The Survey of Knowledge, Attitude and Performance Of Female Barbers in Relation to Job's Environmental Health: A Case Study of Malayer City

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ABSTRACT

Hygiene disregarding and usage of contaminated tools leads to viral infections, fungal, bacterial and skin diseases, eczema, warts, tetanus and so on. Thus assessment of knowledge, attitudes and performance of barbers in order to ensure the security and public health is really necessary. This study is aimed at determining the knowledge, attitude and performance of female barbers in relation to job's environmental health in Malayer city. In present descriptive- analytical study, 75 female barbers sampling of Malayer city were selected by clusters – systematic method. The data were obtained through questionnaires for completion and checklist. Data analysis was performed using SPSS 21 statistical software. The result showed, 86.66% of people have attained correct awareness of regulations and 92.28% had positive attitude toward regulations and 86.38% of people in this study showed appropriate health practice. In order to, compare the average knowledge level in regard to parameters such as age, work experiences and income situation showed a statistically significant difference. In attitude and performance section, the difference between age and mentioned parameters was not statistically significant ($P \ge 0.05$). Despite the desirable level of knowledge, attitude and practice of barbers female in Malayer city, in order to improve the situation, to be better the presence of barbers in special guilds courses to train seriously.

Keywords: Knowledge, Attitude, performance, beauticians, Malayer

INTRODUCTION

Nowadays, the spread of communicable diseases has become a global problem particularly in developing countries, which depend on a set of behavioral and environmental factors varying from country to country. In such situation, the role of health education as an influential factor to change the attitude and consequently the people proper function in regard to safety issues is very important [1].

In each society, People's health behaviors affected by knowledge, awareness and attitudes, and Factors such as motivation and understanding are required to achieve correct health behavior. To achieve the goals of prevention programs, efforts to identify these factors and enhancing the awareness and attitude level in regard to the relevant agencies, should be considered significantly [1, 2].

Barbering has been identified as risky jobs, which lack of awareness and poor performance of health issues can be raised as a serious threat to public health. The lack of hygiene and usage of contaminated equipment, leads to the development of fungal and viral infections, bacterial skin diseases, eczema, warts, and tetanus [3].

While the high-risk activities such as tattooing, usage of common equipments in beauty salons, have been identified as a potential source for disease transmission. Several studies have warned the transmission risk of blood diseases such as B Hepatitis and HIV by barbers [4-7].

According to research that has been carried out, the prevalence of B hepatitis among Barbers was more than other groups and on the other hand, skin inflammatory reacted (eczema) that has been related for the entrance of the virus with blood origin [8].

Unfortunately, our country not covered barbers health education programs that can lead to lack of barbers knowledge, attitude, and performance. Being notify of knowledge, attitude and analyzing the performance of barbers is the first step in compiling of the health education program.

The aim of this study was to determine the knowledge, attitude and practice of Malayer city's female barbers, and if needed, the necessity of health education should be considered in various fields, particularly for blood diseases prevention.

MATERIALS AND METHODS

In present descriptive- analytical study, samples were selected based on occupational and environment health map of Hamadan University of Medical Science, and regarding to frequency ratio of female barbers in every region (five points of North, South, East, West and center).Generally 75 female barbers were selected in Malayer city that had official work by clusters – systematic method.

The data collection tool was self-made questionnaire which was performed by interviews and observation. The questionnaire was regulated in 4 sections. The first part included the demographic characteristics content of studied population such as age, marital status, work experience and income situation, the second part included 15 questions related to awareness, and third part included 21 questions related to attitudes and fourth part included 21 questions with regard to performance.

The questionnaire was set in accordance to 13 regulation articles of the environmental health that includes personal hygiene, facility sanitation, tools and equipment health and medical examination card.

In this study the purpose of knowledge and attitude level, was the ability of the studied population in corrective response of the questions. With the same evaluation for each of the knowledge questions, point 1 and Point 0 were considered for a correct answer and incorrect answers, respectively. And for answer to the attitude questions, agreement and disagreement options were identified.

People's knowledge, attitude and performance were classified according to score that analyze in three levels, poor (gained scores below 50% of the total score), average (gained score between 50% and 75% of the total score) and good (gained score above 75% of total score). In present questionnaire, tools validity was assessed through content validity. Thus the questionnaire was presented among 10 members of the Faculty of Health. Based on the objectives, assessment of the target population, desired title of research, and questionnaire's knowledge and attitude questions related to the content and consistency to the objectives was prepared. In this research, in order to determine the reliability, the retest method was applied and questionnaire's reliability was assessed through Pearson correlation coefficient. Pearson correlation coefficient for knowledge questions was 0.8 and for attitude questions were 0.7. The analysis of obtained data has been done by SPSS 21 software, and 0.05 was reported for significant level. Income situation for barbers was explanation with Rial unit. A Dollar is 30.529 Rials.

RESULT

In the present study, corresponding form was completed by all participants. The surveying of demographic characteristics of the studied population indicated, 22% of women were single, 66% were married, and 11% were divorced. The major income rate was on average level (70% of the sample). 44.5% of people that had job experience were between 5 to 10 years and 56% of the studied population was the age range of 25 to 35 years (Table 1).

 Table 1. The knowledge, attitude and performance of female barbers to occupational health according to demographic characteristic in the Malayer city

variable		Parameter		
		Knowledge	Attitude	Performance
	16-25	13.8±1.64	20.6±0.54	19±2.34
Age, year	25-35	12.3±2.3	19.02±1.78	17.85±2.22
	35-50	13.7±1.99	19.56±1.82	18.34±2.48
	>50	15±0.5	19±1	21±0.4
Martial statues	Single	13.23±1.92	20.05±1.19	19.05±1.95
	Marriage	12.77±2.3	19±1.88	17.9±2.43
	Divorced	13.37±2.26	19.71±1.7	17.75±2.12
	1-5	11.6±2.42	18.72 ± 2.05	17.13±2.31
Job experience, year	5-10	13.5±1.71	19.51±1.52	18.54±2.2
	>10	14.6±1.16	20.27±1.1	19.5±1.73
	Less than 5000000	10.7±1.25	18.25±1.7	16±1.82
Income situation, Rials	5000000-	12.72±2.2	19.19±1.74	17.86±2.28
	10000000			
	>10000000	14.22±1.86	20.23±1.03	19.6±1.75

The results showed that 86.66% of the studied population has attained the correct awareness towards personal hygiene, sanitation facilities, tools and equipment health and medical examination card.

By comparing the average knowledge according to the parameters such as age, work experience and income situation in the Kruskal-Wallis test revealed a statistically significant difference (P value ≤ 0.05).

It was also observed that the maximum awareness level was by widows (89%), age over 50 years (100%), job experience more than 10 years (97%) and income rate over ten million Rails (95%).

In the attitude section result, the highest percentage of positive attitude observed in single barber (95.47%), age range between 16-25 years (98.1%), job experience more than 10 years (97%) and income over ten million Rails(96.33%).

Base on obtained results, 92.28% of the participants in the present study had a positive attitude towards 13 regulation articles which includes personal hygiene, facilities sanitation, equipment and tools health and medical examination card. Performance review of Barbers has shown the highest percentage of appropriate performance in single female barber (90.71%), age range over 50 years (100%), job experience over 10 years (92.85%) and income over ten million Rials (93.38%).

Generally in this study, 86.38% of the studied population was categorized in good health

performance level. And In the attitude and performance section, between the mentioned parameters and demographic variables such as work experience and income situation were demonstrated statistical significance difference (P <0.05).

It was also revealed that the maximum score has gained in population which has more than 10 years of employment experiences and income rate higher than ten million Rials.

And between marital status of demographic variables and surveyed parameters was not observed a significant difference ($P \ge 0.05$). Through compare point of view the results, by increment of age, work experience and income, consequently level of surveyed parameters has been increased. In order to determine the relationship between knowledge, attitude and performance of the barbers, Spearman correlation coefficient was applied and demonstrated a significant correlation between the variables ($P \le 0.05$). In this case, while the people's awareness level was more, good attitude and performance has been gained (Table 2).

 Table 2. The relationship of knowledge, attitude and performance towards hygiene, facilities sanitation, tools and equipment health and medical examination card of female barbers in the Malayer city

		knowledge	attitude	performance
Knowledge	Correlation coefficient	1	0.542**	0.725**
	Sig. (2-tailed)		0.000	0.000
	number	75	75	75
Attitude	Correlation coefficient	0.542**	1	0.65**
	Sig. (2-tailed)	0.000		0.000
	number	75	75	75
performance	Correlation coefficient	0.725**	0.65**	1
	Sig. (2-tailed)	0.000	0.000	
	number	75	75	75

Discussion:

According to the conclusions, the age mean of the studied population was young. Also the knowledge, attitude and performance of the studied population were classified at good level (higher than 75%), but it can be deducted the barber which have participated in the guilds trained courses, in terms of job equipment health, personal health and condition of the building.

The data analysis has demonstrated significant relationship among knowledge, attitude and education (P value $\leq 05/0$).

The obtained relationship was justified logically, because more experienced individual's showed excessive ability for learning and it may be due to extra study, sensitive and attending the related subject.

Although the plausible level that achieved by female barbers related to attitude, but unfortunately, barbers performance has demonstrated a low level. Health performance has arisen from different causes, includes marital status that has attributed to preferring the family requirements as prioritizing issue by married studied population which has posed to neglect and ignore some tips and principles in the health environment.

Additionally, better performance has been shown by single studied population, likely due to more freely and more job responsibility towards the principles of occupational health, which can affect the performance of individuals. With respect to barber's right awareness, it is hopeful to encourage barbers to performance improvement in this area, by advertisement and rigorous training program, especially for married people.

Correspond to Ghiyasi *et. al.* research on Barbers' knowledge and attitudes, the result showed knowledge and attitudes in Sabzevar city were moderate to good which have consistency with the results of this study. Unlike Ghiyasi *et. al.*, the association of knowledge results with their performance showed good knowledge level, which has reflected proper hygiene performance in the people too.

It should be noted that about 13% of the studied population did not have enough knowledge about regulation of job's environmental health. According to studies, the parameters such as race, gender, age, economic and social status have been identified as factors affecting health behavior [9].

In this study, the significant relationship between age, income, and job experience with the knowledge, attitude and performance has been revealed. Furthermore, in this study, the highest level of knowledge and attitude was in the age group between 16-25 years. It can be ascribed to less education of occupational hygiene of older people.

On the other hand, it can be related to younger generation's enthusiasm to learn and life and occupational style changing.

In recent years, education through various means, including radio, television and virtual world has increased; as a result, younger people tend to enter news and information about the virtual world, which has causes to the better attitude with respect to occupational health.

At the same time, the increment of people's age has led to increasing of experience level, knowledge and awareness.

Increase of information and awareness can consequently, influence individual's awareness, attitude and the health performance.

The study of Bawany *et al.* in Pakistan Hairdressers salons showed that the awareness was coordinate with performance and the hairdresser had poor health performance due to lack of education and awareness [10].

By assessing the knowledge, attitude and performance of barbers by Ibrahim, Suggested that knowledge about environment and human health was low. That was against with present study [11]

In Baghiani Moghadam study, in respect to assessment of the Barbers' appropriate performance, against communicable diseases, has reached to 88% [12] that has indicated consistency with our study.

But in contrast result of our study, accordance to Abdullahi *et al.*, and significant relationship between the levels of knowledge, attitude, and performance was not shown and significant relationship between attitude and performance that was in consistency with the results of the current study [13].

Resources Efficiency and environmental conditions on the performance besides having a positive attitude will not increase performance because the facilities and environmental conditions affect the performance. People's beliefs structures should be scientific owing to establish the proper performance [14].

In the present study, six percent gaps were resulted between attitude and performance.

According to the study of Baghiani moghadam, the effectiveness of the Health Belief Model in knowledge, attitude and performance examined, it was proven that by offering the training programs, increasing trend in barbers' health performance was not occurred [12].

Many studies have insisted on standard infection control to the customers and also the correct disposal of waste [15, 16]. Nozari *et. al.* aimed to determine the knowledge, attitude and performance of Shiraz male hairdresser in terms of infection transmission. The level of Barbers' awareness reduced with increasing job experience. The results of the mentioned study contradict with our study [17].

CONCLUSIONS

The present study result showed that the female Barbers' knowledge was good and according to the relationship between knowledge and the parameters such as work experience, age and income situation, the necessity of continuous training, aim to increase knowledge and institutionalization the individuals should be needed. According to the results and the importance of barbering job and requirement to regarding occupational health to maintain the health security and society's health by people working in the profession, the action such as providing the necessary training, training seminars, providing and presenting educational and understandable pamphlets, by educating through multi-media, and acquire information about the performance of health and protect themselves and customers against risks that threaten their health, to increase the Barbers' knowledge and performance to reach a higher level.

ETHICAL ISSUES

Ethical issues (including plagiarism, informed consent, misconduct, data fabrication and/or falsification, double publication and/or submission, redundancy, etc.) have been completely observed by the authors.

CONFLICT OF INTEREST

There are no conflicts of interest.

AUTHORS' CONTRIBUTIONS

All authors equally help to write this manuscript and all of them read and approved the final manuscript.

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