Compliance to Safety Practices among Hairdressers in Rivers East Senatorial District, Rivers State, Nigeria

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DOI: 10.56201/ijhpr.v8.no4.2023.pg29.41

ABSTRACT

The study investigated the compliance to safety practices among hairdressers in Rivers East Senatorial District, Rivers State. Two (2) objectives, two (2) research questions and two (2) hypotheses were formulated to guide the study. The descriptive correlational research design was adopted for the study. The population for the study consisted of all the hairdressers in Rivers East Senatorial District, Rivers State estimated to be 12,224. 1062 questionnaires were properly filled and returned giving a return rate of 88.5%. The sample size used for the study was 1,200. The instrument for data collection was a validated standardized questionnaire with a reliability of 0.82. Data collected were analyzed with Statistical Product and Service Solutions (SPSS) 23.0 version using some statistical tools such as mean, standard deviation and regression. The findings of the study revealed that good compliance to safety practices among hairdressers based on age, was found more among those aged 20-29 years (2.83±1.33) and based on years of work experience, good compliance was found more among those with 1-2 years of work experience (2.88±0.99). Those who had worked for 3-5 years had poor compliance to safety practices (1.62±0.96). Conclusions were made that there was no full compliance although there was good compliance to safety practices. Based on the findings of the study, recommendations were made that the government through its health agencies and owners of salons should supervise hairdressers to ensure full compliance to safety rules which is lacking in the hairdressing sector; hairdressers should engage in wearing eye goggles for protection and aprons in addition to other Personal Protective Equipment (PPE) while working to avoid adverse health conditions.

Key words: *Compliance, Safety Practices, Hairdressers, Rivers East Senatorial District, Rivers State*

INTRODUCTION

Background to the Study

Hairdressing is associated with exposure to a series of harmful elements and substances within the working environment. Unsafe act and unsafe conditions could lead to serious adverse health conditions. This exposure can likewise affect customers and other individuals within the work environment where these products are used (De-Gennaro et al, 2014). An inventory of cosmetic ingredients reported by the European Union and other researchers revealed that products used in the industry contain over 500 volatile substances that are either harmful, irritants or toxigenic (De-Gennaro et al, 2014; European commission, 2006; Mandiracioglu et al, 2009 and Liu et al, 2018 in Moda & King, 2019).The Beauty industry is one of the most flourishing industries in Nigeria today and has provided employment to a large number of graduates and other job seekers. Many hair dressers spend their lives in hazardous working environment, the salon which cause adverse health effects on their health. Some of them do not live long to enjoy the money they have worked for due to health challenges contracted from working with hair relaxers, shampoos, dyes, conditioners etc along with sharp piercing objects like needles, pins, scissors without sterilization and coming in contact directly with infected blood without the use of Personal Protective Equipment(PPE). [1]

Safety practices are activities carried out to stay free from injury, accident, danger, harm, losses, disease or even death. Most employers fail to provide a safe working environment for their employees, in some cases the workers provide their PPE's themselves or use the facilities provided for them by their employers inappropriately, or casualise/disregard the use of PPE's.

Compliance means the practice of obedience to a rule or requests made by people in authority. Merriam Webster Dictionary (2022) defined compliance as the act of conforming in fulfilling official requirements and a disposition to yield to something, process of yielding to a behaviour or rule, such as policies standard or law. It is the faithful attachment to a thing, behaviour, rules, guidelines and processes. Ekenedo (2010) asserted that safety is achieved when individuals make effort to reserve their health by removing dangers in the environment and compensating for those that cannot be removed.

Age is the duration of a living thing. Experience is a collection of events and/or activities from which an individual or group may gather knowledge, opinions and skills is an events of which one is cognizant.

A study conducted by Douglas et al (2013) in Rivers State, Nigeria revealed that hair dressers used gloves (89.5%) as protective equipment while performing task as the most used safety wear. The findings of Adewumi (2015) on analysis of occupational exposures of black hair care professionals revealed that 68% of hair care professionals wore aprons always, 81% never wore any eye protection when working and 38% always wore gloves. A study conducted by Gowaseb (2007) in Namibia also revealed that the employees mostly used latex 79(61.7%)or rubber gloves 70% (54.7%) as protective measures and only 7(5.5%)used goggles as observed in other studies. The study conducted by Nemer et al (2013) in Palestine also reviewed that some PPE's were present in 45 salons (80%) but only four salons (7%) provided masks and goggles. For hairdressers to be optimally safe when working all the PPE's should be available for use, and used to minimize exposures to dangerous chemical substances/hair products.

In an ideal state, the compliance to safety practice is assumed to be relatively good/high, considering the degree of health knowledge and safety tips that have been provided to the

hairdressers in Rivers East Senatorial District, Rivers State through health and wellbeing sensitizations and campaigns, health and safety knowledge disseminated in primary, secondary and tertiary institutions and via the mass media such as social media amongst others.

The present situation is quite critical because even though hair dressing salons are operating, there is no regulation in the sector, hairdressers are not supervised, and owners of hairdressing salons do not train/retrain staff on safety concerning their job. The hot water used to curl attachments and wigs can burn the skin if not handled properly, fungal nail disorders can make the hairdresser a source of dissemination of superficial fungal infection amongst clients. The cuts and needle stick injuries can also predispose them to both acquire and spread blood borne pathogens such as hepatitis B and C and the Human Immunodeficiency Virus (HIV). Standing for long hours and wrong body positioning while working can lead to Musculoskeletal Disorders, female workers with long exposures at child bearing age could have reproductive disorders such as infertility, congenital malformations and developmental disorders in offspring. Despite the threats posed by these adverse health effects on exposure to chemical substances and work conditions, little or nothing is being done to protect the health of workers in the sector. More so, many of those running these salons have minimal training and are unaware of the health problems which may arise in the hair salon.

The researcher is poised to investigating the compliance to safety practices among hairdressers in Rivers East Senatorial district, Rivers State based on age and years of work experience.

Aim and Objectives of the Study

The aim of this study was to investigate the compliance to safety practices among hairdressers in Rivers East Senatorial District, Rivers State. Specifically the objectives of the study were to:

1. Ascertain the compliance to safety practices among hairdressers in Rivers East Senatorial District, Rivers State based on age.
2. Ascertain the compliance to safety practices based on years of work experience.

Research Questions

The following research questions were answered:

1. What is the compliance to safety practices among hairdressers in Rivers East Senatorial District, Rivers State based on age?
2. What is the compliance to safety practices among hairdressers in Rivers East Senatorial District based on years of work experience?

Hypotheses

The following hypotheses postulated were tested at 0.05 level of significance

1. There is no significant relationship between age and compliance to safety practices among hairdressers in Rivers East Senatorial District, Rivers State.
2. There is no significant relationship between years of work experience and compliance to safety practices among hairdressers in Rivers East Senatorial District, Rivers State.

Safety practices for hairdressers

Effective and efficient control protects workers from workplace hazards, help to avoid injuries, illnesses and accidents, minimize or eliminate safety and health risks and help employers provide workers with safe and healthful working conditions (OSHA, 2011). The safety practices are outlined below according to the hazards.

Physical hazards:1) Install sound enclosures or use noise reducing surfaces (e.g sound dampening materials); 2) Ensure that floors are not slippery but cleaning as soon as there is a spill; 3) Practice good housekeeping procedures; 4) Ensure proper lighting at the workplace; 5) Ensure good hygiene practices; 6) Electrical connections should be properly made and generator house should be far from where humans are; 7) Maintain first-aid kit and have first aid training; 8) Workers should be trained on fire safety and how to use the fire-extinguisher to put off fire; 9) Wear comfortable shoes with non-skid soles (CCOHS, 2016); Hairdressers should get annual/regular checkups to ascertain health status and also get body massages; 10) Hairdressers should drink adequate amounts of water throughout the day at different times to stay hydrated (Scott, 2017); 11) Do not stand in a place for more than thirty minutes without walking around and stretching (Hair story, 2021); 12) pre-employment training/orientation on nature of job/job hazards should be carried out by management.

Chemical hazards: i) Determine which product contain hazardous chemical or ingredients and label correctly; ii) Use a less harmful product where possible; iii) Read manufacturer's instructions on how to use products safety, including hair products, cleaners etc; iv) Avoid contact with products that contain known cancer causing ingredients such as certain hair dyes; v) Train workers safe handling of hazardous products; Safely store and dispose of product; vi) Provide local exhaust ventilation where there is a risk exposure to hazardous fumes; vii) Use PPE's such as gloves, aprons, nose mask and eye protection and make sure the gloves are made of materials that suit the chemical/product you are working with (CCOHS, 2016). viii) Chemical liquid and waste should be washed off to avoid the risk of injury or cross infection (Bigambo, 2017).

Biological hazards: i) Wash hands frequently to prevent infections and moisturize the hands regularly; ii) Clean and disinfect frequently touched surfaces; iii) Wash hands regularly, especially before and after working with each client; iv) Treat all body substances such as blood as potentially infectious. Always wear gloves; v) Clean and disinfect all equipment after each use; vi) Dispose off all sharp disposable equipment in a safe manner. (CCOHS, 2016); vii) Ensure that the working environment is free from pests rodents and other living organisms that can cause harm by cleaning drainages, clearing grasses and fumigating the work environment from time to time (CCOHS, 2016); viii) Use needles, razor blades, syringes that are sterilized, wigs and solid waste should be put in a covered waste bin.

Mechanical hazards: i) Inspect tools and equipment and make sure they are in good condition before use; ii) Equipment should be guarded when in use; iii) Workers should wear their PPE's while at work as this will minimize injuries or accidents at the work place; iv) Purchase equipment that is quieter (CCOHS, 2016).

Ergonomic hazards: i) Design the salon ergonomically that is provide work benches, reception desks, washbasins (for tasks such as cutting, styling, shampooing etc) at the right height and adjustable stools and chairs for sitting. Also re-arrange the work area so that the task, materials (shampoos, conditioners dyes etc), equipment (scissors, blow-dryers, etc) and

controls are within easy reach and do not require stretching or twisting; ii) Take regular rest breaks and exercise; iii) Rotate washing/basin duty (to avoid prolonged contact washing water). iv) Rotate job functions to prevent overuse injuries; v) Purchase scissors, blow dryers, styling rods and rollers, gloves etc, which are easy and safe to use; vi) Store frequently used, heavy objects and materials between knee and shoulder height(CCOHS,2016);vii) Practice safe lifting of equipment/products.

Psychosocial hazards: i) Have a good job design for a balanced workload; ii) Treat all employees/clients in a fair and respectful manner; iii) Involve employees in decision-making and allow for their input directly or through committees, groups etc; iv) Have a good customer care service attendant who will receive complaints and respond effectively and promptly; v) Take steps to help others and practice positive mental health promotion; vi) There should be effective communication between employers and employees; vii) Ethics, rules and regulations for workers and customers should be displayed on the wall of the salon to minimize harassment, bullying and fighting; viii) Cash should be handled properly and wisely and much money should not be kept within the work environment to avoid robbery and theft; ix) Workers should be properly motivated or given incentives for hard work and good safety behaviours (CCOHS, 2016).

METHODOLOGY

This study adopted the descriptive correlational research design. The population for the study consisted of all the hairdressers in Rivers East Senatorial District, Rivers State. which was estimated to be 12,224. Sample size used for the study was 1200 but only 1062 properly filled their questionnaire giving a return rate of 88.5%. The multi- stage sampling procedure was used for this study to select the sample. The instrument for data collection was a questionnaire titled "Socio-demographic determinants of compliance to Safety Practices among Hairdressers in Rivers East Senatorial District, Rivers State". The questionnaire contained the following sub-titles; Socio-demographic data such as age and years of work experience; compliance to safety practices which had twenty four (24) statement items on four point likert scale of AL (Always), SM (Sometimes), R (rarely) and N (Never). Information was derived from the respondents. To ensure validity of the instrument, the face and content validity of the instrument was established by showing the questionnaire to experts in the Department of Human Kinetics, Health and Safety Studies, Ignatius Ajuru University of Education, Port Harcourt whose inputs and corrections were synergized to make the final draft of the instrument. The reliability of the instrument was ascertained using the Test-retest method. The reliability co-efficient of the instrument was calculated to be 0.82 using cronbach alpha. The descriptive statistics of mean and standard deviation were used to answer the research questions, while regression was used to test the hypotheses at 0.05 alpha level.

Research question 1: What is the compliance to safety practices among hairdressers in Rivers East Senatorial District based on age?

Table 1: Age and compliance to safety practices

Safety practices	<20yrs (N = 103)		20-29yrs (N = 597)		30-39yrs (N = 315)		40-49yrs (N = 47)	
	M	S.D.	M	S.D.	M	S.D.	M	S.D.
35. Newly employed hairdressers sent for training on nature of job before resuming work in the salon	1.53	1.11	1.54	1.10	1.53	1.11	1.55	1.11
36. Periodic training of workers for efficiency and effectiveness	2.11	1.26	2.02	1.22	1.92	1.20	1.93	1.25
37. PPE like disposable gloves and nose masks, are adequately provided for use by the management	2.92	0.85	2.94	0.81	2.97	0.72	3.12	0.71
38. Management provides aprons, eyes goggles and hair scarf for hair dressers to use while dressing hair	2.25	1.39	2.10	1.38	2.00	1.37	2.02	1.34
39.Workers wear PPE's like disposable gloves and nose mask, while dressing hair in the salon	2.55	1.17	2.62	1.81	2.59	1.12	2.65	1.10
40. Wear aprons, hair scarf and eye goggle while working	2.21	1.29	2.08	128	1.95	1.25	2.02	1.32
41. Management supervise and ensure compliance to safety	2.16	1.16	2.13	1.14	2.03	1.13	2.10	1.27
42. Government health agencies come for inspection and supervision to ensure compliance to safety	1.82	1.33	1.90	1.32	1.82	1.29	1.06	1.35
43. There is a suitable first aid box in the salon in case of accident in the salon that could lead to cuts or injuries	2.69	1.41	2.55	1.42	2.34	1.40	2.42	1.44
44. Availability of fire extinguishing equipment in the salon which is maintained and serviced regularly	2.16	1.25	2.15	1.29	1.97	1.25	1.19	1.42
45. Hairdressers in the salon are trained on hazard control measures including how to put off fire	2.54	1.31	2.63	1.31	2.67	1.32	2.74	1.34
46. Hairdressers wash their hands properly before eating	3.48	1.02	3.56	0.92	3.62	0.86	3.65	0.73
47. Workers do not eat while dressing/ making hairs	3.27	0.76	3.34	0.75	3.38	0.73	3.38	0.67
48. When there is a report of any faulty component or unsafe condition such as faulty equipment, slippery floors and unsafe acts in the salon, management act immediately	3.64	0.52	3.68	0.56	3.75	0.47	3.80	0.44
49. Objects/equipment in the salon are very well arranged	3.19	1.14	3.36	1.07	3.41	1.12	3.59	0.87
50. Hair product/ chemicals are properly labeled	3.39	0.84	3.42	0.79	3.46	0.67	3.44	0.71
51. Stands on a spot making hair for more than thirty minutes without moving around in the salon	3.37	0.80	3.38	0.72	3.45	0.67	3.44	0.71

52. Emptied all solid salon waste like needles, cotton wool, cut hairs, etc in the waste bin and cover them properly	3.46	0.75	3.53	0.73	3.53	0.74	3.53	0.77
53. Washes hands properly after handling chemicals	3.38	0.99	3.48	0.90	3.51	0.91	3.63	0.76
54. There is proper lighting in the salon when work is done	3.26	1.11	3.33	1.07	3.38	1.06	3.40	0.99
55. Sterilized all sharp body piercing equipment with methylated spirit/sterilizer before using it on clients' hair	3.37	1.00	3.34	0.83	3.61	0.74	3.55	0.85
56. Disposed off dirty water or liquid waste from task carried out in the salon into a drainage system	3.03	0.89	3.01	0.88	3.04	0.81	3.19	3.03
57. Washed combs, brushes and towel and disinfect them with hot water before using them on customers hairs	3.16	0.92	3.24	0.90	3.26	0.92	3.23	0.88
58. Runs shift or have a day off in the week to rest	2.73	1.04	2.74	1.03	2.70	0.99	2.76	1.02
Grand mean	**2.81**	**1.05**	**2.83**	**1.33**	**2.82**	**.99**	**2.80**	**1.08**

Criterion mean = 2.50

Table 1 presents the compliance to safety practices among hairdressers based on age. The result showed that based on age, compliance was good among the various age group and was more among those aged 20-29 years (2.83±1.33) followed by those aged 30-39 years (2.82±.99), those <20 years (2.81±1.05) and those aged 40-49 years (2.80±1.08). Thus based on age, compliance to safety practices among hairdressers in Rivers East Senatorial District was found more among the younger hairdressers.

Research question 2: What is the compliance to safety practices among hairdressers in Rivers East Senatorial District based on years of work experience?

Table 2: Mean and Standard deviation on years of experience and compliance to safety practices

Safety practices	**1-2 years (N = 276)**		**3-5 years (N = 537)**		**≥6yrs (N = 248)**	
	M	**S.D.**	**M**	**S.D.**	**M**	**S.D.**
35. Pre-employment training	1.68	1.22	1.55	1.10	1.35	0.95
36. Periodic training of workers	2.41	1.28	1.96	1.19	1.89	1.21
37. PPE adequately provided	2.94	0.84	2.98	0.74	2.92	0.78
38. Aprons, eyes goggles and hair scarf provided	2.15	1.38	1.08	1.39	2.00	1.33
39.Workers wear PPE's	2.70	1.16	2.59	1.18	2.52	1.10
40. Wear aprons, hair scarf and eye goggle while working	2.15	0.28	2.03	0.28	1.97	0.26
41. Management supervise work	2.17	1.16	2.10	1.15	2.03	1.12
42. Government health agencies come for inspection	1.95	1.36	1.91	1.34	1.73	1.21

43. There is a suitable first aid box	2.59	1.41	2.47	1.42	2.45	1.42
44.Availability of fire extinguishing equipment	2.17	1.29	2.08	1.28	2.05	1.28
45. Trained on hazard control	2.66	1.31	262	1.32	2.62	1.29
46. Washes hands before eating	3.52	0.96	3.60	0.89	3.58	0.87
47.Do not eat while making hairs	3.35	0.73	3.73	0.76	3.29	0.72
48. Fixes faulty equipment,	3.66	0.57	3.72	0.52	3.72	0.49
49. Objects very well arranged	3.38	1.06	3.36	1.07	3.37	1.16
50. Hair product well labeled	3.40	0.82	3.48	0.70	3.37	0.79
51. Stands on a spot for more than thirty minutes	3.42	0.73	3.44	0.69	3.31	0.74
52. Emptied all solid salon waste and cover them properly	3.54	0.70	3.54	0.73	3.47	0.77
53. Washes hands properly after handling chemicals	3.46	0.91	3.50	0.91	3.50	0.89
54. There is proper lighting	3.32	1.07	3.35	1.08	3.33	1.05
55. Sterilized all sharp body piercing equipment	3.56	0.83	3.57	0.79	3.47	0.89
56. Disposed off dirty water or liquid waste into a drainage	3.02	0.91	3.06	0.83	2.96	0.86
57. Washed combs, brushes and towel and disinfect them with hot water before using them on customers hairs	3.30	0.89	3.28	0.89	3.07	0.97
58. Runs shift or have a day off in the week to rest	2.78	1.04	2.70	1.01	2.72	10.1
Grand mean	**2.88**	**0.99**	**1.62**	**0.96**	**2.77**	**1.34**

Criterion mean = 2.50

Table 2 presents the compliance to safety practices among hairdressers based on years of work experience. The result showed that based on years of work experience, compliance was good among hairdressers of different years of work experience except those who had worked for 3-5years and was more among those who had 1-2 years (2.88±0.99) work experience, followed by those who had worked for ≥ 6 years (2.77±1.34), and those who had worked for 3-5 years (1.62±0.96). Thus based on years of work experience, compliance to safety practices among hairdressers in Rivers East Senatorial District was found more among hairdressers who had worked for few years.

Test of Hypotheses

Hypothesis 1: There is no significant relationship between age and compliance to safety practices among hairdressers in Rivers East Senatorial District.

Table **3: Regression analysis on relationship between age and compliance to safety practices among hairdressers in Rivers East Senatorial District**

Model		Sum of Squares	df	Mean Square	F	Sig.	Decision
1	Regression	7868.02	1	7868.02	7948.1	.00*	H_o Rejected
	Residual	1050.30	1061	.990			
	Total	8918.32	1062				

p< 0.05. *Significant

Table 3: shows the regression analysis on the relationship between age and compliance to safety practices among hairdressers. The findings of the study showed that there was a significant relationship between age and compliance to safety practices [F(1,1061) = 7948.18, p<0.05]. The null hypothesis which stated that there is no significant relationship between age and compliance to safety practices among hairdressers in Rivers East Senatorial District was thus rejected.

Hypothesis 2: There is no significant relationship between years of work experience and compliance to safety practices among hairdressers in Rivers East Senatorial District, Rivers State.

Table 4: Regression analysis on relationship between years of work experience and compliance to safety practices among hairdressers in Rivers East Senatorial District

Model		Sum of Squares	df	Mean Square	F	Sig.	Decision
1	Regression	6101.089	1	6101.089	2297.7	.00*	H_o Rejected
	Residual	2817.232	1061	2.655			
	Total	8918.321[d]	1062				

p< 0.05. *Significant

Table 4 shows the regression analysis on the relationship between years of work experience and compliance to safety practices among hairdressers. The findings of the study showed that there was a significant relationship between years of work experience and compliance to safety practices [F(1,1061) = 2297.73, p<0.05]. The null hypothesis which stated that there is no significant relationship between years of work experience and compliance to safety practices among hairdressers in Rivers East Senatorial District was thus rejected.

DISCUSSION OF FINDINGS

The findings of this study in table 3, showed a significant relationship between age and compliance to safety practices among hairdressers [F(1,1061) = 7948.18, P<0.05]. Based on age, compliance was the best among those aged 20-29 years (2.83 $\pm$ 1.33) followed by those aged 30 – 39 years (2.82 $\pm$ 0.99) followed by those aged < 20 years (2.81 $\pm$ 1.05) and 40 – 49 years (2.80 $\pm$ 1.08). Thus based on age, compliance was more among the younger hairdressers. The present study findings is similar to the findings of Tolera and Kabeto (2020) in Adama town, Ethiopia which revealed that age was a significantly associated determinant with safety. The present study findings gives credence to the findings of Mekomen et al (2020) in Ethiopia which revealed that participants means age was 33.19 years and age with hours standing to make hair were significantly associated. The present study findings is in disagreement with the study findings of Nemer et al (2015) in Palestine which revealed that hairdressers age ranged from 19 – 50 years and were exposed to high concentration of ammonia from hairdressing chemicals and their working conditions were unsatisfactory. The present study findings is also in contrast with the study findings of Archibong et al (2018) in Nigeria revealed that the mean age of hair dressers was 36.10 $\pm$ 8.24 years and the highest frequency was among those aged

30 – 39 years meanwhile 18 and above was used for the study and hairdressers had low awareness of hazards which indicated a poor compliance to safety practices.

The findings of this study in table 4 showed that there was a significant relationship between years of work experience and compliance to safety practice [FCI, (061) = 2297.73, P < 0.05]. The result showed that based on work experience, compliance was more among those who had 1–2 years working experience (2.88 ± 0.99), followed by those who had worked for ≥ 6 years (2.77 ± 1.34) and compliance was poor among hairdressers who had worked for 3- 5 years (1.62 ± 0.96). Thus based on years of work experience, compliance to safety practices was more and best among hairdressers who had worked few years in Rivers East senatorial District, Rivers State. More so, the poor compliance found among hairdressers who had worked for 3–5 years (1.62 ± 0.96) could be attributed to the fact that there is a tendency for workers to start getting over familiar with their job practices as they stay longer on the job and begin to get casual not taking into sight the consequences of their actions and damaging impact on their health. The present study findings is in line with the study findings of Roberts and Achalu (2021) in Choba, Rivers State, Nigeria which revealed that the highest mean for work experience was obtained by respondents who had worked for 1-5 years (2.41). Hairdressers generally had a low exposure level to occupational hazards perhaps as a result of strategies created to prevent the hazards in the salon. The present study findings is in line with the study findings of Hakim and Abdel–Hamid (2019) in Egypt which revealed that mean work duration for hairdressers was 6 years and they had good overall practice (73%). The present study findings is also in disagreement with the findings of Aweto et al (2015) in Surulere and Mushin, Lagos, Nigeria which revealed that the mean number of years of working experience was 7.85 ± 0.4 years with 124 (41.5%) participants who had worked for 1-5 years. Results showed a high prevalence of musculoskeletal disorders which could be as a result of poor compliance to safety practices. The present study finding also disagrees with the study findings of Tsegay et al (2021) in Ethiopia which revealed that hairdressers had worked / served less than 5 years with a median of 3 years and study found that low back pain was a major health problem .

CONCLUSION

Based on the findings of this study, it was concluded that compliance to safety practices based on age was good among hairdressers especially those aged 20-29 years; and based on years of work experience, compliance was more among those who had worked 1-2 years. Those who had worked 3-5 years had poor compliance to safety practices.

RECOMMENDATIONS

Based on the findings of the study, the following recommendations were made:

1. The management/owners of hairdressing salons should provide sufficient PPE's including aprons, hairscarfs and eye protective devices for their workers and ensure full compliance to usage of PPE's while at work to avoid adverse health conditions.
2. The government through its health agencies at the Federal, State and Local government levels should adequately conduct supervision and inspection to improve compliance to safety among hairdressers.
3. The government should make a policy that ensures that there is a regulation for opening a salon and make it mandatory for all beauty salons to be duely registered as this will ensure that hair salons have the minimum requirements to operate.

4. Hairdressers should apply the knowledge they have gained through health education, the mass media and work experience into their jobs to help reduce hazards and last long on the job.

REFERENCES

Adewumi, T. (2015). *Analysis of occupational exposures of Black Hair Care Professional in Predominantly black salons*. A thesis submitted in partial fulfillment of the requirements for the award of the Degree of Master of Science in Environmental Health Science, University of California, Los Angeles, pp.52.

Adeyeye, O. O., Adekoya, A. O., Kuyinu, Y. & Ayoola, O. (2013). Respiratory symptoms and pulmonary functions of hairdressers in Lagos, South West Nigeria. *EJBS, 6*(1), 32 – 36.

Archibong, J., Henshaw, E., Ogunbiyi, A. & George, A. (2018). Occupational skin disorders in a subset of Nigerian hair-dressers. *Pan African Medical Journal, 31, 100.* Doi:10.11604/pamj.2018.31.100.16499.

Aweto, H., Tella, B. & Johnson, O. (2015). Prevalence of work-related musculoskeletal disorders among hairdresser. International *Journal of Occupational Medicine and Environmental Health, 28*(3), 545 – 555. https://doi.org/10.13075/ijomeh.1896.0029/ pmid:261.

Bigambo, F. M. (2017). *Occupational health hazards and illnesses awareness among hairdressers and nail salon workers; A case of Kinondoni Municipality Dar es salom, Tanzania.* A dissertation submitted in partial fulfillment of the requirements for the Degree of Master of Environmental Studies (Health) of the Open University of Tanzania.

De-Gennaro, G., De Gennaro, L., Mazzone, A., Porcelli, F. & Tutino, M. (2014). Indoor air quality in hair salons.Screening of volatile organic compounds and indicators based on health risk assessment. *Atmos. Environ., 83*, 119 – 126.

Deschamps, F., Langrand, J. & Le Sage, F.X. (2014). Health assessment of self-employed hairdressers in France. *Journal of Occupational Health, 56*(2), 157 – 163.

Dewey, J. (1994). *Democracy and education*. The Free Press.

Douglas, K. E., Agbi, J. O., Akpovienehe, O., Etukudo, A. J. (2013). Occupational hand Dermatitis among hair dressers in Semi-Urban Community, Rivers State, South-South Nigeria. *The Nigerian Health Journal, 13*(3), 125 – 129.

Ekenedo, G. O. (2010). *Comprehensive first aid and safety for everyone, at home, at work, at leisure.* Glory of the Latter House.

European Agency for Safety and Health at Work [EU-OSHA] (2014). Occupational health and safety in the hairdressing sector. Publication office of the European Union.https://osha.europa.eu/en/publications/literature-reviews/occupational-health-and-safety-in-the-hairdressing-sector.

European Commission. Commission decision 2006/25/EC of a February 2006 amending decision 96/335/EC. Establishing an inventory and a common Nomenclature of ingredients Employed in cosmetic products. *Official Journal of the European Union*. https://publications.europ.eu/en/publication-detail/-publications/db30de-80-11f8-4358-bld6-e38d6cf96625.

Hair story (2021). *Hairdresser health: Risks and remedies*. Hairstory Team.

Hakim, S. A. & Abdel-Hamid, M. A. (2019). Occupational health risk of hairdressers: knowledge, practice and self-reported symptoms. *Egyptian Journal of Occupational Medicine*, 43(1), 161 – 174.

Liu, N., Xu, L. & Cai, V. (2018). Methylsiloxames in barbers shops and residence indoor dust and the implication for human exposures. *Sci. Total Environ*, *618*, 1324 – 1330.

Mandiracioglu, A., Kose, S., Gozaydin, A., Turken, M. & Kuzucu, L. (2009). Occupational Health risks of barbers and coiffeurs in Izmir. *Indian J. Occup. Environ. Med. 13*(2), 92 – 96.

Mekonnen, T. H., Kekeba, G. G. & Gebisa, J. A. (2020). Prevalence and health care seeking practice of work-related musculoskeletal Disorders among Informal Sectors of hairdressers in Ethiopia, 2019: Findings from a cross-sectional study. *BMC Public Health*, *20*(1), 1 – 10.

Merriam-Webster Dictionary (2022). Merriam-Webster.com/dictionary. Accessed 5 April, 2022. Last updated 31 March, 2022.

Moda, H. M. & King, D. (2019). Assessment of occupational safety and hygiene perception among Afro-Caribbean hair salon operators in Manchester United Kingdom. *Int. J. Environ. Res. Public Health, 16*, 3284.

Muhindo, I. (2019). Knowledge, attitude and practice of hair salon operators on infection and prevention measures in salons in Kisugu, Parish Makindye Division Kampala District. A published Thesis. http://dspace.ciu.ac.ug/xmlui/handle/123456789/1341

Nemer, M., Sikkeland, L. I. B., Kasem, M., Kristensen, P., Nijem, K., Bjertness, E., Skare, O. Bakke, B., Johny, K. & Skogstad, M., (2015). Airway inflammation and Ammonia exposure among female Palestinian hair dressers: a cross sectional study. *Journal of occupational and Environmental, Medicine, 72*(16), 428 – 434. http://dx.doi.org/10.1136/oemed-2014-102437.

Robert, T. G. & Achalu, E. I. (2021). Exposure to occupational health hazards among beauty industry workers in Port Harcourt metropolis, Rivers State. Trends in Educational Studies Journal, 13(1), 9-12.

Tolera, S. T. & Kabeto, S. K. (2020).Occupational-related musculoskeletal Disorder and associated factors among Beauty Salon workers, Adama Town, South-Eastern Ethiopia, 2018. J Ergo.9, 257.

Tomar, S., Tiwari, R., Verma, G. (2020).Occupational respiratory morbidity among hair and beauty salon workers in Udupi taluk, Karnataka, India. *Am J. Ind Med*, *63*(10), 902 – 906.

Tsegay, G. S., Gebremeskel, B. F., Gezahegn, S. D. & Teklemichael, D. M. (2021). Low back pain and associated factors among hair dressers in Northern Ethiopia. A cross sectional study. *Journal of Pain Research and Management*. https://dio.org/10.1155/2021/2408413.

Wazir, M. S., Mahmood, S., Ahmed, A. & Jadoon, H. R. (2008). Awareness among barbers about health hazards associated with their profession. Department of Community Medicine, Ayub Medical College, Abbottabad, Pakistan.*JAyub Med Coll Abbottabad*, *20*(2), 35 – 8.