

Water, Sanitation, and Hygiene (WASH) assessments two years after Nepal 2015 earthquake



2nd IDRC 2019, World Bosai Forum November 12, 2019

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Less than 50% Basic Water and Sanitation Coverage in many places

Basic Drinking Water Coverage



Basic Sanitation Coverage





Severity of the situation: Why we need more work?









Sanitation



What is being done? Sustainable Development Goal 6 (SDG 6)



- Ensure availability and sustainable management of water and sanitation for all.
- Increase the investments in sanitation and drinking water to meet the subtargets by 2030.





Challenges to meet SDGs?



- Increased number of natural disasters linked to climate change.¹
- Complications to meet SDG 6 by 2030 with increased number of natural disasters, esp in Asia as Water and Sanitation issues are worsening after any natural disaster.



EM-DAT: The OFDA/CRED International Disaster Database - www.emdat.be - Universite Catholique de Louvain, Brussels - Belgium



WASH Behavior and Diarrheal Diseases



- Because of limited resources
 and compromised living
 situation, natural disaster
 victims change their hygiene
 behaviors to meet the basic
 needs.¹
- This can result in a diarrheal disease outbreak like in Haiti after 2010 Earthquake.

FIGURE. Number of persons reporting symptoms of acute gastroenteritis after Hurricane Katrina at an evacuee medical clinic, by symptom and date — Houston, Texas, September 2–12, 2005



2010 HAITI OUTBREAK FOLLOWING EARTHQUAKE^{12,13}





Research Gap: What are we trying to address??



- How people adapt their WASH behavior after natural disaster?
- Is the adapted behavior helping or hurting their risks of getting infected with diarrheal diseases?
- Although intervention works, how effective is it in removing pathogens from households (microbial analysis)?





Interrelation: WASH Behavior and Other Factors









Pathogen exposure pathways at temporary and permanent settlements two years after the Nepal earthquake

Village 1: Permanent Settlements



Village 3: Temporary Settlements







10 Houses



- Both villages are located in one of the high risk districts for diarrheal diseases.
- They have similar population size and almost same hydroclimatic conditions.
- Water and sanitation samples were taken in 2017 from these two villages in triplicates for microbial quantification.
- Approximately 30 samples for each sample type for each village (V1 and V3) adding up to ~360 samples per sampling season.





Sample Types: F- Diagram



- 6 sample type collected from each house in each sampling round (3 sampling rounds)
 - Drinking Water (DW)
 - Cleaning Water (CW)
 - Handwash Water (HW)
 - Swab Toilet Handle (TH)
 - Swab Utensils (U)
 - Swab Water Vessel (WV)





Experimental Method







Biomark System

- Can simultaneously quantify up to 48 pathogens in the same sample.
- Faster, efficient and reliable quantification as conventional qPCR.
- 24 assays (bacterial pathogenic genes) were selected based on the primer validity and disease incidences in Nepal.
- 10 plates ran for total >300 samples collected in 2017.





48x48 plate = 2,304 reactions Less labor and less time than conventional qPCR



Results: Fluidigm Result





- Average assay efficiency = 93.4% Only assays
- greater than 90% and less than 110% are considered for the analysis.



Results: Overall detection in all samples



- Highest detection of *Enterococcus spp.* in ~78% of the samples.
- 63% of samples were positive for Legionella pneumphila.
- 34% of total samples had one gene of Salmonella typhimurium.







Enterococcus spp. significantly higher in toilet handle, utensils and water vessels in V3 compared to V1









Difference in *Legionella pneumophila* (miP) was only observed in water vessel







Statistical data between V1 and V3



Stat Summary: 🐴 V1 🚯 V3

		Enterococcus spp.	<i>E. coli</i> (uidA)	<i>Salmonella</i> (ttrC)	STEC (stx2)	<i>E. coli</i> (ftsZ)	<i>Legionella</i> (mip)
CW		0.66	0.29	0.18	0.63	0.18	0.96
DW	ц Ц	0.59	0.65	0.042*	0.91	0.97	0.90
НW	Ê	0.20	0.98	0.027*	0.30	0.92	0.76
ΤН		<0.001***	0.51	0.14	0.19	0.55	0.95
U		0.013**	0.61	0.21	0.66	0.33	0.59
WV		<0.001***	0.74	0.0018**	0.43	0.24	0.002**



Can microbial composition help us understand this in a better way?



- Possible difference in bacterial profile between different villages and different samples were sought.
- Investigate the 16S profile to see if we missed any important bacteria.
- Investigate whether or not, there is a transfer between water samples and hygiene samples.



Previous studies have also shown different between attached and freeliving bacterial profile



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Microbes were evenly distributed between V1 and V3







Microbial composition different between sample type





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Relative Abundance: Class level







- *Enterococcus* spp. indicated a possible higher risk in the village with temporary settlements compared to the village with permanent settlements.
- Possible high risk of infection by *Salmonella typhirimium* and *Legionella penumophila* from water vessel. QMRA will make this more clear.
- Sequencing results showed a very different bacterial profile for sanitation samples compared to water samples. Pathogenic family more dominant in swab samples compared to water samples.
- Recovery affects microbial contamination.





Side note: Undergrads contributed a lot to this project



Thank you!

















