

Objectives

Advocacy

The Network will advocate, promote and facilitate the inclusion of HWTS in policies and practices at the national, regional and global level.

Communication

The Network will provide high quality information to create awareness of HWTS. The two primary audiences for Network communication activities will be Network members themselves to promote information sharing and other key stakeholders, especially those in the developing world, who will enable the Network to accomplish its mission.

Research

The Network will promote independent research to evaluate interventions by collecting, analysing and disseminating data on efficacy, cost-effectiveness, health impact, acceptability, affordability, scalability and sustainability.

Implementation

The Network will strive to empower people without access to improved water sources, plus those with improved but unsafe sources, to take charge of their own drinking water safety by working with communities to implement effective, affordable and sustainable HWTS interventions. Particular attention will be given to those most affected by waterborne diseases, such as children, immune-compromised persons, the poor, refugees and internally displaced persons.



Collaborating Organizations, November 2004

African Peri-Urban Community, Kenya
American Red Cross, International Services Department
Anglican Church of Kenya
Asian Institute of Technology (AIT), Thailand
BioSand Filter/Bush Proof, Madagascar
CARE, USA
CAWST, Canada
Centers for Disease Control and Prevention (CDC), USA
Center for Environmental Research (CNRE), Madagascar
Center for Global Safe Water (Emory University), USA
Cranfield University, UK
Department for International Development, UK
Department of Water and Sanitation in Developing Countries at the Swiss Federal Institute for Environmental Science and Technology, Switzerland
Emory University, USA
First Water, USA
IDE Nepal
International Committee of the Red Cross, Switzerland
International Council of Nurses, Switzerland
International Federation of Red Cross and Red Crescent Societies
International Water Association, UK
Johns Hopkins University, USA
Kenya Water for Health Organization (KWAHO)
London School of Hygiene & Tropical Medicine, UK
Massachusetts Institute of Technology, USA
Medair, Switzerland
Medentech, Ireland
Ministry of Health, Kenya
Ministry of Public Health, Thailand
National Nurses Association of Kenya
Nursing Council of Kenya
NETWAS International, Kenya
National Institute of Communicable Diseases, India
Oxfam, UK
Plan International
Population Services International
Potters for Peace, Nicaragua
Practica Foundation, Netherlands
Procter & Gamble, USA
Safe Water Access and Training Consultants
Samaritan's Purse, Canada
SWL Consultants, UK
Suez, France
Rotary International
Reckitt Benckiser, UK
ResourceLinC, USA
Rural Africa Water Development Project (RAWDP)
United Nations Children's Fund (UNICEF)
The United States Agency for International Development (USAID), USA
University of North Carolina, USA
University of Pretoria, South Africa
Water Aid, UK
Water and Sanitation Collaborative Council (WSSCC)
World Chlorine Council
World Bank
World Health Organization (WHO)

www.who.int/household_water

International Network to Promote Household Water Treatment and Safe Storage

Membership in the Network is open to all interested stakeholders that agree with the Network mission and guiding principles and who are willing to commit themselves to working toward achieving the objectives of the Network.



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The Network



World Health Organization

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Burden of Disease

Every year, there are **1.7 million deaths related to unsafe water**, sanitation and hygiene, mainly through infectious diarrhoea. The vast majority of these deaths are among children under five years of age. An estimated 4 billion cases of diarrhoea annually account for over 82 million Disability Adjusted Life Years, representing 4.5% of the global burden of disease and placing diarrhoeal diseases as the third highest cause of morbidity and sixth highest cause of mortality. In addition, waterborne disease threatens millions who are displaced or otherwise affected each year by conflicts and disasters.

Much of this global burden of diarrhoeal disease is concentrated within the least developed countries where populations may face other water related hazards, such as arsenic and excess fluoride. This disease burden is substantially preventable through improved access to safe water and to interventions in hygiene and sanitation.

Access to Safe Water

One sixth of humanity currently lacks access to any form of improved water supply within one kilometre of their homes. Many more lack access to *safe* water. Realizing the Millennium Declaration Goal of halving the proportion of people without sustainable access to safe drinking water requires providing additional services to 280,000 people every day and sustaining existing services.

Efforts to deliver the safe and reliable water services necessary to create a healthy living environment and other benefits for people in developing countries are an essential long-term goal. At the same time, steps can be taken immediately to accelerate the health gains associated with improved water and thereby support poverty alleviation and development goals. One of the most important immediately achievable steps is the treatment and safe storage of water at the point of use.

Household Water Treatment and Safe Storage

Recent research demonstrates that simple, acceptable, low-cost interventions at the household and community levels (e.g. schools, health centres, refugee camps) are capable of dramatically improving the microbial quality of water stored in the home and reducing the risk of diarrhoeal disease. Moreover, research on cost-effectiveness indicates that these interventions can avert much of the burden associated with diarrhoeal diseases at low cost.

The health impact of household water treatment and safe storage (HWTS) measures will be greatly enhanced if combined with the promotion of critical hygiene behaviours as part of a comprehensive environmental sanitation initiative. Significant momentum has already been established in support of hygiene promotion, and collaboration with such efforts should be encouraged.



A Global Collaborative

Stirred by the potential to dramatically improve the health of vulnerable populations through improved point-of-use water management, WHO convened a meeting in Geneva in February 2003 to explore ways to promote HWTS solutions. Participants included representatives of UN agencies, bilateral development agencies, international non-governmental organisations, research institutions, international professional associations, the private sector and industry associations.

Participants discussed:

- Research that shows certain HWTS interventions have significantly reduced such disease.
- The need for further research to address outstanding questions especially in the areas of field effectiveness and efficiency, health impact, acceptability and affordability of existing interventions and those under development.
- Challenges facing the widespread deployment of such interventions.
- The use of global networks and alliances among governmental organisations, private companies and civil society to address important health issues.
- The roles that each type of organisation may play in such a network.

With this as background, the participants unanimously agreed to establish an International Network to Promote Household Water Treatment and Safe Storage.



Network Mission

To contribute to a significant reduction in waterborne disease, especially among vulnerable populations, by promoting household water treatment and safe storage as a key component of water, sanitation and hygiene programmes.

The Network will accomplish this mission through advocacy, communication, research and implementation. Specific activities of the Network and its members will evolve over time, based on continuing research, experience and lessons learned.

Guiding Principles

The Network will:

- Advocate for HWTS measures, recognising that the universal provision of reliable safe piped water supply is the ultimate goal. Network activities will not compromise initiatives aimed at the ultimate goal of universal safe reliable piped water supply.
- Use evidence-based approaches with agreed upon standards of effectiveness (e.g. behaviour change, health impact, cost, sustainability) and promote dissemination of information about programme approaches.
- Facilitate access to and sharing of high-quality information relevant to HWTS practices.
- Actively seek to understand target communities and involve local people in developing the most appropriate strategies for implementing HWTS interventions.
- Recognise the role of women in household management of water and in acceptance and implementation of solutions.
- Operate in a balanced manner in terms of regions, technologies, and types of member organisations involved.
- Promote the integration of HWTS interventions with water, sanitation and hygiene programmes.
- Promote the use of local technology and resources and local capacity building.
- Maintain an agile structure and administration.