Personal Hygiene & Cultural Differences

Most cultures value personal hygiene, but personal hygiene means different things throughout the world. Americans may assume that bathrooms have towels and toilet paper, while other nationalities see travelers as being responsible for their own supplies. In many cultures, body odor is offensive, but some see it as natural. When interacting with different cultures, it is important to avoid assumptions. Rather, become informed about foreign expectations regarding cleanliness and etiquette.

**Personal Hygiene**

**Introduction:**

Personal hygiene is one of the most effective ways to protect others and ourselves from illness. Hygiene doesn’t just keep a person clean – hygiene helps the skin fight infection, hygiene prevents injuries, hygiene removes substances from the skin that might promote the growth of bacteria and hygiene keeps a person’s mouth and gums healthy. Good personal hygiene makes a person feel more comfortable and relaxed, while boosting their spirits. A person who is clean and well-groomed is pleasant to be around.

While older adults and people with mental illness or mental retardation are capable of taking care of their own personal hygiene needs, many need help. The type of help and the amount of help that is needed will be identified through an assessment. In providing assistance, from the beginning, it is important to communicate to clients two important things:

- He/She is expected to do as much as they can do for him/herself and not be overly dependent on direct care staff persons. Keep in mind however that clients are in a personal care home because they need personal care services, and it is the job of the direct care staff person to help provide these services.
- The client’s preferences of personal hygiene will be respected.
- Maintaining personal hygiene enhances an individual’s physical and emotional well-being. Yet, when it comes to a person becoming dependent on you to keep their skin, nails, hair and mouth clean, he/she can experience a deep loss of independence and self-esteem. With this in mind, remember that self-care is always the goal. Although it may take longer for a client to do a particular task, it is best for the client to do as much as they can for him/herself. For example, someone who is paralyzed from the waist down and still has movement of their arms, can brush their teeth and wash their face. This
keeps the client from becoming completely dependent and losing self-help abilities. It also helps the client to feel capable and it is good exercise.

- The way in which you assist with personal care and hygiene ties to feelings of self-esteem and can reinforce the feeling of being valued. Does the client prefer to take a shower or bath at night or in the morning? Many adults have been doing personal care routines for many years and these rituals have become engrained in daily schedules. Also keep in mind that personal hygiene habits can vary from culture to culture. When you attempt to understand and respect cultural differences related to personal hygiene, you convey respect for the individual. This will help build a positive relationship between you and the client. Providing the option to continue with personal choices and routines will certainly help the client feel comfortable and in control.

**Bathing:**

There are several important reasons why one should bathe your loved one besides the obvious one of cleanliness. Bathing eliminates body odors, and it is cool, refreshing, and relaxing. It stimulates circulation and exercises parts of the body. It also allows the caregiver the opportunity to observe the care recipient’s body for any unusual changes such as rashes, decubitus ulcers (pressure sores), reddened areas, etc. Last, but not least, it provides the opportunity to talk with the care recipient.

There are four types of bathing:

1. Complete bed bath – usually used for the care recipient who is weak or unable to bathe themselves. You will usually receive little or no help from the care recipient.
2. Partial bed bath – given when the care recipient can help themselves a little, but needs help with areas unable to reach. Remember in the complete and partial bed baths to expose only that part of the body you are working on. The rest of the body should be covered with a large bath blanket for warmth and privacy.
3. Tub bath – may need doctor’s okay for tub bath. Care recipient is assisted in and out of tub.
4. Shower – may need doctor’s okay for a shower. For the care recipient who is unsteady or weak, a chair can be used for them to sit on during shower. The type of bath the care recipient receives will depend on the needs of the elder.

Bathing can be an enjoyable and refreshing experience. A bath can be therapeutic by improving blood flow, easing discomfort and helping the resident to relax. Always listen, consider and try to accommodate the wants and wishes of the client’s bathing routine. The following is a list of ways in which you may assist a client with a shower or tub bath, depending on his/her level of independence in bathing:

- Gather all needed supplies ahead of time, prior to getting the client into the bath or shower.
- Make sure the bathroom is a comfortable temperature and the door is closed to give as much privacy as possible.
- Make sure there is a non-slip safety mat (or other surface) on the bottom of the shower or tub to prevent falls.
- Place a shower bench or seat in the shower so the client can sit down while he/she showers.
- Place a nonskid bathmat (not a towel) on the floor in front of the shower or tub.
- Be aware that an older person’s skin is thin and sensitive to high temperatures, irritation and harsh soaps. Be aware of any health problems that may be affected by water temperature.
- Check the water temperature (generally 105 F) and water pressure and make adjustments before the resident gets into the tub or shower. Never turn on hot water once the client is in the tub or shower.
- Be aware that getting into and out of a tub may be difficult for the client and offer assistance if needed.

If a client is unable to enter a tub or shower, but still wants to personally care for his/her hygiene, a good alternative is to provide a washbowl or assist them in using the sink. Providing this alternative allows the person to move at their own pace while giving them the independence of caring for him/herself. Offer the client the option of standing or sitting on a stool or chair.