

Household hygiene practices and knowledge of Lassa Fever: a comparative study between rural and urban areas in Ondo state

Olalekan Wasiu Adebimpe¹, Olatunde Ademoye Falusi^{1,&}

¹Department of Epidemiology and Biostatistics, School of Public Health, University of Medical Sciences, Ondo City, Nigeria

&Corresponding author: Olatunde Ademoye Falusi, Department of Epidemiology and Biostatistics, School of Public Health, University of Medical Sciences, Ondo City, Nigeria. **Email:** falusiolatunde@gmail.com

Citation: Olalekan Wasiu Adebimpe et al Household hygiene practices and knowledge of Lassa Fever: a comparative study between rural and urban areas in Ondo state. *Journal of Interventional Epidemiology and Public Health*. 2025;8(ConfProc):00282.

DOI: <https://doi.org/10.37432/JIEPH-CONFPRO5-00282>

LINK: <https://afenet-journal.org/household-hygiene-practices-and-knowledge-of-lassa-fever-a-comparative-study-between-rural-and-urban-areas-in-ondo-state/>

Received: 02/05/2025 **Accepted:** 09/08/2025 **Published:** 06/08/2025

Keywords: Lassa fever, Knowledge, Practice and Good hygiene

This is part of the proceedings of the ECOWAS 2nd Lassa fever International Conference in Abidjan, September 8 – 11, 2025

© Olatunde Ademoye Falusi et al. *Journal of Interventional Epidemiology and Public Health*. This is an Open Access article distributed under the terms of the Creative Commons Attribution International 4.0 License (<https://creativecommons.org/licenses/by/4.0/>), which permits unrestricted use, distribution, and reproduction in any medium, provided the original work is properly cited.

Introduction

Ondo State recently took over as the epicentre of Lassa Fever infections in Nigeria. Several community household practices could lead to an increase in disease transmission, necessitating a study to assess and compare household hygiene preventive practices and knowledge of Lassa fever among rural and urban dwellers in Ondo State.

Methods

This is a descriptive cross-sectional comparative study. Data was collected using semi-structured interviewer interviewer-administered, and pretested questionnaires. Multistage sampling was used to select 621 community respondents. The data collected was analysed using SPSS software.

Results

All respondents from urban and 98% of rural area respondents were aware of the disease. Overall good knowledge score was 100% for urban and 33.3% among rural area respondents ($p < 0.05$). About 47.2% of urban and 29.3% of rural respondents had good hygiene practices ($p < 0.05$). Urban respondents were 1.9 times more likely to have good knowledge compared to rural respondents ($p < 0.05$). Rural respondents were 1.6 times more likely to have a good hygiene practice compared to urban respondents ($p > 0.05$).

Conclusion

Gaps in household hygiene practices and knowledge were observed, with poorer gaps in rural areas, suggesting a need for a sustained state-wide health promotion programmes, to translate knowledge into good preventive practices.