOLOGY

3.0 INTRODUCTION

This chapter is about the process of how to conduct the research methods. It is consist of types of survey, sample, and measurement of variables and collection implemented to compete the research.

3.1 TYPE OF SURVEY

There are two data collection methods used in this research that is primary data collection methods and secondary data collection methods.

3.1.1 Primary Data

Primary data is gathered by researcher, which come from primary sources or from original data. This type of data collection methods involved of data that collected directly from the respondent. Primary data were obtained in the forms of questionnaires designed. In this study, we gathered the information using the questionnaires which are distributed at a random to the respondents. We distributed the questionnaires to the Diploma in Public Administration (DPA) students from semester 1 until 6. The designer of the question is structured direct format. The advantages of using this type of design is to avoid bias respondents, easy to manage and cheaper.

Type of questionnaire designed

- Multiple choice questions
This is used to collect identification data of the respondents in term of age, gender, semester and other relevant information.
- Open ended
This method is used to collect data from students regarding personality hygiene and how far the students aware about personality hygiene in their lifestyle.

3.1.2 Secondary Data

Secondary data were obtained from numerous sources such as books, published reports, survey, magazines and other available sources and past studies. For the purpose of this study, we used the external sources include books, journals, website in the internet and article available to study. This is to give in depth and better understanding about the subject matters.

3.2 SAMPLING METHOD

The sampling method used to conduct this research is Random Sampling technique. Besides saving more time and cost, we will be able to obtain data that we need for this research immediately. Through this technique, every element in the population has a known and equal chance of being selected as a subject. In this study, each of respondent being choose to complete our questionnaire will have an equal chance of being selected as a subject. Selecting one subject does not affect selecting others. The existence of a complete and updated sampling frame is essential the target population has to become homogenous.

3.2.1 Sampling Unit

The samples are taken from group of selective student from DPA which consist students from semester 1 until 6.

3.2.2 Sample Size

In order to obtain the data required, groups representative are taken. And sample sizes of 120 were selected and questionnaires were distributed in the following means so that we will be able to obtain a reasonable coverage.

- 20 sets of questionnaires will be distributed randomly to semester 1 students.
- 20 sets of questionnaires will be distributed randomly to semester 2 students.

- 20 sets of questionnaires will be distributed randomly to semester 3 students.
- 20 sets of questionnaires will be distributed randomly to semester 4 students.
- 20 sets of questionnaires will be distributed randomly to semester 5 students.
- 20 sets of questionnaires will be distributed randomly to semester 6 students.

3.3 DATA COLLECTION METHOD

3.3.1 Number of respondents

It is referring to the number of times that come in various subcategories of a certain phenomenon occur. Then, the cumulative percentages and percentages can be easily calculated. The information that we get can be presented in the form of histogram or bar chart. The number of respondents' distribution will show the data list categories and the number of elements that belong to each of the categories. Each of the categories, their representative percentages will be determined. Number of respondents is generally obtained for nominal variables such as types of employment and education level.

3.3.2 Measure of tendency

1. Mean

Mean also known as the average is a measure of central tendency that offers a general picture of the data. It also without unnecessarily submerge one with each of the observations that are include in the data set as a result from the observation.

2. Median

Median is the value of the middle term in a data set that has been ranked in increasing order or ascending or descending order. For example, the annual sales for the shop are RM2500, RM3000,

RM3200, and RM3400. The mean for the sales is RM29800, but the median is RM30000.

3. Mode

The observation would not lend itself to a meaningful representation through either the mean or the median but the most frequently occurring phenomenon can be signified.

3.3.3 Measures of dispersion

Standard deviation:

Another measure of dispersion for interval and ratio scaled data is standard deviation. It offers the index of the spread of the dispersion which is simply the square root of the variances. In conjunction with the mean, the standard deviation is a very useful tool because of the following statistical rules. In a normal distribution:

- From all the observation fall within three standard deviations of the mean or the average
- The observations are within two standard deviation of the mean is 90%
- The observations are within one standard of the mean is more than half

The calculation of the mean and the standard deviation in the foregoing were rendered possible since the observation pertained to values measured on the ratio scale. They were not ordinal in nature or nominal it is possible to calculate the mean.

3.3.4 Inferential statistics

Inferential statistics is data through analysis that include, firstly is the relationship between the two variables and secondly is differences in a variable among subgroup and thirdly is how several independent variables might explain the variance in dependent variables.

3.3.5 Correlation

In this correlation, we would like to see the nature, direction, strength and significance of the bipartite relationship of the variable used in the study. To indicate these entire things, a Pearson correlation matrix will provide this information. It also derived by assessing the variation in one variable as another variable also varies.

The correlation can be show in the scatter diagram. Correlations of coefficient indicate the strength and direction of the relationship can be compute by applying a formula that takes into consideration the two sets of figures.

To assess the relationship between variable not measure on an interval or ratio scale, the not parametric test are also available. Spearman's rank correlation and Kendall's rank correlation are used to examine relationship between two ordinal variables.

CHAPTER 4: DATA ANALYSIS AND FINDINGS

4.0 INTRODUCTION

With reference to the scope of study, the survey is based on stratified random sampling of 120 sets of questionnaire the feedback that we received from the respondents is quite satisfied us as out of 120 sets of questionnaire all returned to us.

4.1 RESPONDENT BACKGROUND (Part A of Questionnaire)

4.1.1 GENDER OF RESPONDENTS

Table 1.0: Gender of respondent

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid Male	38	31.7	31.7	31.7
Female	82	68.3	68.3	100.0
Total	120	100.0	100.0	

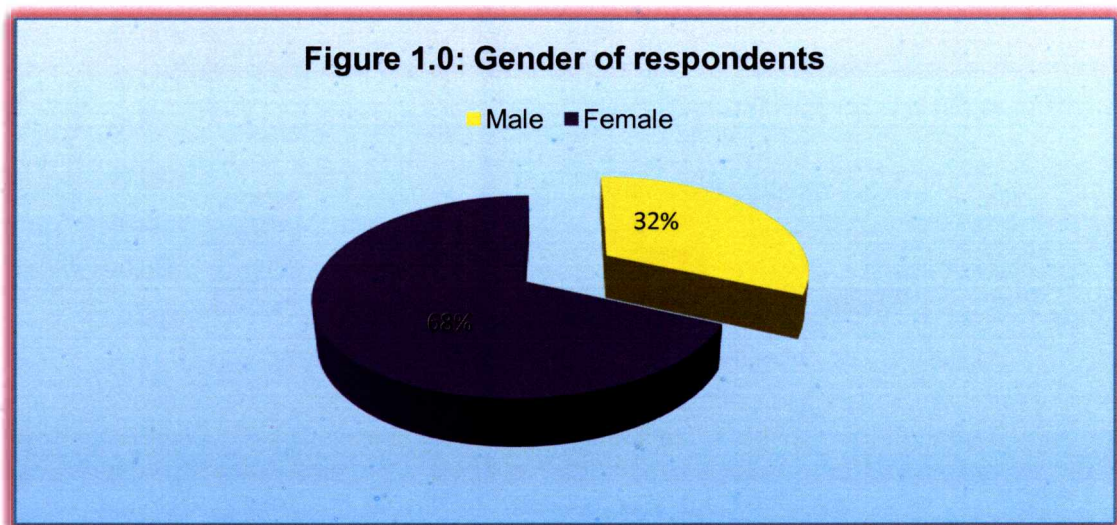


Table 1.0 show the gender of our respondent. 68.3% of our respondents are female and the rest of 31.7% of the respondents is male. This shows most of our respondent are female. In figure 1.0 it clearly show that the female have greater number than male. As you can see from the pie chart half of the respondents are female which consist of 68% and the rest are male which are 32%.

4.1.2 AGE OF RESPONDENTS

Table 1.1: Age of respondents

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid 16 - 18 years old	27	22.5	22.5	22.5
19 - 21 years old	78	65.0	65.0	87.5
22 - 24 years old	13	10.8	10.8	98.3
25 - 27 years old	2	1.7	1.7	100.0
Total	120	100.0	100.0	

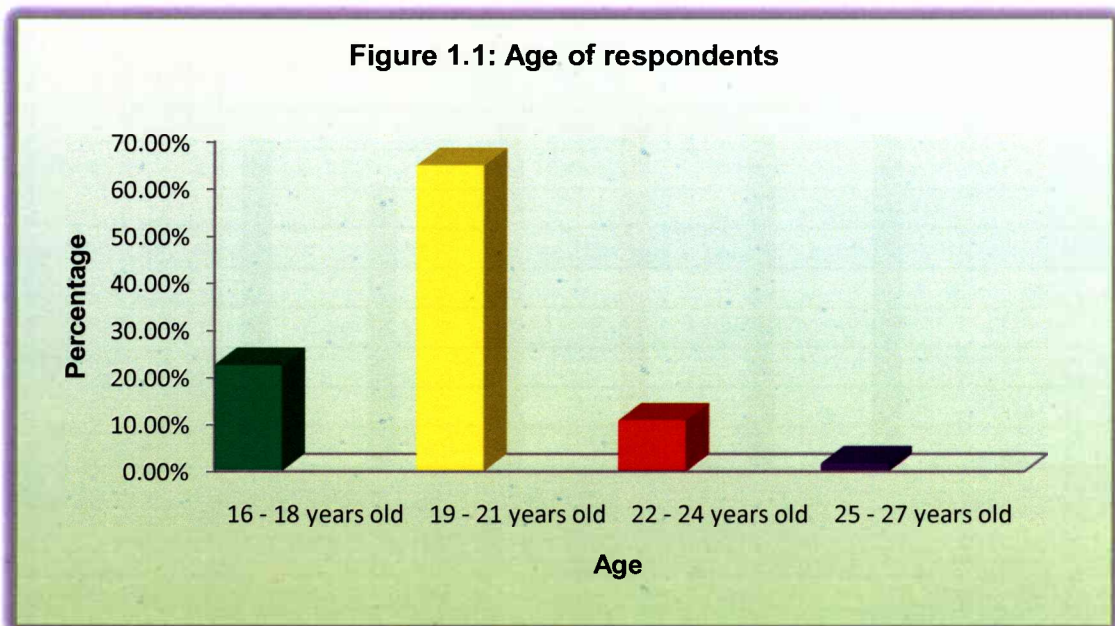


Table 1.1 shows the respondent's age. 65% of our respondent's age is between 19 – 21 years old, 22.5% of our respondent's age is between 16 – 18 years old, and mean while 10.8% of our respondent's is between 22 – 24 years old and only 1.7% of our respondent's age is between 25 – 27 years old. Figure 1.1 indicates that the most of our respondent is at the age of 19 – 21 years old that is 65% and the less is at the age of 25 -27 years old which carries of 1.7% only.

4.1.3 RESPONDENT'S CURRENT SEMESTER

Table 1.2: Respondent's current semester

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	1	20	16.7	16.7	16.7
	2	17	14.2	14.2	30.8
	3	21	17.5	17.5	48.3
	4	21	17.5	17.5	65.8
	5	20	16.7	16.7	82.5
	6	20	16.7	16.7	99.2
	7	1	.8	.8	100.0
	Total	120	100.0	100.0	

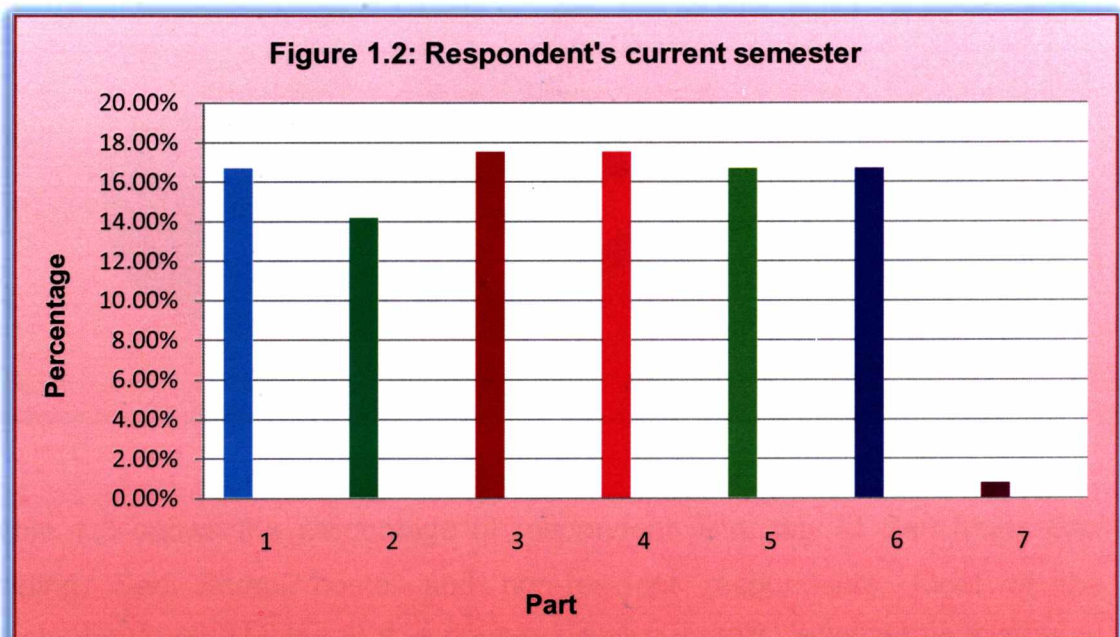


Table 1.2 shows the semester of the respondent. The higher percentage are the respondent from part 3 and 4 which is 17.5%, followed by the respondent from part 1,5 and 6 which is 16.7%, mean while part 2 is 14.2% and lastly is the respondent from part 7 which is 0.8%. As you can see from the figure 1.1 the bar chart shows that the part 3 and 4 has the same number of respondent which is the most. Whereby the part 7 respondent show the less number which is 0.8%.

4.1.4 STATUS OF RESPONDENT

Table 1.3: Status of respondent

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid SERI MULU	33	27.5	27.5	27.5
SERI SERAPI	22	18.3	18.3	45.8
SERI GADING	48	40.0	40.0	85.8
NON-RESIDENT (NR)	17	14.2	14.2	100.0
Total	120	100.0	100.0	

Figure 1.3: Status of respondent

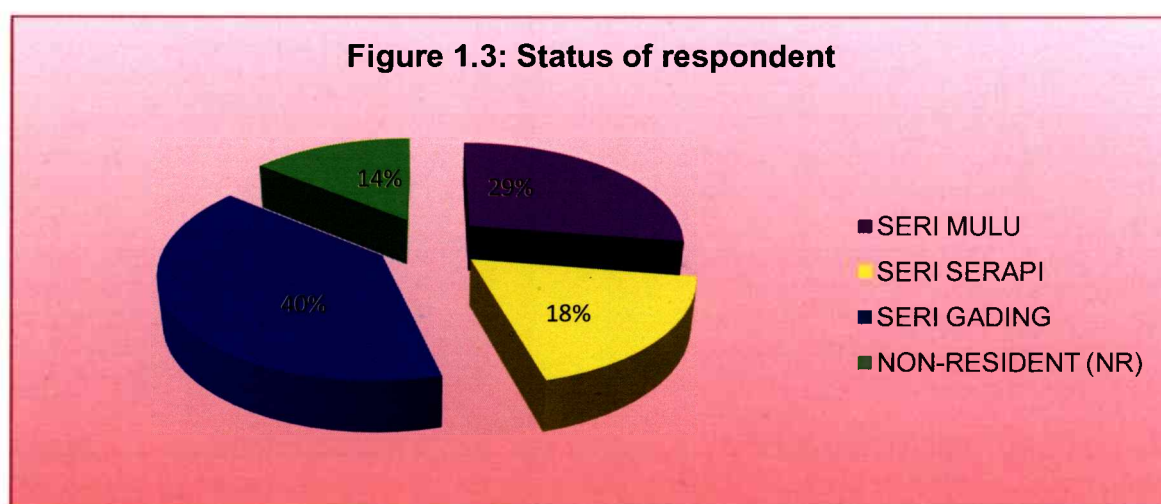


Table 1.3 shows the percentage of respondent who stay at Seri Mulu, Seri Gading, Seri Serapi hostel and non-resident respondents. Most of the respondent were staying at Seri Gading which are 40%, followed by Seri Mulu which is 27.5%, mean while Seri Serapi were the third higher which is 18.3% of the respondent and the lowest is the respondent who are non-resident which is 14.2%. In figure 1.3 it clearly shows that 40% of the respondent was staying at Seri Gading which is the higher and the lower is the non-resident respondent which is 14%.

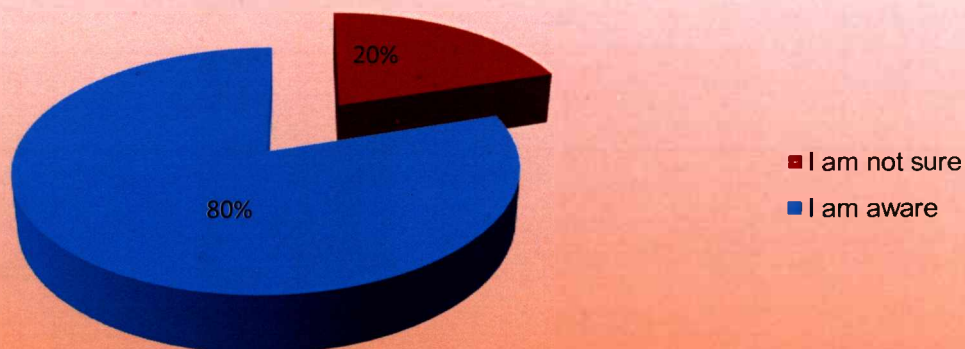
4.2 PERSONAL HYGIENE AWARENESS (Part B of Questionnaire)

4.2.1 The level of personal hygiene awareness of respondent

Table 1.4: The level of personal hygiene awareness of respondent

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid I am not sure	24	20.0	20.0	20.0
I am aware	96	80.0	80.0	100.0
Total	120	100.0	100.0	

Figure 1.4: The level of personal hygiene awareness of respondent

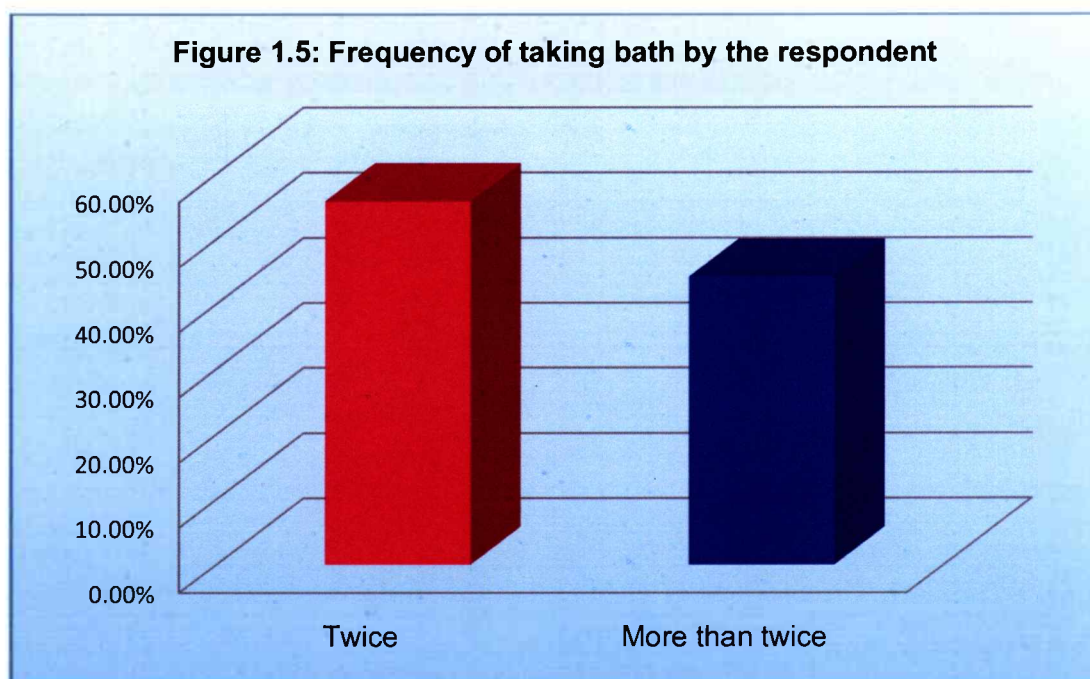


From the finding shows at the table 1.4 about 80% of the respondent were aware with their level of personal hygiene awareness. Another 20% shows that the respondent does not aware of their level of personal hygiene. In the figure 1.4 indicates that more than 50% of the respondent was aware of their level of personal hygiene awareness.

4.2.2 Frequency of taking bath by the respondent

Table 1.5: Frequency of taking bath by the respondent

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid Twice	67	55.8	55.8	55.8
More than twice	53	44.2	44.2	100.0
Total	120	100.0	100.0	

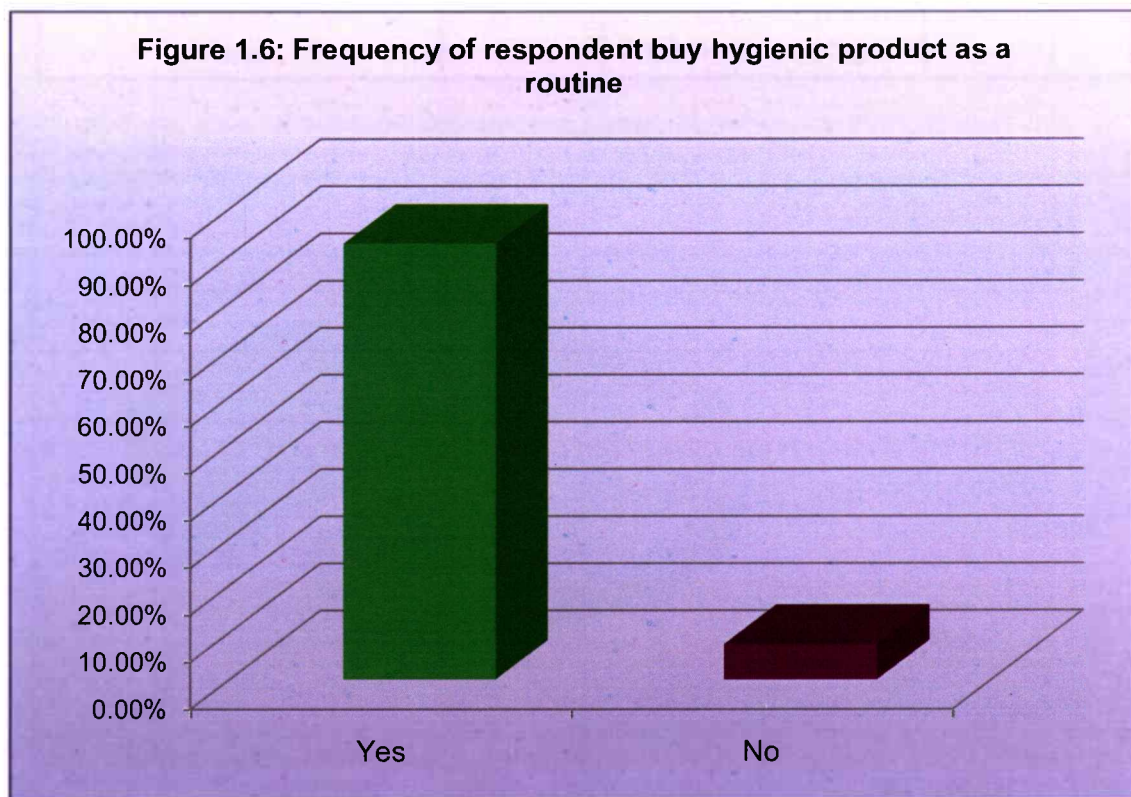


From the table shown above most of the respondent take bath twice a day which indicates 55.8% of the respondent mean while the another 44.2% take bath more than twice in a day. In the figure 1.5 it shows that the respondent who takes bath twice in a day is slightly more than the respondent who takes bath more than twice in a day which is 56%.

4.2.3 Frequency of respondent buy hygienic product as a routine

Table 1.6: Frequency of respondent buy hygienic product as a routine

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid Yes	111	92.5	92.5	92.5
No	9	7.5	7.5	100.0
Total	120	100.0	100.0	



From the table above we can find that most of the respondents buy the hygienic products as their routine. 92.5% of the respondent answering yes and another 7.5% answering no. In the figure 1.6 it shows that the respondents who answer yes is much higher than the respondent who answer no which is 93% yes and 7.5% no.

4.2.4 Frequency of buying it in period of month

Table 1.7: Frequency of buying it in period of month

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Once a month	74	61.7	61.7	61.7
	Twice a month	41	34.2	34.2	95.8
	Three time a month	5	4.2	4.2	100.0
	Total	120	100.0	100.0	

Figure 1.7: Frequency of buying it in a period of month

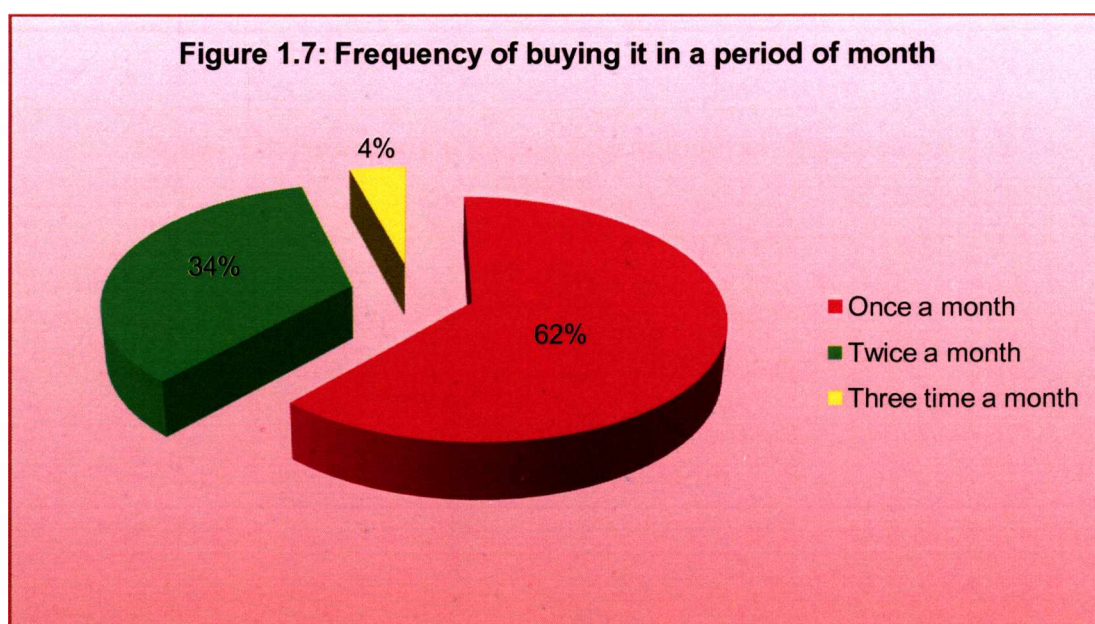


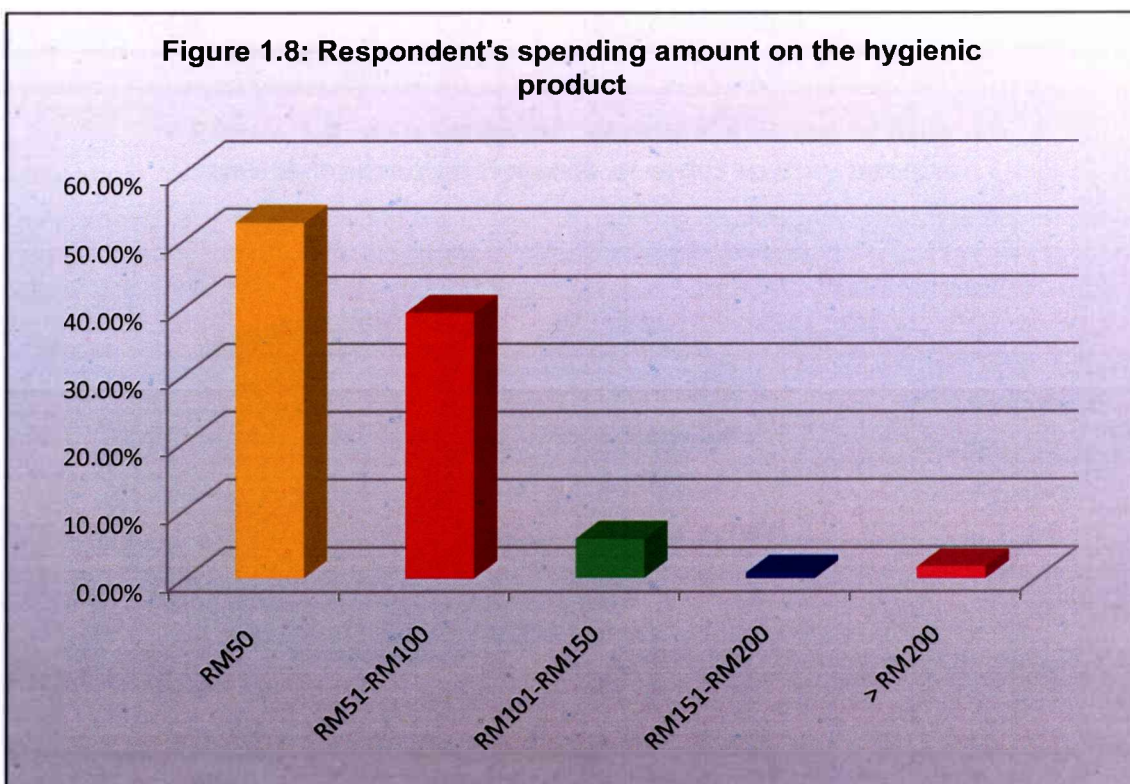
Table above shows that 61.7% of the respondents buy the hygienic products once a month which is the highest followed by the respondents who buy the hygienic product twice a month which is 34.2% and only 4.2% of the respondent buy the hygienic products three time a month. As you can see in the figure 1.7 it show that more than half of the respondent buying the hygienic product once a month compare to twice and three times a month.

4.2.5 Respondent's spending amount on the hygienic product

Table 1.8: Respondent's spending amount on the hygienic product

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	RM50	63	52.5	52.5	52.5
	RM51 - RM100	47	39.2	39.2	91.7
	RM101 - RM150	7	5.8	5.8	97.5
	RM151 - RM200	1	.8	.8	98.3
	> RM200	2	1.7	1.7	100.0
	Total	120	100.0	100.0	

Figure 1.8: Respondent's spending amount on the hygienic product



From the table 1.8 the maximum spending to buy those hygienic product is RM50 which is the higher percentage 52.5% followed by range of RM51-RM100 which is 39.2%, RM101-RM150 with 5.8%, more than RM200 with 1.7% and lastly is between range of RM151-RM200 with only 0.8%. Figure 1.8 clearly shows that the higher range is the respondents who spend RM50 and the lowest is the respondent who spends RM151-RM200.

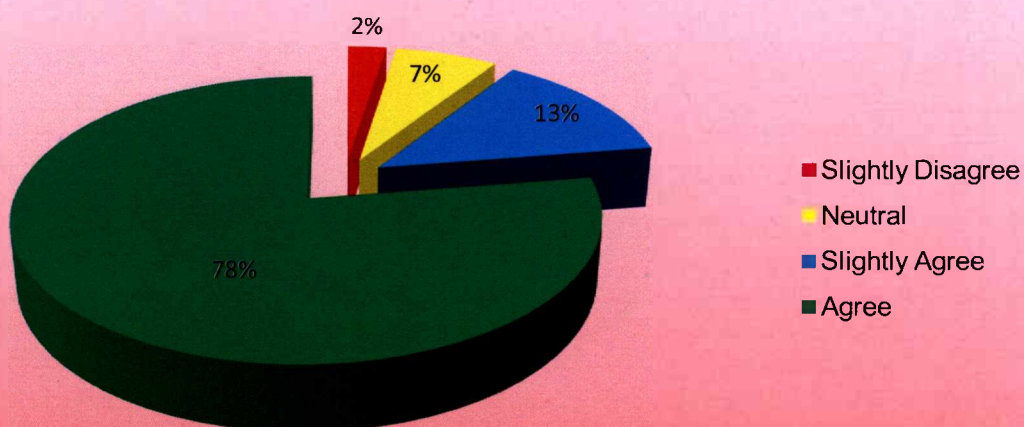
4.3 LEVEL OF AWARENESS IN PERSONAL HYGIENE (Part C of Questionnaire)

4.3.1 As a student, we should aware of how important personal hygiene in order to stay healthy.

Table 1.9: As a students, we should aware of how important personal hygiene in order to stay healthy.

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid Slightly Disagree	3	2.5	2.5	2.5
Neutral	8	6.7	6.7	9.2
Slightly Agree	16	13.3	13.3	22.5
Agree	93	77.5	77.5	100.0
Total	120	100.0	100.0	

Figure 1.9: As a students, we should aware of how important personal hygiene in order to stay healthy



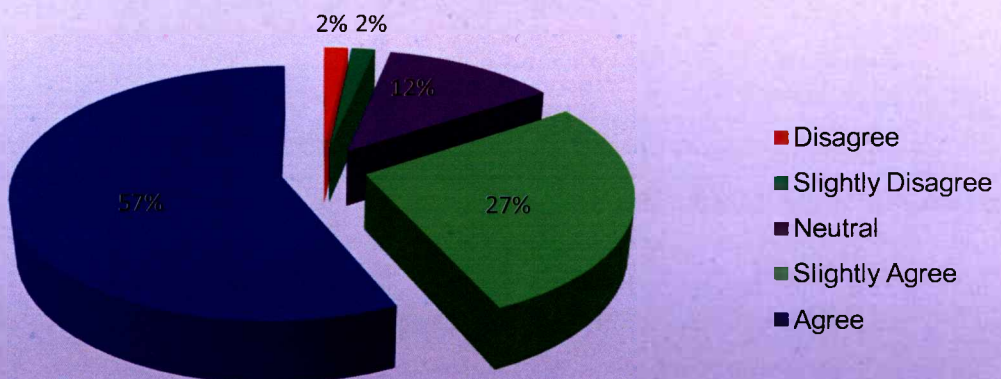
The table 1.9 shows, 2.5% is slightly disagree, 6.7% is neutral, 13.3% is slightly agree and 77.5% is agree that as a student, we should aware of how important personal hygiene in order to stay healthy. Figure 1.9 shows that the percentage is the respondent who are agree that we should aware of how important personal hygiene in order to stay healthy which is 78% and the lowest is the respondent who are slightly disagree.

4.3.2 By taking bath twice a day is sufficient to be hygienic and avoid simple viral affection.

Table 2.0: By taking bath twice a day is sufficient to be hygienic and avoid simple viral affection.

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Disagree	2	1.7	1.7	1.7
	Slightly Disagree	2	1.7	1.7	3.3
	Neutral	15	12.5	12.5	15.8
	Slightly Agree	33	27.5	27.5	43.3
	Agree	68	56.7	56.7	100.0
	Total	120	100.0	100.0	

Figure 2.0: By taking bath twice a day is sufficient to be hygienic and avoid viral affection



The table 2.0 shows, 1.7%% disagree and slightly disagree, 12.5% is neutral, 27.5% is slightly agree and 56.7% is agree by taking bath twice a day is sufficient to be hygiene and avoid viral affection. From the figure 2.0 we can see that 57% of the respondent is agree that we taking bath twice a day compare to 2% of the respondent that disagree and slightly disagree that we should take bath twice a day to be hygiene.

4.3.3 To be hygienic, it would involve high cost to maintain

Table 2.1: To be a hygienic, it would involve high cost to maintain

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Disagree	37	30.8	30.8	30.8
	Slightly Disagree	11	9.2	9.2	40.0
	Neutral	29	24.2	24.2	64.2
	Slightly Agree	25	20.8	20.8	85.0
	Agree	18	15.0	15.0	100.0
	Total	120	100.0	100.0	

Figure 2.1: To be hygienic, it would involve high cost to maintain

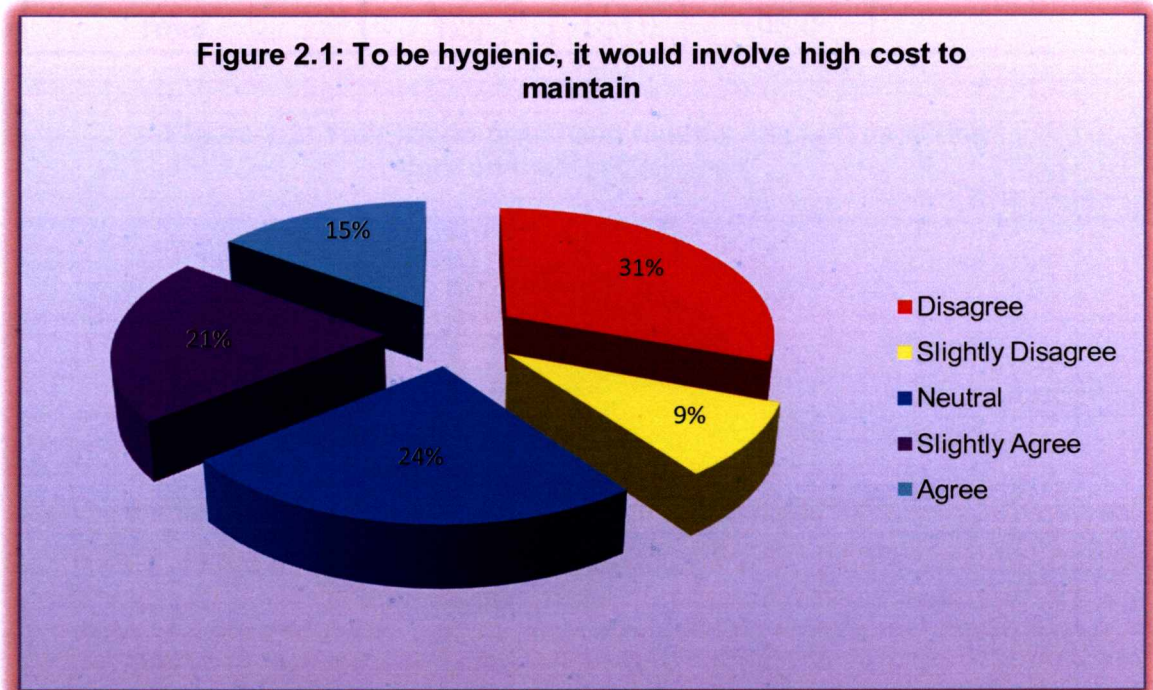


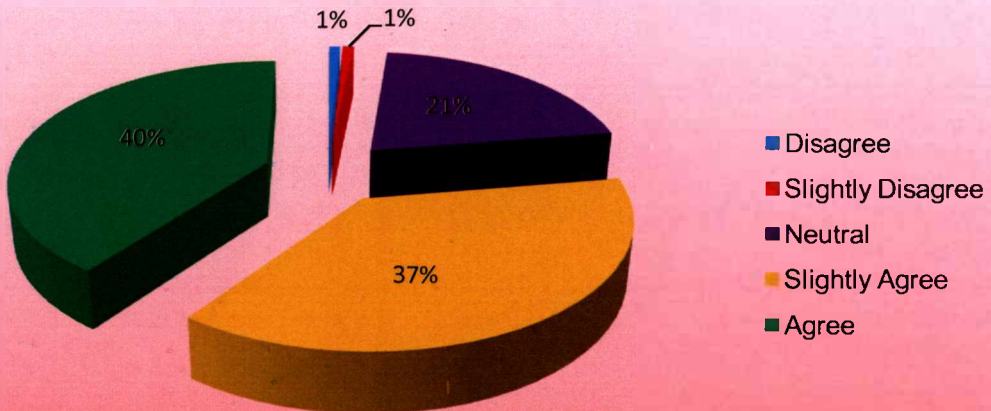
Table 2.1 above shows, 30.8% disagree, 9.2% slightly disagree, 24.2% neutral, 20.8% is slightly agree and 15% is agree that to be hygienic, it would involve high cost to maintain. The figure 2.1 shows that the higher percentage is the respondent that are disagree that to be hygienic it involve high cost which is 31% and the lowest is the respondent who are slightly disagree with 9% only.

4.3.4 Your friend practising a healthy lifestyle by taking care on their self hygiene

Table 2.2: Your friend practising a healthy lifestyle by taking care on their self hygiene.

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid Disagree	1	.8	.8	.8
Slightly Disagree	1	.8	.8	1.7
Neutral	25	20.8	20.8	22.5
Slightly Agree	45	37.5	37.5	60.0
Agree	48	40.0	40.0	100.0
Total	120	100.0	100.0	

Figure 2.2: Your friend practising healthy lifestyle by taking care on their self hygiene



The table 2.2 shows, 0.8% is disagree and slightly disagree, 20.8% neutral, 37.5% is slightly agree and 40% is agree that your friend practising healthy lifestyle by taking care on their self hygiene. From figure 2.2 it shows that the higher percentage is the respondent who are agree that their friend practising healthy lifestyle which is 40% and the lowest is the respondent who are disagree and slightly disagree that their friend is practising healthy life style which is 0.8% only.

4.3.5 You share the hygiene information with your closed friends.

Table 2.3: You share the hygiene information with your closed friends.

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid Disagree	6	5.0	5.0	5.0
Slightly Disagree	7	5.8	5.8	10.8
Neutral	14	11.7	11.7	22.5
Slightly Agree	37	30.8	30.8	53.3
Agree	56	46.7	46.7	100.0
Total	120	100.0	100.0	

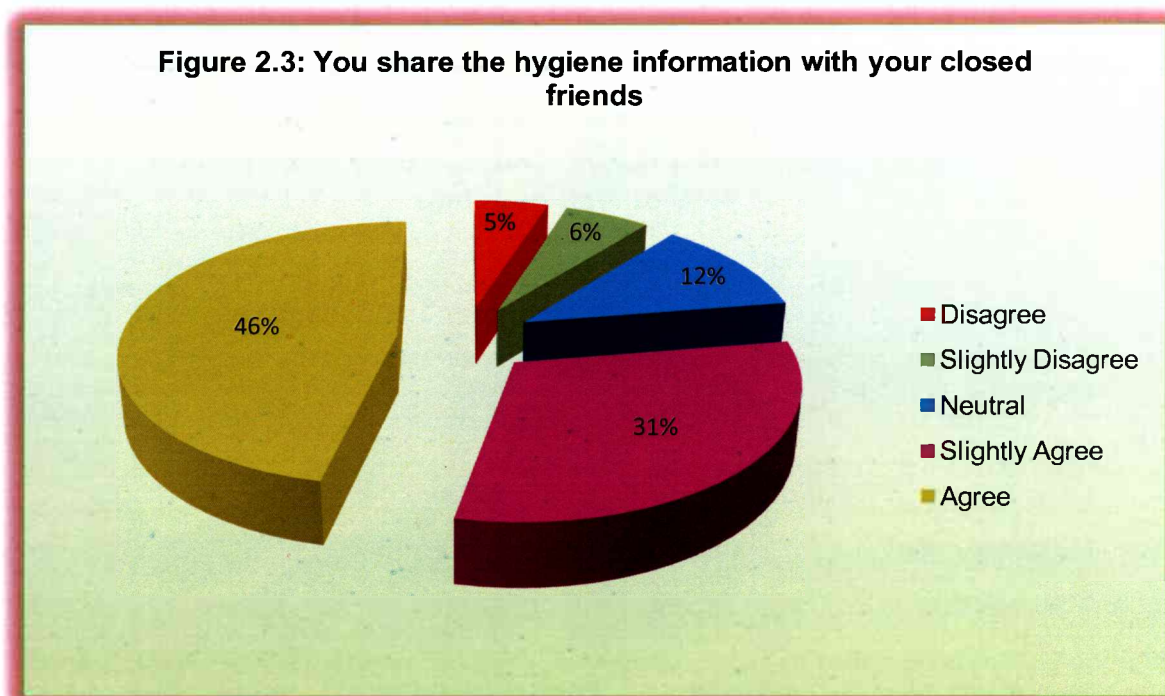


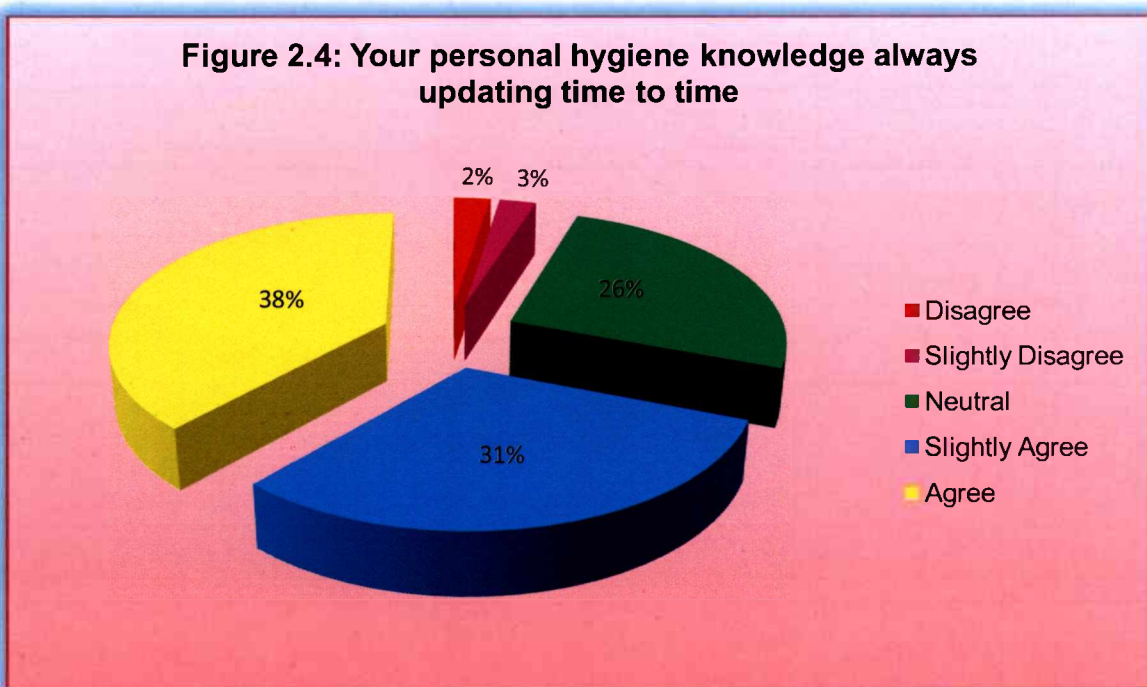
Table 2.3 above shows, 5% is disagree, 5.8% is slightly disagree, 11.7% is neutral, 30.8% is slightly disagree and 46.7% is agree that they are share the hygiene information with their closed friends. The figure 2.3 shows the higher percentage is the respondent who are agree that they should shared the hygiene information with their closed friends which is 46% and the lowest is respondent who are disagree.

4.3.6 Your personal hygiene knowledge always updating time to time.

Table 2.4: Your personal hygiene knowledge always updating time to time.

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Disagree	3	2.5	2.5	2.5
	Slightly Disagree	3	2.5	2.5	5.0
	Neutral	31	25.8	25.8	30.8
	Slightly Agree	37	30.8	30.8	61.7
	Agree	46	38.3	38.3	100.0
	Total	120	100.0	100.0	

Figure 2.4: Your personal hygiene knowledge always updating time to time



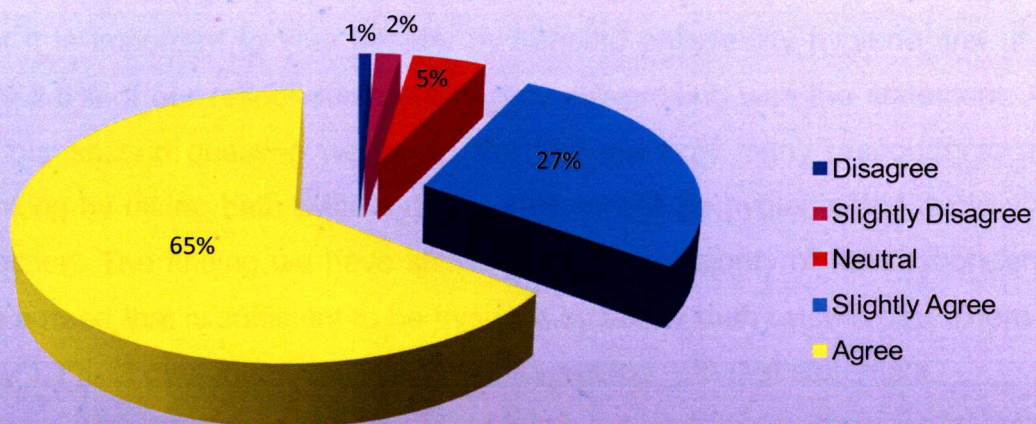
The table 2.4 shows, 2.5% is disagree and slightly disagree, 25.8% neutral, 30.8% slightly agree and 38.3% is agree that our personal hygiene knowledge must be update time to time. The figure of 2.4 shows that most of the respondent agrees that your personal hygiene knowledge always updating time to time which is 38% and the lowest is the respondent who are disagree which is 2%.

4.3.7 You are practising self hygiene starting from home.

Table 2.5: You are practising self hygiene starting from home.

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid Disagree	1	.8	.8	.8
Slightly Disagree	2	1.7	1.7	2.5
Neutral	6	5.0	5.0	7.5
Slightly Agree	33	27.5	27.5	35.0
Agree	78	65.0	65.0	100.0
Total	120	100.0	100.0	

Figure 2.5: You practising self hygiene starting from home



The table 2.5 above shows, 0.8% is disagree, 1.7% slightly disagree, 5% is neutral, 27.5% is slightly agree and 65% is agree that you are practising self hygiene starting from home. The figure 2.5 show most of the respondent is agree that you are practising self hygiene from home which is 65% and the lowest is the respondent who are disagree which is 1% only.

CHAPTER 5: CONCLUSION AND RECOMMENDATION

5.0 INTRODUCTION

This chapter focuses on the information that has been obtained from the findings. From the information's that has been gathered we can make a conclusion and recommendation of the students about the level of awareness regarding self hygiene. This is because each answer given by them is calculated and helps us to make a recommendation as well.

5.1 PERSONAL HYGIENE AWARENESS AMONG DPA'S STUDENTS

In our first question toward our respondent, we would like to know how many respondents are aware how important personal hygiene to stay healthy. The finding that we have shows that it is a majority of respondents are aware their personal hygiene. It resulted when 77.5% of our respondents are agreed that it is important to stay healthy by keeping personal hygiene first. It is only 2.5% of our respondents are slightly disagreeing with the statement. As for our second question we would like to know how many respondents are thinking by taking bath twice a day is sufficient to be hygienic and avoid viral infection. The finding we have showing that is a majority of the respondents are agreed that is sufficient to be hygienic by taking bath twice a day. There is only 1.7% of respondents are slightly disagreeing with that statement.

In our third question we would like to know either it involve high cost to maintain hygienic. The finding that we have showing that 30.8% of our respondents are disagreed with the statement that they need to spend high cost to be hygienic. This means that there is some way to be hygienic besides buy something with high cost. There only 20.8% of our respondents that slightly disagreeing that they spent more money to keep hygienic. As for our fourth question we would like to know is there friends surrounding are practicing a healthy lifestyle by taking care of their self hygiene. The findings we have showing majority of the respondents are agreed that their friends are practicing healthy lifestyle to care about their self hygienic. There only 0.8% of respondents are slightly disagreeing about the statement.

As our fifth question we would like to know how many of our respondents sharing about hygiene information with their closed friends. The finding we have showing majority of respondents are sharing about hygiene information with their closed friend. However, there are 5.8% of our respondents are not interesting to share about hygiene information with their friends. For our sixth question we would like to know there is respondent's personal hygiene knowledge are always updating time to time. The finding we have showing only 38.3% of respondents is updating their knowledge about hygiene information. The result shows that might be the respondents are not interesting to update their hygiene knowledge.

The last question that we distribute to our respondents either they are practicing self hygiene starting from home. The finding we have showing majority of them are agreed to practice self hygiene it should be from their home. There only 1.7% of respondents are slightly disagreeing that statement start to be hygienic in home.

5.2 RECOMMENDATION

Based on the result of our research our group have come out with several recommendations. Therefore there are several parties that involve in order increasing the level of personal hygiene among DPA student in UiTM, Sarawak.

5.2.1 Parents

Parent is the most important person that should be aware of the personal hygiene awareness of their children. The personal hygiene must start from home first. If the family does not practice the hygiene lifestyle in home therefore we can conclude that most of them do not have the personal hygiene everywhere they go. Thus the parent should teach their children so that they are practising good habits of hygiene. Beside they also should expose their children on the important of the hygiene awareness.

5.2.2 Students

The student herself first should have the awareness inside them. In order for them to maintain there personal hygiene awareness they should know the effective ways that can keep their personal hygiene maintain. Beside as a student they should maintain their personal hygiene to stay healthy so that they can attend the lecture. More over the student should not hesitate to spend on the hygienic product because this product can help the student to stay healthy and clean.

5.2.3 Management of residential college

The management of residential college also play vital roles in order to maintain the hygiene of the student. For example the management of residential college should provide enough facilities for the student. Beside that they should always make sure that the cleaner are done their cleaning job in the residential college so that its keep clean. More over the management of residential should organise talk once a

semester to make sure that the awareness level of the student is high. If the student is healthy then the institution also becomes healthy as they are the one who will contribute to the performance of the university.

5.2.4 Company of hygienic product

The company of hygiene product also play an important roles in order to make sure that the students are practise good habit hygiene. The company of the hygienic product can contribute to the personal hygiene awareness among the student by conduct program in that institution like university. They can increase the level of student's awareness by give talk to the university student about the important of the hygiene practice in daily life. More over the company can do some special offer for the student in the university. For example the company conduct a cheap sale program of hygienic product in the university. Through this the students will attracted to the program because they have the opportunity to buy a cheap product that can maintain their hygienic lifestyle.

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QUESTIONNAIRE



UNIVERSITY TEKNOLOGI MARA (UiTM)

FACULTY OF ADMINISTRATIVE SCIENCE AND POLICY STUDIES (AM110)

RESEARCH METHODOLOGY (PAD340)

**“THE PERSONAL HYGIENE AWARENESS
AMONG THE DIPLOMA IN PUBLIC ADMINISTRATION”**

Purpose: The purpose of this study is to explore the level of personal hygiene awareness. We highly appreciate it if you could provide us some feedbacks on this quick survey. Thank you for your cooperation.

TEAM MEMBERS

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SECTION A: RESPONDENT PARTICULAR

PLEASE **TICK (/)** OR **WRITE** YOUR ANSWER IN THE PROVIDED SPACE.

1. GENDER

MALE

FEMALE

2. AGE

16 – 18 YEARS OLD

22 – 24 YEARS OLD

19 – 21 YEARS OLD

25 – 27 YEARS OLD

3. CURRENTLY, YOU ARE IN PART _____

4. WHERE ARE YOU STAYING

SERI MULU

SERI GADING

SERI SERAPI

NON-RESIDENT (NR)

SECTION B: PERSONAL HYGIENE AWARENESS

1. WHAT IS YOUR LEVEL OF PERSONAL HYGIENE AWARENESS?

(Please tick your answer)

I am not aware _____

I am not sure _____

I am aware _____

2. HOW OFTEN DO YOU TAKE BATH IN A DAY?

ONCE

TWICE

MORE THAN TWICE. JUSTIFY _____

3. DO YOU BUY THOSE THINGS AS YOUR ROUTINE?

YES

NO

4. IF YES, HOW OFTEN DO YOU BUY IT IN A PERIOD OF MONTH?

ONCE A MONTH

TWICE A MONTH

THREE TIME A MONTH

5. HOW MUCH USUALLY YOU SPEND TO BUY THESE PRODUCTS?

RM50

RM151-RM200

RM51-RM100

> RM200

RM101-RM150

SECTION C: LEVEL OF AWARENESS IN PERSONAL HYGIENE

USING THE SCALE BELOW, PLEASE **TICK** (/) THE MOST APPROPRIATE RESPONSE FOR THE FOLLOWING STATEMENTS.

1	2	3	4	5
DISAGREE	SLIGHTLY DISAGREE	NEUTRAL	SLIGHTLY AGREE	AGREE

		1	2	3	4	5
1.	AS A STUDENTS, WE SHOULD AWARE OF HOW IMPORTANT PERSONAL HYGIENE IN ORDER TO STAY HEALTHY.					
2.	BY TAKING BATH TWICE A DAY IS SUFFICIENT TO BE HYGIENIC AND AVOID SIMPLE VIRAL EFFECTION.					
3.	TO BE A HYGIENIC, IT WOULD INVOLVE HIGH COST TO MAINTAIN.					
4.	YOUR FRIEND PRACTICING A HEALTHY LIFESTYLE BY TAKING CARE ON THEIR SELF HYGIENE.					
5.	YOU SHARE THE HYGIENE INFORMATIION WITH YOUR CLOSED FRIENDS.					
6.	YOUR PERSONAL HYGIENE KNOWLEDGE ALWAYS UPDATING TIME TO TIME.					
7.	YOU ARE PRACTICING SELF HYGIENE STARTING FROM HOME.					

SECTION D: RESPONDENT'S OPINION

1. AS A STUDENTS, WHAT DO YOU UNDERSTAND ABOUT THE AWARENESS OF MAINTAINING SELF HYGIENE?

2. IS IT PERSONAL HYGIENE IS BEST MAINTAINED BY YOURSELF OR OTHERS? IF YES, GIVE YOUR COMMENT.

3. WHAT IS YOUR RECOMMENDATION TO INCREASE THE LEVEL OF HYGIENE AWARENESS?
