KEY RECOMMENDATIONS ON WATER, SANITATION AND HYGIENE COVID – 19

INSTITUTIONS RESPONSIBLE FOR WATER AND SANITATION

MESSAGES TO INSTITUTIONS RESPONSIBLE FOR WATER AND SANITATION IN THE COUNTRIES

Those persons who are responsible for water and sanitation have a relevant role in the prevention and control of COVID-19, and it is important that water, sanitation and hygiene services are managed safely, ensuring compliance with national regulations.

It is recommended to activate the coordination mechanisms between the different sectors related to water and sanitation such as: health, education, housing, environment, municipalities, governing and regulatory institutions, among others, to facilitate joint, timely and higher impact actions. Below, mention is made of key recommendations in three areas of action:

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1 OMS Water, sanitation, hygiene and waste management for the COVID-19 virus, Technical brief.
2 These recommendations are based on scientific evidence available as of March 23rd, 2020.
To ensure the microbial safety of drinking water, it is necessary to:

a) Evaluate the whole system and components, through sanitary inspection, to determine possible dangers;

b) Determine the necessary control measures to reduce or eliminate the dangers and carry out operational monitoring to guarantee the effectiveness of the system barriers; and;

c) Develop management plans that describe the measures to be taken under normal circumstances and in emergency situations.

The presence of the COVID-19 virus has not been detected in drinking water supplies and, according to current evidence, the risk to water supplies is low.

Measures to improve water safety:

- Protection of water from the source to the house. Water treatment (at the point of distribution, collection or consumption) is essential.

- Effective centralized disinfection. There must be a residual concentration of free chlorine of $\geq 0.5$ mg / L at least 30 minutes after coming into contact with water, with $PH < 8.0$. Residual chlorine must be maintained throughout the distribution system.

- Strengthen surveillance actions in the system, including sanitary inspection.

- Implement Water Safety Plans (PSA) and evaluate the risk of the systems.

- At home, encourage families to treat and store water in clean containers and to cover them.

- In areas where there is no conventional water supply service, consider conventional treatment technologies such as home filters.

- In communities without supply systems, promote boiling of water, home disinfection with calcium hypochlorite (HTH), generally 70%, sodium hypochlorite (commercial liquid chlorine without aromas, this is approximately 5%), silver colloidal.

- Prioritize ensuring a chlorinated water supply to health facilities.

- Water companies must guarantee the water supply in those places where there is no 24-hour water availability, so that people in these sectors carry out timely personal hygiene and home hygiene actions, as well as the availability of treated water in their homes. If water is distributed in tankers or bowsers, ensure that the residual chlorine dose is between 0.5 and 1 mg / litre. Additionally, it is important to promote water management messages in the home and home treatment where there is no access to the service.
There is no evidence to date that the COVID-19 virus has been transmitted through sewer systems; however, as part of an integrated public health policy, wastewater transported in sewage systems should ideally be treated with optimal design management and centralized management in wastewater treatment.

- Waste stabilization ponds (oxidation ponds or ponds) are generally considered a practical and simple wastewater treatment technology that is particularly suitable for the destruction of pathogens.
- A final disinfection step can be considered if existing wastewater treatment plants are not optimized to remove viruses.
- Workers should wear appropriate personal protective equipment (PPE), including external protective clothing, disposable gloves, boots, goggles or face shield, mask, frequently perform hand hygiene, and avoid touching their eyes, nose, and mouth with unwashed hands.

Workers who collect infectious waste from health care facilities should wear appropriate PPE, including: external protective clothing, disposables gloves, boots, goggles or face shield, mask. In addition, it is recommended to frequently carry out hand hygiene and avoid touching your eyes, nose and mouth before and after using personal protective equipment.

Ensure the segregated collection between municipal solid waste and that of health facilities, as well as its safe final disposal.

Ensure safe final disposal of infectious biological waste. In the case of having a sanitary landfill, they must be placed in the safety cells for this type of waste. For municipalities that only have garbage dumps, an area must be selected, a pit must be opened and fenced, leaving an access door, so that infectious biological waste that should not be burned is deposited, cover the waste. Ensure the monitoring of this process.