Pilot field comparison of traditional alum flocculation, chlorination, and combined flocculation-chlorination point-of-use water treatment on drinking water quality in Western Kenya

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Woman collects drinking water from a turbid pond Asembo, Western Kenya

## Background

- 1.1 billion persons lack access to improved water
- Diarrheal disease kills >2 million persons annually
- 'Point-of-use' approaches to improving drinking water
  - Require little infrastructure
  - Are suited to rural settings
  - Empower individuals to make water safe for their families
- 'Point-of-use' disinfectants (e.g., sodium hypochlorite) are likely to perform poorly for highly turbid source water

Aim

 To compare the effect on water quality indicators of traditional alum flocculation, chlorination, and combined flocculationchlorination (Pur A and Pur B) point-of-use water treatment on drinking water quality in Western Kenya over a range of source water turbidities

## **Methods and Materials**

• 30 water sources



10 low turbidity (<10 NTU)

10 medium turbidity (10-100 NTU)

10 high turbidity (>100 NTU)

- Six treatments
  - Combined flocculation-chlorination product yielding ~3.5 mg/L free chlorine (Pur A)
  - Combined flocculation-chlorination product yielding ~2.0 mg/L free chlorine (Pur B)
  - Locally produced water disinfectant yielding ~5.0 mg/L free chlorine (Klorin)
  - Locally available alum flocculant ~100 g for 60 seconds
  - Alum + Klorin
  - Untreated control

### Outcomes

- Turbidity measured by Hach 2100P Portable Turbidimeter (Hach Company, Loveland, CO)
- Free and total chlorine concentration measured by Hach Portable DR/890 Colorimeter (Hach Company, Loveland, CO)
- pH measured by IQ 150 Handheld pH Meter (IQ Scientific Instruments Inc, San Diego, CA)
- *E. coli* concentration measured by Colilert Quantitray 2000 system (IDEXX Laboratories Incorporated, Westbrook, ME)



**Point-of-use water treatments evaluated** 



#### **Turbid water after treatment with Pur**

### Results

Before treatment, turbidity and *Escherichia coli* concentrations were highest in pond water, followed by stream, river, lake, spring, and borehole water

Turbidity by untreated source water type, Asembo and Gem, 2002







\*WHO guideline <1 *E. coli* CFU/100 mL

## Turbidity by untreated source water type, Asembo and Gem, 2002



Mean NTU



Visual impact of water treatments on highly turbid source water

# Effect of water treatments on turbidity by turbidity, Asembo and Gem, 2002



\*Includes two water sources where one sachet of Pur failed to form floc

Although Klorin delivers a higher chlorine dose compared to Pur A, free chlorine levels measured 30 minutes after water treatment were higher for Pur A compared to Klorin alone



\*Measured 30 minutes after treatment

**Alum-based treatments lower pH substantially** 

### Effect of water treatments on pH Asembo and Gem, 2002



## Effect water treatments on *E. coli* concentration, Asembo and Gem, 2002



\*WHO guideline <1 *E. coli* CFU/100 mL

Only treatments that combined flocculation and chlorination performed well in high-turbidity waters Treatments that included disinfectant performed well in low- and medium-turbidity waters

Proportion waters with <1 *E. coli*/100 mL after treatment, Asembo and Gem, 2002



## Conclusions

#### • Pur A

- Mitigates turbidity
- Achieves <1 *E. coli*/100 mL in even
  high-turbidity water
- Maintains neutral pH

#### • Pur B

- Mitigates turbidity
- Achieves <1 *E. coli*/100 mL in lowand medium-turbidity water
- Maintains neutral pH

- Alum alone
  - Mitigates turbidity
  - Lowers *E. coli* concentration, but not to <1/100 mL</li>
  - Lowers pH
- Klorin alone
  - No impact on turbidity
  - Achieves <1 *E. coli*/100 mL in low- and medium-turbidity water
  - Does not render high-turbidity water potable
- Alum + Klorin
  - Mitigates turbidity
  - Achieves <1 *E. coli*/100 mL in high-turbidity water
  - Lowers pH

## Ongoing health outcome study

- Launched in Asembo and Gem, Western Kenya, 2003
- 600 homes (>6,500 persons) randomly assigned to use
  - Pur A , or
  - Klorin, or
  - Traditional practices
- 20 week duration
  - Main outcomes
  - Diarrhea prevalence (especially of children <2 years)</li>
  - Intervention acceptability
  - Water quality