



ISLAMIC VALUES AND PERSONAL HYGIENE AWARENESS AMONG MUSLIM SINGLE GIRLS IN MINNA METROPOLIS, NIGER STATE, NIGERIA

Hussaini Muhammad

Department of Islamic Studies
Umaru Sanda Ahmadu College of Education, Minna, Nigeria

Email: your-email@example.com

ABSTRACT

*This study examined the influence of Islamic values on personal hygiene awareness and practices among Muslim single girls in Minna Metropolis, Niger State. The study focused on adolescents aged 12–25 years, assessing their awareness of Islamic teachings on cleanliness, purification, and modesty, as well as their actual hygiene practices. A descriptive survey design was adopted, and data were analyzed using simple percentages and frequency distributions. The findings revealed that Islamic values significantly influenced hygiene awareness among respondents, with a majority demonstrating strong knowledge of Islamic teachings on cleanliness (*tahārah*), *wuḍūʻ*, *ghusl*, and modesty (*ḥayāʻ*). However, environmental challenges such as inadequate water supply, poor sanitation facilities, and limited access to hygiene materials hinder effective practice. The study concludes that while Islamic values strongly enhance hygiene awareness, practical implementation requires support from families, schools, religious institutions, and government agencies.*

Keywords: *Islamic values, hygiene, Muslim girls, purification, Minna, adolescence*

1.0 INTRODUCTION

Cleanliness occupies a central position in Islamic teachings and is regarded as an essential component of faith. The Prophet Muhammad (SAW) emphasized this by stating “*al-ṭuhūru shaṭru al-īmān*” (cleanliness is half of faith) (*Ṣaḥīḥ* Muslim, Book 2, Hadith 1). In Islamic jurisprudence, personal hygiene (*tahārah*) transcends mere physical cleanliness and encompasses spiritual purification, thereby influencing a Muslim’s acts of worship, social interactions, moral conduct, and personal dignity (Al-Ghazali, n.d.; Al-Qaradawi, 1995).

For Muslim single girls, particularly those transitioning through adolescence into early adulthood, personal hygiene plays a significant role in shaping identity, self-esteem, social acceptance, and religious commitment. This developmental stage is characterized by complex physical, emotional,



and social changes, requiring adherence to Islamic guidelines on cleanliness, modesty (*ḥayāʾ*), menstruation (*ḥayḍ*), ritual purification (*ghuṣl and wuḍūʾ*), dress code, and interpersonal conduct (Bandura, 1977; Rosenstock, 1974).

Minna Metropolis of Niger State is an urban area with a predominantly Muslim population. Muslim single girls are influenced by a dynamic interaction of Islamic teachings, formal (Western) education, peer relationships, socio-economic conditions, and modern media exposure. These influences collectively shape their awareness and practice of personal hygiene (Bandura, 1977). Consequently, it becomes imperative to empirically examine the extent to which Islamic values inform and regulate their hygiene behaviour.

Despite the presence of Islamic educational institutions, including Islamiyyah schools, mosques, and religious programs, many Muslim single girls continue to experience difficulties in maintaining appropriate hygiene practices. These challenges are particularly evident in areas such as menstrual hygiene management, body and clothing cleanliness, and maintenance of ritual purity, especially within the constraints of urban living, including limited water access, demanding school schedules, and evolving social norms (UNICEF, 2020).

Therefore, this study seeks to examine the influence of Islamic values on personal hygiene awareness among Muslim single girls in Minna Metropolis, with a view to enhancing both religious adherence and public health outcomes.

Although Islam provides comprehensive and well-defined guidelines on personal hygiene, a noticeable gap exists between these teachings and their practical application among Muslim single girls in Minna Metropolis. Several interrelated challenges contribute to this situation (Al-Ghazali, n.d.; UNICEF, 2020).

Firstly, there is a limited understanding of key Islamic hygiene principles, particularly those related to menstruation, ritual purification (*ghuṣl*), and modest grooming practices (Al-Qaradawi, 1995). Secondly, the pressures associated with urban lifestyles like academic demands, time constraints, and environmental limitations-often hinder consistent hygiene practices (Rosenstock, 1974).



Thirdly, the growing influence of social media and peer groups introduces alternative standards of beauty and hygiene that may conflict with Islamic values (Bandura, 1977).

In addition, inadequate sanitation facilities in certain schools and public environments restrict the ability of girls to maintain proper hygiene (UNICEF, 2020). Cultural misconceptions surrounding menstruation, purity, and modesty further complicate adherence to authentic Islamic teachings (Al-Ghazali, n.d.). Moreover, variations in family background and religious upbringing contribute to inconsistencies in hygiene awareness and practice (Bandura, 1977).

These issues raise critical concerns regarding the extent to which Islamic values effectively influence personal hygiene awareness and behaviour among Muslim single girls. Consequently, there is a need for a systematic empirical investigation to assess their level of knowledge, actual practices, prevailing challenges, and the role of Islamic teachings in shaping their hygiene behaviour (Rosenstock, 1974).

Research Questions

This study is guided by the following research questions:

1. To what extent are Muslim single girls in Minna Metropolis aware of Islamic teachings on personal hygiene?
2. How do Islamic values influence the daily hygiene practices of Muslim single girls?
3. What are the common personal hygiene challenges faced by Muslim single girls in Minna Metropolis?
4. Does the level of Islamic education affect hygiene awareness among Muslim single girls?
5. What role do parents, schools, and religious institutions play in promoting hygiene awareness among Muslim single girls?

The main objective of this study is to examine the influence of Islamic values on personal hygiene awareness among Muslim single girls in Minna Metropolis of Niger State.

The specific objectives are to:

1. Assess the level of awareness of Islamic hygiene principles among Muslim single girls.
2. Determine how Islamic values shape their daily hygiene practices.
3. Identify major hygiene-related challenges among Muslim single girls.
4. Examine the influence of Islamic education on hygiene awareness.



5. Evaluate the role of family, schools, and religious institutions in promoting personal hygiene.

To achieve the objectives of the study, the following hypotheses are formulated:

Null Hypotheses (H_0)

- **$H_{0\ 1}$** : Islamic values have no significant influence on the personal hygiene awareness of Muslim single girls in Minna Metropolis.
- **$H_{0\ 2}$** : There is no significant relationship between the level of Islamic education and

This study holds significant value for various stakeholders within both educational and religious contexts.

Firstly, it is beneficial to Muslim single girls as it enhances their understanding of Islamic hygiene principles and promotes proper hygienic practices. This, in turn, contributes to improved self-confidence, personal dignity, and spiritual well-being.

Secondly, the study provides insight for parents and guardians by helping them understand the hygiene needs and challenges faced by adolescent girls. It also serves as a guide for fostering effective Islamic upbringing, particularly in areas related to cleanliness, modesty, and personal development.

Furthermore, the study is relevant to religious institutions, including mosques and Islamiyyah schools. It supports Imams and Islamic scholars in strengthening hygiene education based on authentic Islamic teachings, thereby reinforcing the integration of religious values with everyday practices.

In addition, educational institutions will benefit from the findings by gaining awareness of the importance of providing girl-friendly hygiene facilities and incorporating health education into school programs. This can improve both academic participation and general well-being among students.



Finally, the study contributes to the broader Muslim community by promoting the development of healthy, morally conscious young women. It also supports public health efforts by encouraging practices that reduce preventable infections and poor hygiene behaviours.

This study is geographically limited to Minna Metropolis in Niger State, Nigeria. The target population comprises Muslim single girls aged between 12 and 25 years residing within this area.

The study focuses specifically on key thematic areas, including Islamic values, hygiene awareness, hygiene practices, menstrual hygiene management, ritual purification, modesty, and environmental influences on hygiene behaviour.

However, the study is delimited in scope as it does not include married women, non-Muslims, or individuals residing outside Minna Metropolis. These limitations are necessary to ensure specificity, depth of analysis, and relevance to the research objectives.

2.0 LITERATURE REVIEW

2.1 Operational Definition of Terms

For clarity and consistency, the following key terms are operationally defined as used in this study:

Islamic Values

Refers to the teachings derived from the Qur'an and the *Sunnah* of the Prophet Muhammad (SAW), as well as Islamic jurisprudence (*Fiqh*), particularly those relating to cleanliness, modesty, and purification.

Personal Hygiene

Refers to daily practices undertaken to maintain cleanliness of the body, clothing, and immediate environment. This includes bathing, oral hygiene, grooming, and menstrual hygiene management.

Muslim Single Girls

Refers to unmarried female Muslims aged between 12 and 25 years residing in Minna Metropolis.

Hygiene Awareness

Refers to the level of knowledge and understanding of appropriate hygiene practices from both Islamic and general health perspectives.



Minna Metropolis

Refers to the urban areas within Minna, including Bosso, Chanchaga, and surrounding districts in Niger State.

2.2 Conceptual Framework: Islamic Values and Hygiene Behaviour

Islamic values represent a comprehensive system of moral, ethical, and spiritual principles derived from the Qur'an, the Sunnah, and Islamic jurisprudence (*Fiqh*). These values serve as a guiding framework that shapes individual behaviour, social interactions, and daily life practices among Muslims. Within the context of personal hygiene, several key Islamic concepts are particularly relevant:

Tahārah (Purification)

This is a foundational principle in Islam that encompasses both physical and spiritual cleanliness. It includes practices such as *wuḍū'* (ablution), *ghusl* (ritual bathing), and maintaining environmental cleanliness, all of which are prerequisites for valid acts of worship.

Hayā' (Modesty)

This value promotes self-respect, decency, and consciousness of one's appearance. It encourages proper care of the body, cleanliness of clothing, and adherence to socially and religiously acceptable standards of behaviour.

Discipline and Accountability

Islam emphasizes personal responsibility for one's body and overall well-being. Regular hygiene practices are seen as acts of discipline that reflect obedience to divine guidance.

'Izzah (Dignity and Self-Respect)

Personal hygiene is closely linked to a Muslim girl's sense of honour and social identity. Maintaining cleanliness enhances dignity and positively influences how individuals are perceived within society. In summary, Islamic values provide a holistic and integrated framework that influences hygiene awareness and behaviour. These values not only guide personal conduct but also interact with social, educational, and environmental factors in shaping the hygiene practices of Muslim single girls.

Concept of Personal Hygiene

Personal hygiene refers to a range of daily practices aimed at maintaining bodily cleanliness, promoting health, and preserving personal dignity. These practices include bathing, oral hygiene,



menstrual hygiene management, hair and skin care, wearing clean clothing, proper waste disposal, and maintaining a clean environment.

Within the Islamic framework, personal hygiene is not merely a health-related activity but a religious obligation that is intrinsically linked to acts of worship, social interactions, and overall well-being. Cleanliness serves as a prerequisite for many religious duties and reflects a Muslim's spiritual consciousness and moral discipline.

Personal Hygiene among Muslim Single Girls

Muslim single girls, particularly those in adolescence and early adulthood, face unique hygiene responsibilities shaped by both biological changes and religious expectations. These responsibilities include managing menstruation in accordance with Islamic guidelines, maintaining modest dressing, controlling body odour, observing ritual purification practices, and ensuring cleanliness in both private and public environments.

In addition, they are expected to maintain hygiene standards in diverse settings such as schools, markets, and other public spaces, often under challenging conditions such as water scarcity or inadequate sanitation facilities.

The level of hygiene awareness among Muslim single girls is influenced by multiple factors, including family upbringing, Islamic education, school environment, peer relationships, media exposure, and socio-economic conditions. These factors interact to shape both knowledge and actual hygiene practices.

Islamic Perspective on Personal Hygiene

Islam strongly emphasizes cleanliness as both a spiritual and physical requirement. The Qur'an highlights the importance of purification, as Allah states: *"Indeed, Allah loves those who are constantly repentant and loves those who purify themselves"* (Qur'an 2:222).

Furthermore, the Prophet Muhammad (SAW) reinforced this principle by stating that cleanliness is half of faith (Ṣaḥīḥ Muslim). These teachings establish hygiene as a core aspect of Islamic life.

Ritual Obligations in Islam

Islam prescribes specific hygiene practices that are obligatory for Muslims. These include:

- *Wuḍū'* (Ablution): A ritual washing performed before daily prayers.



- *Ghusl* (Full-body purification): Required after menstruation and other states of major impurity.
- Maintaining cleanliness of the body, clothing, and environment.
- Use of *siwāk* (tooth-cleaning stick) for oral hygiene.
- Regular grooming practices such as trimming nails and maintaining clean hair.

These obligations provide a structured framework that guides hygiene behaviour, particularly among Muslim single girls who are expected to observe these practices consistently.

Factors influencing Hygiene Awareness among Muslim Girls

Hygiene awareness and practices among Muslim single girls are shaped by several interrelated factors:

Islamic Education

Islamiyyah schools, madrasa systems, and parental religious instruction play a significant role in transmitting knowledge about hygiene from an Islamic perspective.

Cultural Practices

Certain cultural beliefs and traditions may conflict with Islamic teachings, particularly in areas such as menstrual hygiene and purification practices.

Socio-Economic Status

Limited financial resources can restrict access to essential hygiene materials such as sanitary pads, clean water, soap, and appropriate clothing.

Peer influence

Friends and social groups significantly influence grooming habits, attitudes toward cleanliness, and perceptions of acceptable hygiene standards.

Media Exposure

Social media and modern communication platforms introduce both beneficial and potentially misleading hygiene norms, sometimes conflicting with Islamic values.

School Environment

Availability of clean toilets, water supply, privacy, and hygiene education within schools directly affects hygiene practices among students.



2.2 Theoretical framework

This study is anchored on three complementary theoretical perspectives:

2.2.1 Islamic behavioural theory

This theory posits that a Muslim's behaviour is guided by three key elements: belief (*īmān*), knowledge (*‘ilm*), and action (*‘amal*). It explains how internalized Islamic values influence daily practices, including personal hygiene.

2.2.2 Social learning theory

Proposed by Albert Bandura (1977), this theory emphasizes that individuals learn behaviours through observation and imitation. Muslim single girls acquire hygiene habits by observing parents, teachers, peers, and media figures, highlighting the role of the social environment.

2.2.3 Health belief model (HBM)

The Health Belief Model explains how individuals' perceptions of health risks influence their behaviour. In the context of hygiene, factors such as fear of infection, desire for cleanliness, and social acceptance motivate adherence to proper hygiene practices.

2.3 Empirical review

Empirical studies conducted globally and within Nigeria indicate that Islamic values play a significant role in shaping hygiene behaviour among Muslim girls.

Studies carried out in regions such as Kano, Ilorin, Egypt, and Sudan reveal that Muslim girls with strong Islamic educational backgrounds tend to demonstrate higher levels of compliance with both ritual and personal hygiene practices. These findings suggest a positive relationship between religious knowledge and hygiene behaviour.

However, research by organizations such as UNICEF (2020) and other Nigerian scholars highlights persistent challenges in menstrual hygiene management. These challenges include stigma, misinformation, inadequate sanitation facilities, and lack of access to sanitary materials. Additionally, existing studies emphasize the critical role of parents and schools in promoting hygiene awareness. Girls who receive consistent Islamic guidance at home and within educational institutions are more likely to exhibit better hygiene practices.



Urbanization has also introduced new dynamics, as Muslim girls in metropolitan areas face pressures from media influence, busy academic schedules, and exposure to non-Islamic behavioural patterns. These factors can complicate adherence to traditional hygiene practices.

Despite the growing body of literature on hygiene, health, and Islamic teachings, there remains a noticeable gap in context-specific research focusing on how Islamic values influence personal hygiene awareness among Muslim single girls in Minna Metropolis.

Therefore, this study seeks to fill this gap by integrating Islamic ethical principles, adolescent behavioural dynamics, and hygiene practices within the specific socio-cultural context of Minna.

3.0 RESEARCH METHODOLOGY

3.1 Research design

This study adopted a descriptive survey research design. This design is considered appropriate because it enables the collection of data from a defined population in order to describe existing conditions, perceptions, attitudes, and behaviours. The use of this design allows the researcher to:

- Examine the influence of Islamic values on hygiene awareness among respondents.
- Collect quantifiable data from a relatively large sample of Muslim single girls.
- Generalize findings to the broader population within Minna Metropolis.

3.2 Population of the study

The population of the study comprises all Muslim single girls residing in Minna Metropolis, Niger State. The study area includes major districts such as Bosso, Chanchaga, Tunga, Maitumbi, Sauka-Kahuta, Kpakungu, and the Central Business District. The population consists of:

- Senior secondary school students
- Tertiary institution students
- Apprentices and shop attendants
- Islamiyyah school attendees

The estimated population of Muslim single girls within the study area exceeds 10,000.

3.3 Sample size and sampling techniques

A total sample size of 150 respondents was selected for the study. A combination of sampling techniques was employed to ensure representativeness:



Stratified sampling technique

Minna Metropolis was divided into strata based on major districts (e.g., Bosso, Chanchaga, and Kpakungu) to ensure adequate geographical representation.

Simple random sampling technique

Within each stratum, schools, Islamiyyah centres, and communities were randomly selected to minimize selection bias.

Purposive sampling technique

Respondents were selected based on the following criteria:

- Must be female
- Must be Muslim
- Must be unmarried (single)
- Must fall within the age range of 12–25 years

This combination ensured fairness, inclusiveness, and appropriate coverage of the target population.

3.4 Instrument for data collection

The primary instrument used for data collection was a structured questionnaire titled: “Islamic Values and Personal Hygiene Awareness Questionnaire (IVPHAQ)”. The questionnaire was divided into four sections:

- Section A: Demographic Information
- Section B: Islamic values and beliefs related to hygiene
- Section C: Personal hygiene awareness
- Section D: Hygiene practices and challenges

The instrument consisted of close-ended items structured on a Likert scale (Strongly Agree to Strongly Disagree).

3.5 Validity of the instrument

To ensure validity, both content validity and face validity were established. The questionnaire was reviewed by experts in:

- Islamic Studies
- Public Health
- Measurement and Evaluation



3.6 Reliability of the instrument

A pilot study was conducted using 20 Muslim single girls from a community outside the study area (e.g., Paiko). Reliability was tested using Cronbach's Alpha and/or test-retest method. A coefficient of 0.70 and above was considered acceptable.

3.7 Method of data collection

Data collection procedures included:

1. Permission from relevant authorities
2. Use of female research assistant
3. Direct questionnaire administration
4. Time allocation for completion
5. Confidentiality assurance
6. Retrieval of completed questionnaires

Interview sessions were also conducted.

3.8 Method of data analysis

Data were analysed using:

Descriptive statistics: frequency, percentage, tables

Inferential statistics: Chi-square (χ^2) at 0.05 significance level

3.9 Data presentation

A total of 150 questionnaires were distributed; 120 were retrieved, giving an 80% response rate.

4.0 RESULTS, DATA PRESENTATION AND DISCUSSION

4.1 Results and data presentation

4.1.1 Demographic characteristics of respondents

Table 1: Age distribution of respondents

Age Group	Frequency (f)	Percentage (%)
12 – 15	25	20.8%
16 – 18	40	33.3%
19 – 21	30	25.0%
22 – 25	25	20.8%
Total	120	100%

The data in Table 1 indicate that the majority of respondents (33.3%) fall within the age group of 16–18 years. This suggests that a significant proportion of participants are in mid-adolescence, a



developmental stage associated with increased sensitivity to personal hygiene, particularly menstrual hygiene management and body care practices.

4.1.2 Awareness of Islamic values on hygiene

Table 2: Awareness of Islamic values on hygiene

Item	Statement	SA	A	U	D	SD	Agree (%)
1	Islamic teachings encourage cleanliness	60	40	10	5	5	83%
2	I understand wuḍū' and ghusl	55	35	15	10	5	75%
3	My family teaches Islamic hygiene	50	40	15	10	5	75%
4	Modesty guides my appearance	65	35	10	5	5	83%
5	Islam encourages female hygiene	70	35	5	5	5	88%

The results in Table 2 reveal a high level of agreement among respondents regarding the influence of Islamic values on hygiene awareness. Specifically, over 80% of respondents agreed that Islamic teachings promote cleanliness and guide personal appearance through modesty. Additionally, a substantial proportion demonstrated understanding of key purification practices such as *wuḍū'* and *ghusl*. These findings indicate that Islamic teachings are widely recognized and internalized as guiding principles for hygiene behaviour among Muslim single girls in the study area.

4.1.3 Personal hygiene awareness

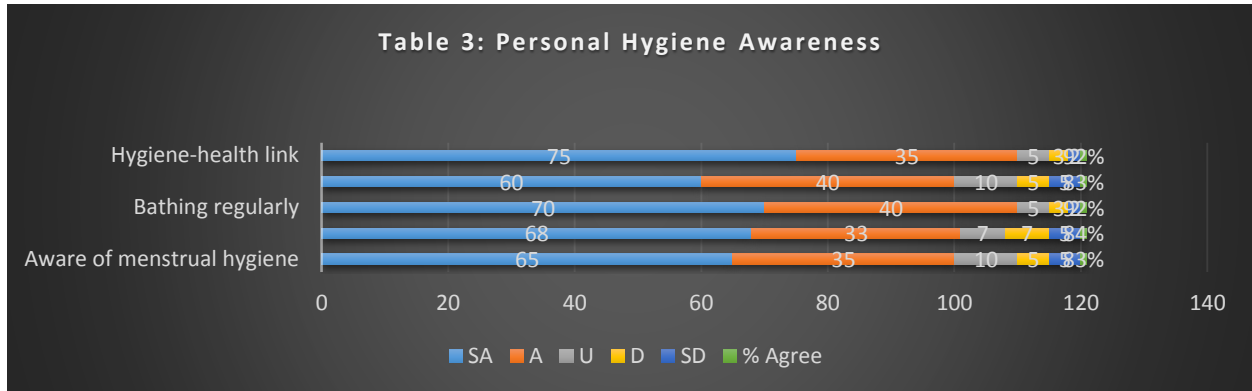
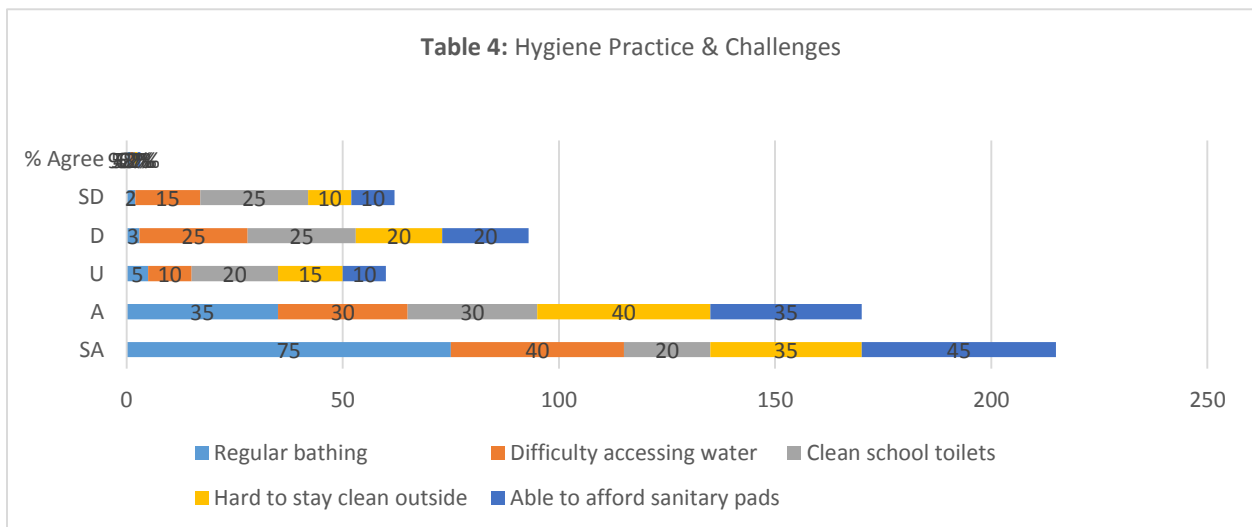


Table 4: Hygiene practice and challenges



However, table 4 above shows that despite this high level of awareness in table 3, several practical challenges were identified. Key among these are water scarcity, inadequate toilet facilities, and poor sanitation conditions, especially within school environments. These factors significantly hinder the consistent application of proper hygiene practices.

4.2 Discussion of Findings

1. *Strong Influence of Islamic Values:* Over 80% of respondents acknowledged that Islamic teachings serve as a major influence on their hygiene awareness and behaviour. This reflects the centrality of cleanliness in Islam, as emphasized in the Prophetic tradition: “cleanliness is half of faith” (Ṣaḥīḥ Muslim, n.d.).
2. *High Awareness with Practice Gaps:* While respondents demonstrated a high level of knowledge regarding hygiene practices, the actual implementation was limited in certain



contexts due to environmental and infrastructural challenges. This gap between knowledge and practice has been widely noted in public health studies (Rosenstock, 1974; WHO, 2019).

3. *Menstrual Hygiene as a Critical Area:* Although awareness of menstrual hygiene is relatively high, access to appropriate materials and facilities remains inadequate for some respondents. This finding is consistent with global reports highlighting menstrual hygiene challenges among adolescent girls in developing regions (UNICEF, 2020).
4. *Environmental Constraints:* Poor sanitation facilities, particularly in schools, and limited access to clean water were identified as major barriers to maintaining proper hygiene. This aligns with existing literature linking inadequate WASH (Water, Sanitation, and Hygiene) infrastructure to poor hygiene outcomes (WHO & UNICEF, 2021).
5. *Role of Family and Institutions:* Family upbringing, Islamic education, and school environments play a crucial role in shaping hygiene awareness and practices among Muslim single girls. This supports earlier findings that social and religious institutions significantly influence behavioural development (Bandura, 1977).

The findings of this study demonstrate that Islamic values significantly influence personal hygiene awareness among Muslim single girls in Minna Metropolis. This aligns with Islamic teachings as emphasized by Prophet Muhammad (SAW), where cleanliness is regarded as an integral part of faith (Ṣaḥīḥ Muslim, n.d.). The high level of awareness observed among respondents supports the assumptions of Islamic Behavioural Theory, which posits that behaviour is shaped by belief (īmān), knowledge (‘ilm), and action (‘amal) (Al-Ghazālī, n.d.). The respondents’ knowledge of hygiene practices such as wuḍū’, ghusl, and modest dressing indicates that Islamic teachings have been effectively transmitted through family and educational structures.

Furthermore, the findings are consistent with the Social Learning Theory of Albert Bandura, which explains that individuals learn behaviours through observation and interaction with their environment (Bandura, 1977). The significant role of parents, schools, and religious institutions in influencing hygiene practices highlights the importance of social context in behavioural development.



Despite the high level of awareness, the study revealed notable gaps between knowledge and practice. This supports the Health Belief Model, which suggests that behaviour is influenced not only by knowledge but also by perceived barriers (Rosenstock, 1974). In this case, environmental challenges such as water scarcity, poor sanitation facilities, and limited access to hygiene materials hinder the effective application of hygiene knowledge.

Additionally, the findings highlight the importance of addressing menstrual hygiene management as a sensitive yet critical aspect of adolescent health. While awareness exists, structural and socio-cultural barriers continue to limit effective practice (UNICEF, 2020). Overall, the study establishes a strong relationship between Islamic upbringing and hygiene awareness among Muslim single girls. However, it also underscores the need for improved infrastructure, targeted education, and supportive environments to translate awareness into consistent hygienic behaviour (WHO & UNICEF, 2021).

5.0 CONCLUSION AND RECOMMENDATIONS

5.1 Conclusion

The findings of this study demonstrate that Islamic values are a significant determinant of personal hygiene awareness and behaviour among Muslim single girls in Minna Metropolis. The teachings of Islam particularly those related to cleanliness, modesty, and purification play a crucial role in shaping how young Muslim girls perceive and practice hygiene in their daily lives.

The study reveals that a high level of awareness exists among respondents regarding Islamic hygiene principles, reflecting the positive influence of family upbringing, Islamic education, and religious institutions. However, despite this awareness, the practical application of these values is often constrained by environmental and socio-economic factors.

Key challenges identified include inadequate hygiene facilities in schools, limited access to clean water, and financial constraints affecting access to hygiene materials. These barriers hinder the ability of some respondents to consistently maintain the level of hygiene prescribed by Islamic teachings. Therefore, while Islamic values significantly enhance hygiene awareness, there is a need for collective support from families, educational institutions, religious bodies, and government agencies to ensure that this awareness is effectively translated into consistent hygienic practices. Addressing these challenges will not only improve public health outcomes but also strengthen adherence to Islamic ethical standards.



5.2 Recommendations

Based on the findings of this study, the following recommendations are proposed:

i Muslim Single Girls

- They should consistently apply Islamic teachings on cleanliness in their daily lives.
- They should seek accurate and comprehensive knowledge on menstrual hygiene and purification practices.
- They should maintain proper personal grooming habits, including regular bathing, oral hygiene, and modest dressing.

ii Parents and Guardians

- Parents should strengthen Islamic upbringing at home, particularly in relation to hygiene practices.
- Mothers and female guardians should provide practical guidance on menstruation, grooming, and purification.
- Families should ensure the provision of essential hygiene materials such as soap, toothpaste, and sanitary pads.

iii Schools

- Schools should improve hygiene infrastructure, especially female toilets, water supply, and washing facilities.
- Hygiene education should be integrated into school health and guidance programmes.
- Teachers should create supportive environments where girls can openly discuss hygiene and menstrual challenges without stigma.

iv Islamiyyah Schools and Religious Institutions

- Religious leaders should incorporate practical hygiene education into their teachings.
- Imams and scholars should continue to emphasize cleanliness as an integral part of faith, as taught by Prophet Muhammad (SAW).
- Islamiyyah schools should play a leading role in teaching correct Islamic purification practices.

v Government Agencies

- Government should improve access to clean water in urban and semi-urban communities.



- Ministries of Education and Health should ensure the provision of adequate hygiene facilities in public schools.
- Public sensitization programmes focusing on adolescent female hygiene should be strengthened.

vi NGOs and Community Leaders

- Community-based organizations should organize awareness campaigns on menstrual hygiene and personal cleanliness.
- Non-governmental organizations (NGOs) should support low-income families with hygiene materials.
- Youth organizations should promote hygiene education grounded in Islamic values.



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