# Hand Washing Practices in a College Town Environment

Carl P. Borchgrevink, PhD JaeMin Cha, PhD SeungHyun Kim, PhD The School of Hospitality Business Michigan State University

Abstract Many people do not wash their hands when the behavior in which they engage would warrant it. Most research of hand washing practices to date has taken place in high-traffic environments such as airports and public attraction venues. These studies have established a persistent shortcoming and a gender difference in hand washing compliance. Using field observations of 3,749 people in a college town environment, the research described in this article replicates and extends earlier work while identifying potential environmental and demographic predictors of hand washing compliance. Additionally, the authors' research suggests that proper hand washing practices, as recommended by the Centers for Disease Control and Prevention, are not being practiced. Finally, the authors' research raises a question as to the accuracy of earlier measurements of "proper" hand washing practices, suggesting that compliance rates are inflated. The results can help increase hand washing rates for the general public and thus decrease the risk of transmitting disease.

#### Introduction

Many individuals take hand washing for granted and do not consider how essential hand washing is in the prevention of infections and disease. Thus they often fail to wash their hands when they engage in activity that would warrant or require hand washing. Research has established that people generally overstate the degree to which they wash their hands; that women are much more likely to wash their hands than men; and that while hand washing compliance appears to have increased in recent years much room for growth still exists. According to the Centers for Disease Control and Prevention (CDC) (Mead et al., 1999), failing to wash or insufficiently washing hands contributes to almost 50% of all foodborne illness outbreaks. Additionally, Curtis and Cairncross (2003) performed a meta-analysis that suggests that

hand washing with soap can reduce diarrheal disease risks by more than 40% and that hand washing interventions could save one million lives annually. Yet we do not know why people fail to wash their hands at recommended rates and in the proper fashion. Our research attempted to establish predictors of hand washing that can be used to induce higher rates of hand washing compliance.

#### **Current Hand Washing Practices**

Recent surveys establish that U.S. adults claim to wash their hands after using public restrooms at very high rates. In 2009, 94% (N = 2,516) suggested that they consistently wash their hands (QSR Magazine, 2009), while in 2010, 96% (N = 1,006) stated that they always wash their hands after using a public restroom (Harris Interactive, 2010). Self-reports of hand washing behavior have been criticized as unre-

liable as hand washing is a socially desirable activity (Judah, Aunger, Schmidt, Granger, & Curtis, 2009) and observational research suggests these high self-report rates are inflated (Harris Interactive, 2010).

The potential discrepancy aside, it is important to note that hand washing rates have trended upwards in recent years. The American Society for Microbiology and the American Cleaning Institute have studied hand washing practices since 1996. Most recently they reported on hand washing in restrooms at public attractions in five cities across the U.S. The restroom locations included Turner Field in Atlanta, the Museum of Science and Industry and Shedd Aquarium in Chicago, Penn Station and Grand Central Terminal in New York, and the Ferry Terminal Farmers Market in San Francisco (Harris Interactive, 2010). All locations experience high volumes daily, and at the composite level, the 2010 data (N = 6,028) establishes that 85% of the observed adults wash their hands after using a public restroom. This is an increase from 77% in 2007 (N =6,076), which was somewhat lower than the 2005 rate of 83% (N = 6,336). With the exception of the Shedd Aquarium, which has seen a 3% dip in hand washing rates since 2005, all the venues saw a slight upward trend in observed hand washing rates (Harris Interactive, 2010). In 2003, hand washing rates were also observed across six North American airports, averaging 74% compliance (N = 4,046). The highest hand washing rates were obtained in Toronto with 95% while Chicago had the lowest rate at 62% (American Society for Microbiology, 2003).

The research consistently finds a gender bias in hand washing practices. Women wash their hands more frequently than men. In the 2003 study (American Society for Microbiology) it was observed that 83% of women washed their hands after using the restroom, whereas only 74% of the men did so. In a multiyear study across public attractions, women consistently wash more than men across all years and venues (Harris Interactive, 2010). The average observed hand washing rates for women were 93% in 2010, 88% in 2007, and 90% in 2005. The equivalent rates for men were 77%, 66%, and 75%, respectively.

A study of 120 secondary school students (Guinan, McGuckin-Guinan, & Sevareid, 1997) found that 58% of female students and 48% of male students washed their hands after using the restroom, although only 28% of the female students and 8% of the male students used soap. In a university campus public restroom study (Johnson, Sholoscky, Gabello, Ragni, & Ogonosky, 2003), 61% of women and 37% of men (N = 175) were observed washing their hands, while the hand washing rate climbed to 97% for women and fell to 35% of men when a sign was introduced to encourage hand washing. Similarly, in a British 32-day study of highway service station restrooms (N = 198,000) that observed entry and soap use with electronic sensors, it was found that 65% of women and 32% of men washed their hands, but that the hand washing rate increased to as much as 71% for women and 35% for men when messages designed to encourage hand washing were displayed using electronic dot matrix screens (Judah et al., 2009).

A study of the hand washing practices of university students living in a dormitory found that women wash their hands after urinating 69% of the time and after bowel movements 84% of the time, whereas the corresponding figures for males were 43% and 78% (Thumma, Aiello, & Foxman, 2008). In a study of restaurant food workers (Green et al., 2006), food handlers washed their hands only 32% of the time when their behaviors made such hand washing required.

A review of the literature on foodborne disease outbreaks from 1975 to 1998 identified 81 foodborne disease outbreaks involving 14,712 people within which 93% of the foodborne outbreaks involved infected food workers transmitting pathogens to the food with their unwashed hands (Guzewich & Ross, 1999). An observation of 80 women in a bar bathroom (Hayes, 2002) found that only 40% washed their hands; when the researcher engaged the subject and modeled hand washing, the hand washing rate increased to 56%, while it dropped to 27%

when the researcher appeared to be simply talking on her cell phone. This research also noted that the female subjects were less likely to wash their hands later in the night than earlier in the evening (r = -.44, p < .01).

It is evident from the reviewed research that room for improvement exists in hand washing practices. Additional research is needed to further understand how and why hand washing rates differ and if such rates can be influenced by environmental factors within the restroom. Gender is associated with marked differences in hand washing rates. Are other demographic variables such as age also associated with hand washing rates? Furthermore, evidence exists that environmental variables such as signage and posters influence hand washing rates and other health-related behaviors (Etter & Laszlo, 2005; Judah et al., 2009). Do other environmental variables, such as sink conditions and type of faucet impact hand washing rates? Does the hand washing rate on campus differ from the rate off campus?

It is unclear from the reviewed literature whether the various reported rates of hand washing reflect hand washing with soap as recommended by the CDC or if the rates incorporate practices somewhat inconsistent with the established recommendations. As such, our study used three measures of hand washing, defined as 1) no washing—leaving the restroom without washing or rinsing hands, 2) attempted washing-wetting hands but not applying soap, and 3) washing hands with soap, in addition to measuring the duration of washing. This added distinction is important because Burton and co-authors (2011) reported that washing with soap and water is more effective at removing fecal bacteria from hands than washing with water alone.

#### Methods

#### **Participants and Procedures**

Direct observations of hand washing behaviors were conducted by 12 research assistants in restrooms located across a college town. Observers were instructed to be unobtrusive and disguise their observation of hand washing behaviors. To ensure this and ensure accurate measurement and coding consistency, each of the observers met researchers individually for training and attended training meetings as a group.

All observations were recorded according to a standard coding form. The coding form consisted of the subject ID, date, subject's age group, observation time, gender, hand washing behaviors, the type and availability of drying mechanisms (i.e., not available, hot air, paper towel, or both), location of restrooms (off campus versus on campus), type of faucet (standard faucet versus motion detection), the cleanliness of sink conditions, and availability of hand washing signage.

Washing behaviors were recorded into three categories: no washing (leaving the restroom without washing or rinsing their hands), attempted hand washing (wetting hands without using soap), and washing hands with soap. Observers also discreetly measured the total length of time in terms of the number of seconds subjects' hands were placed under running water during washing, lathering, and rinsing. The time of observation was collected and nominal time categories were formed for the purpose of analyses. Due to the unobtrusive nature of our observations, the subject's age group was estimated using the trained observers' subjective evaluations and the subject was placed into one of two groups: college age or younger and older than college age. The cleanliness of sink conditions had three categories including dirty, reasonable, and clean, which was also based on the subjective evaluation of observers. The presence of a hand washing sign was added to the coding form later based on observer feedback.

#### Statistical Analysis

Descriptive data were compiled and further analyzed using Chi-square analysis and ANOVA. Specifically, Chi-square analysis was used to identify statistically significant differences in subjects' demographic variables, environmental variables in the restrooms, and among hand washing behaviors. ANOVA was used to establish mean differences in the length of time hands were placed under running water across the above specified variables. Kappa and paired t-test statistics were calculated, using a subsample (n = 90) to evaluate inter-rater reliability.

#### Results

#### **Inter-Rater Reliability**

Evaluation of inter-rater agreement is an important step in ensuring reliability in observational studies, especially when studies involve multiple observers. We selected four different restrooms (n = 44, located in two off-campus restrooms; and n = 46, located in two on-campus restrooms) to determine the inter-rater reliability among observers. The observers agreed 100% on the environmental variables. For the two dependent variables, the time spent washing time and other washing behaviors, pairedsamples t-tests (Fleiss, 1981), and Cohen's Kappa (Cohen, 1960) were used. A Kappa statistic of more than .8, more than .6, and more than .4 is considered to have "almost perfect," "substantial," and "moderate" agreement, respectively (Landis & Koch, 1971). Excellent inter-rater reliability was demonstrated as indicated by nonsignificant paired t-test result in estimating washing time (p > .01) and Kappa of .89 in evaluating washing behaviors.

#### Characteristics of Sample and Overall Findings

Table 1 presents characteristics of the sample and observation settings. Of the 3,749 subjects observed, approximately 54% of observations took place in restrooms located off campus. Sixty-two percent of observations took place in the afternoon, followed by evening/night (23.6%) and morning (14.4%). Of all subjects, 60.5% of the observed subjects were women. About 62% (61.6%) of the subjects were estimated as college age or younger, with the remainder estimated to be older than college. Nearly all restrooms had a mechanism for drying hands (98.7%). About 64% of the restrooms in the study contained signs encouraging hand washing. Seventy-seven percent of the restrooms were equipped with a standard faucet while 22.9% had motion detection faucets.

Overall, 66.9% of the subjects used soap when washing their hands. Of these, 1.2% did not dry their hands, but left the restrooms with wet hands. About 23% attempted to wash their hands, that is, they wet their hands but did not use soap. A total of 10.3% did not wash their hands at all after using the restroom. CDC (2012) recommends that people should rub their soaped hands for 15 to 20 seconds before rinsing thoroughly. Our measure of duration included the length of time placed under running water while subjects were washing, rubbing, and rinsing their hands. Nonetheless, as shown in Table 2, only 5% or so spent more than 15 seconds in combined washing, rubbing, and rinsing of their hands.

TABLE 1

Characteristics of Sample and Restroom Settings (N = 3,749)

Variables	п	%
Observation time		
Morning	538	14.4
Afternoon	2,326	62.0
Evening/night	885	23.6
Gender	est.	
Male	1,479	39.5
Female	2,270	60.5
Age		
College group and younger than college group	2,310	61.6
Older than college group	1,439	38.4
Drying		,
Not available	47	1.3
Only paper	2,799	74.7
Only air dryer	331	8.8
Both paper and air dryer	572	15.3
Faucet		
Standard faucet	2,889	77.1
Motion detection	860	22.9
Sink condition		
Dirty	219	5.9
Reasonable	1,779	47.5
Clean	1,750	46.7
Location		
On campus	1,755	46.8
Off campus	1,994	53.2
Sign		
Sign	1,548	63.7
No sign	882	36.3

#### **Results From Chi-Square Analysis**

The Chi-square analysis revealed statistically significant differences in hand washing behaviors across time of observation, gender, age, sink condition, and hand washing signage (Table 3). For example, 12.4% observed during evenings did not wash their hands while the morning and afternoon rates of leaving the restroom without attempting to wash were 8.6% and 9.4%, respectively. Subjects washed their hands significantly more with soap during mornings (70.6%) than during afternoons (66.4%) and evenings (67%). The gender difference was confirmed with women using soap and engaging in proper hand washing behavior significantly

more (77.9%) than men (50.3%). About 7% of the women and 14.6% of the men did not wash their hands at all, while 15.1% of the women and 35.1% of the men simply wet their hands with water. Those estimated to be older than college (70.3%) washed their hands with soap significantly more than the college age and younger group (64.8%).

When restrooms contained hand washing signs, subjects used soap more (68.5%) than subjects in restrooms that had no such signs (60.5%). Sink cleanliness influenced hand washing behaviors as well. When sinks were clean, 73.9% washed their hands using soap, while the rate for reasonably clean and dirty sinks was 61.2% and 59.4%, respectively. No

TABLE 2

## Overall Hand Washing Behavior and Length of Hand Washing Time (N = 3,749)

Variables	п	%
Washing behavior	·	
Not washing	384	10.3
Wetting hands without soap	856	22.8
Washing hands with soap	2,509	66.9
Length of hand washing time	72	
0 seconds	384	10.3
1-4 second(s)	824	22.0
5–8 seconds	1,432	38.2
9-14 seconds	911	24.2
15 seconds or longer	198	5.3

#### TABLE 3

## Chi-Square Test: Comparison of Hand Washing Behavior by Sample Demographics and Restroom Settings (N = 3,749)

Variables	Not Washing	Wetting Hands Without Soap	Washing With Soap	χ²
	10.3% (n = 384)	22.8% (n = 856) %	66.9% (n = 2,509)	
	%			
Observation time				
Morning	8.6	20.8	70.6	
Afternoon	9.4	24.2	66.4	
Evening/night	12.4	20.6	67.0	
Gender 12.4 20.0 07.0				
Male	14.6	35.1	50.3	
Female	7.1	15.1	77.9	
Age				
College group and younger than college group	10.6	24.6	64.8	
Older than college group	9.7	20.0	70.3	
Faucet				
Standard faucet	9.8	22.9	67.3	
Motion detection	10.8	23.0	66.2	
Sink condition				
Dirty	19.6	21.0	59.4	
Reasonable	10.7	28.1	61.2	
Clean	8.1	17.9	73.9	1
Location				
On campus	10.3	24.3	65.4	
Off campus	9.7	21.6	68.6	
Sign				
Sign	9.7	21.7	68.5	
No sign	10.7	28.8	60.5	

statistically significant differences in subjects' hand washing behavior were found across faucet type (standard faucet versus motion detection) or restroom location (on campus versus off campus).

#### **Results From ANOVA**

Multi-way ANOVA was conducted to evaluate the mean differences among identified factors in terms that may influence the length of washing time (Table 4). Statistically significant differences were found for gender, age group, type of faucet, sink condition, and hand washing signage. The average washing time for men and women, although short for both, was 6.27 seconds for men and 7.07 seconds for women. The gender effect persists. The age group older than college spent significantly more time washing their hands (mean = 6.93 seconds) than did college group and younger than college group (mean = 6.48 seconds). The presence of a sign also influenced washing time; the mean score in the presence of a sign was 7.08 seconds and 6.50 seconds without. Subjects spent significantly more time washing their hands when the sink condition was clean (mean = 7.20 seconds), compared to when the sink appeared reasonably clean (mean = 6.36 seconds) or dirty (mean = 6.16)seconds). No significant differences in hand washing time were found across time of observation or restroom locations.

#### Discussion

Hand washing is the most effective thing one can do to reduce the spread of infectious diseases according to CDC (CDC, 2012; Mead et al., 1999). Our study provided detailed information about how long and in what environments different groups engaged in various hand washing behaviors. While earlier research reported that not all wash their hands, prior studies have not identified factors associated with proper hand washing behaviors. Additionally, previous studies did not clearly distinguish between washing with and without soap. Our study recognizes the importance of environmental factors that promote proper hand washing behaviors. To our knowledge, our study was one of the first studies to focus on hand washing behaviors and the length of time spent washing while incorporating environmental factors and the time of observation.

The observed hand washing behaviors and the length of time washing hands relate differently to different factors. Our study supports earlier work in observing that men need more encouragement than women to engage in proper hand washing behaviors, although most men and women do wash their hands using soap. Nonetheless, the percentages who simply wet their hands was significantly higher for men (35.1%) than for women (15.1%).

While our study was not specifically designed to test for the intervention effect of a hand washing sign, the study did find that the presence of a sign influenced both hand washing behaviors and the length of washing time. This is an important finding as a high percentage of people fail to wash their hands properly, and signs that include messages highlighting correct hand washing or reminders to use soap may increase compliance. It appears that this kind of explicit reminder may be particularly useful in men's restrooms, given that more than one-third of men simply wet their hands without using soap.

In previous studies the automated and sequenced phases of the device/sink resulted in significant improvement in hand washing practices (Larson, Bryan, Adler, Lee & Blane, 1997; Larson, McGeer, & Quiaishi, 1991). Our study showed that the type of faucet itself (standard faucet versus motion detection) did not impact hand washing behaviors. Care must be taken in the interpretation of washing time, as it is possible to equate washing time with the motion-detected dispensing of water, much as our study did in terms of manual water flow.

More importantly, the findings of our study showed that it is important to maintain clean sink conditions, as clean sinks promoted proper hand washing procedures as well as increased length of time washing hands. When sinks are dirty, some may choose not to wash their hands, despite knowing they should. Studying the effect of time of day on hand washing behavior, a relatively new research focus, showed that hand washing generally decreased as the evening progressed.

The most important findings of our research relate to the distinctions among hand washing behaviors and the length of time hands were washed. Specifically, less than 6% of the sample approached the recommended hand washing duration. Furthermore, our study identified that a large proportion of subjects

TABLE 4

### Multi-Way ANOVA: Hand Washing Time by Demographics and Restroom Settings (N = 3,749)

Variables	Hand Washing Time Mean (Seconds)	F	η²
Observation time		.92	.022
Morning	6.50	- 8	
Afternoon	6.81		
Evening/night	6.77		
Gender		25.21*	.082
Male	6.27		
Female	7.07		
Age		8.14*	.058
College group and younger than college group	6.48		
Older than college group	6.93		
Faucet		49.29*	.114
Standard faucet	6.45		
Motion detection	7.74	4.5	
Sink condition		15.76*	.091
Dirty	6.16		
Reasonable	6.36		
Clean	7.20		
Location		2.23	.024
On campus	6.63		
Off campus	6.86		
Sign		7.97*	.057
Sign	7.08		
No sign	6.50		

Note. Total mean = 6.75 (SD = 4.76), mean = 7.52 (SD = 4.41). \*p < .01.

engaged in hand washing behavior that did not involve the use of soap. It is interesting to note that if the proportion of people who were observed using soap when washing their hands were combined with those who only used water, the hand washing rates reach the higher levels reported in other studies. This raises the question of whether hand washing compliance rates have been inflated by way of definition in earlier work.

#### **Limitations and Future Research**

While the data from our study are informative, it should be noted that observations only took place in one college town environment. Care should be therefore taken in generalizing the findings.

As an alternative to the self-reporting method, direct and unobtrusive observa-

tions of hand washing were used as a way to enhance reliability and validity. It should be recognized, however, that even an apparent unobtrusive observation may influence hand washing behaviors, as the simple presence of others in a restroom may lead to increased compliance (Bittner, Rich, Turner, & Arnold, 2002; Drankiewicz & Dundes, 2003; Edwards et al., 2002; Nalbone, Lee, Suroviak, & Lannon, 2005).

While our study attempted to investigate the role that a hand washing sign would have on hand washing behavior, the subjects were not asked whether they recalled seeing the sign or whether they could recall the messages. Future research should consider sign content, design, and placement.

In our study the act of drying was measured. Approximately 2% of subjects who

attempted to wash their hands (i.e., wetting hands without soap) or washed hands with soap did not dry their hands at all, but we do not know if those who attempted to dry their hands achieved dry hands. This would be good to include in future studies as studies have demonstrated that the transfer of microorganisms is more likely to occur from wet skin than from dry skin (Mackintosh, & Hoffman, 1984; Merry, Millder, Findon, Webster, & Neff, 2001; Patrick, Miller, & Findon, 1997).

#### Conclusion

Our study replicated and extended earlier work on hand washing practices. While past studies have focused on high-traffic venues such as transportation hubs and stadiums, our study focused on hand washing behaviors in a college town environment. Field observations by trained observers in a variety of restrooms provided a sample of 3,739 people who were unobtrusively watched to note their hand washing behaviors.

The findings were consistent with earlier research in that a significant gender bias was found. Women wash their hands significantly more often, use soap more often, and wash their hands somewhat longer than men. Both men and women fell far short, however, of CDC-recommended hand washing durations, averaging 6.27 and 7.07 seconds, respectively. Only 5.3% of the sample washed their hands for 15 seconds or more. Considering the definition of hand washing and the careful training of observers, this particular finding raises the specter of significant inflation in earlier reported hand washing compliance rates. Future studies need to measure hand washing compliance carefully.

Additionally, our study established that restroom environmental conditions and signage are important. Specifically, hand washing compliance was greater when restroom sinks were clean and when signs encouraging hand washing were posted.

Hand washing compliance and practices as reported in this and previous studies fall short of the ideal. The public needs to be continuously encouraged to engage in proper hand washing practices. In addition, careful attention to restroom environmental conditions and signage may help increase compliance. Given the established gender bias, consideration should be given to the content of the messages targeting men and women. Perhaps men and women would respond differently to gender-targeted messages.

Acknowledgements: An earlier, work-in-progress, version of this manuscript was presented at the 2011 International Council on Hotel, Restaurant, and Institutional Education Annual Conference.

Corresponding Author: Carl P. Borchgrevink, Associate Professor, The School of Hospitality Business, Michigan State University, 645 North Shaw Lane, 233 Eppley Center, East Lansing, MI 48824. E-mail: carlb@bus.msu.edu.

#### References

American Society for Microbiology. (2003). Another U.S. airport travel hazard—dirty hands. Retrieved from http://www.eurekalert.org/pub\_releases/2003-09/asfm-aua091103.php

Bittner, M., Rich, E., Turner, P., & Arnold, W. (2002). Limited impact of sustained simple feedback based on soap and paper towel consumption on the frequency of hand washing in an adult intensive care unit. *Infection Control Hospital Epidemiology*, 23(3), 120–126.

Burton, M., Cobb, E., Donachie, P., Judah, G., Curtis, V., & Schmidt, W. (2011). The effect of hand washing with water or soap on bacterial contamination of hands. *International Journal of Environmental Research and Public Health*, 8(1), 97–104.

Centers for Disease Control and Prevention. (2012). Hand washing: Clean hands save lives. Retrieved from http://www.cdc.gov/handwashing/

Cohen, J. (1960). A coefficient of agreement for nominal scales. Educational Psychology Measurement, 20(1), 37–46.

Curtis, V., & Cairncross, S. (2003). Effects of washing hands with soap on diarrhoea risk in the community: A systematic review. *The Lancet Infectious Diseases*, 3(5), 275–281.

Drankiewicz, D., & Dundes, L. (2003). Hand washing among female college students. *American Journal of Infection Control*, 31(2), 67–71.

Edwards, D., Monk-Turner, E., Poorman, S., Rushing, M., Warren, S., & Willie, J. (2002). Predictors of hand washing behavior. Social Behavior and Personality: An International Journal, 30(8), 751–756.

Etter, J., & Laszlo, E. (2005). Evaluation of a poster campaign against passive smoking for world no-tobacco day. *Patient Education and Counseling*, 57(2), 190–198.

Fleiss, J. (1981). The measurement of interrater agreement. In *Statistical methods for rates and proportions* (pp. 212–236). New York: John Wiley & Sons.

Green, L.R., Selman, C.A., Radke, V., Ripley, D., Mack, J.C., Reimann, D.W., Stigger, T., Motsinger, M., & Bushnell, L. (2006). Food worker hand washing practices: An observation study. *Journal of Food Protection*, 69(10), 2417–2423.

Guinan, M.E., McGuckin-Guinan, M., & Sevareid, A. (1997). Who washes hands after using the bathroom? *American Journal of Infection Control*, 25(5), 424–525.

Guzewich, J., & Ross, M.P. (1999). Evaluation of risk related to microbiological contamination of ready-to-eat foods by food preparation workers and the effectiveness of interventions to minimize those risks. Silver Spring, MD: Food and Drug Administration, Center for Food Safety and Applied Nutrition. Retrieved from http://www.fda.gov/Food/FoodSafety/RetailFoodProtection/ucm210138.htm

Harris Interactive. (2010). Survey of hand washing behavior (trended):
Prepared for the American Microbiology Society and the American
Cleaning Institute. Retrieved from http://www.microbeworld.org/
images/stories/washup/2010\_handwashing\_behavior\_survey.pdf

continued on page 24

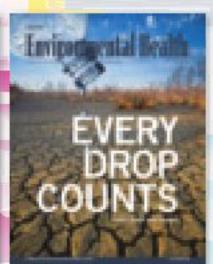
#### References continued from page 23

- Hayes, M.C. (2002). Hand washing behavior of women in public restrooms. Missouri Western State University. Retrieved from http:// clearinghouse.missouriwestern.edu/manuscripts/371.php
- Johnson, H.D., Sholoscky, D., Gabello, K.L., Ragni, R.V., & Ogonosky, N.M. (2003). Gender differences in hand washing behavior associated with visual behavior prompts. *Perceptual and Motor Skills*, 97(3), 805–810.
- Judah, G., Aunger, R., Schmidt, W., Granger, S., & Curtis, V. (2009). Experimental pretesting of hand-washing interventions. American Journal of Public Health, 99(S2), 405–411.
- Landis, J., & Koch, G. (1977). The measurement of observer agreement for categorical data. *Biometrics*, 33(1), 159–174.
- Larson, E., Bryan, J., Adler, L.M., & Blane, C. (1997). A multifaceted approach to changing hand washing behavior. *American Journal of Infection Control*, 25(1), 3–10.
- Larson, E., McGeer, A., & Quiaishi, Z. (1991). Effect of an automated sink on hand washing practices and attitudes in high-risk units. *Infection Control Hospital Epidemiology*, 12(7), 422–428.
- Mackintosh, C., & Hoffman, P. (1984). An extended model for transfer of microorganisms via the hands; differences between organisms and the effect of alcohol disinfection. *Journal of Hygiene*, 92(3), 345–355.

- Mead, P.S., Slutsker, L., Dietz, V., McCaig, L.F., Bresee, J.S., Shapiro, C., Griffin, P.M., & Tauxe, R.V. (1999). Food related death and illness in the United States. *Emerging Infectious Diseases*, 5(5), 607–625.
- Merry, A., Millder, E., Findon, G., Webster, C., & Neff, S. (2001). Touch contamination levels during anaesthetic procedures and their relationship to hand hygiene procedures: A clinical audit. *British Journal of Anaesthesia*, 87(2), 291–294.
- Nalbone, P., Lee, K., Suroviak, A., & Lannon, J. (2005). The effects of social norms on male hygiene. *Individual Differences Research*, 3(3), 171–176.
- Patrick, D., Miller, T., & Findon, G. (1997). Residual moisture determines the level of touch-contact associated transfer following hand washing. *Epidemiology and Infection*, 119(3), 319–325.
- QSR Magazine. (2009). Are Americans washing their hands? Retrieved from http://www.qsrmagazine.com/news/are-americans-washing-their-hands
- Thumma, J., Aiello, A.E., & Foxman, B. (2008). The association between hand washing practices and illness symptoms among college students living in a university dormitory. *American Journal of Infection Control*, 37(1), 70–72.

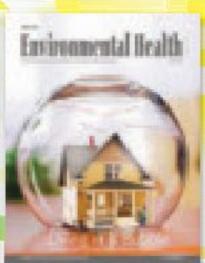


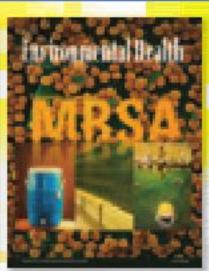












## Showcase Environmental Health and All It Encompasses

For many years NEHA's Journal of Environmental Health has been adorned by visually-stunning and creative covers portraying a wide variety of environmental health topics. You can now own these amazing cover images in poster size. Use the walls of your department and office to display to visitors, your boss and staff, and the public what environmental health encompasses and your pride in your profession.

For more information and to place your order:

- → Go to neha.org/JEH
- → Contact Kristen Ruby at kruby@neha.org or 303.756.9090, ext. 341

24x36"

18x24"

2

8x12"

1

- Three different frame-able sizes\*
- · Glossy, high-quality prints
- Select covers from 2005 to the present

\*Framing available on request for an extra fee.

Special Offer: Get a free 8x12" print of any cover with the order of at least one poster.