

# Drinking water under a "One Health" lens: quantifying microbial contamination pathways between livestock and drinking water

<b>Submission date</b> 11/12/2017	<b>Recruitment status</b> No longer recruiting	<input checked="" type="checkbox"/> Prospectively registered <input type="checkbox"/> Protocol
<b>Registration date</b> 19/12/2017	<b>Overall study status</b> Completed	<input type="checkbox"/> Statistical analysis plan <input checked="" type="checkbox"/> Results
<b>Last Edited</b> 23/04/2021	<b>Condition category</b> Digestive System	<input type="checkbox"/> Individual participant data

## Plain English summary of protocol

### Background and study aims

Diarrhoeal disease and lack of access to safe water remain significant public health issues in developing countries. There is also growing concern about the potential for disease, including diarrhoeal infections, to be transmitted from livestock to humans. This project addresses the potential drinking-water contamination risks to human health in rural sub-Saharan Africa, where people and livestock often live in close proximity. Preliminary fieldwork will be carried out in rural Kenya, building on an ongoing study that is simultaneously recording human and livestock disease in ten villages. The fieldwork will test different techniques to identify contamination hazards from livestock, alongside water quality testing and recording of diarrhoea in children. These techniques will include checklists for recording signs of livestock hazards at water sources and around water stored in the home. The aim of this study is to look at how feasible it is to record hazards using these techniques and statistically assess whether we find greater water contamination and greater diarrhoea in children where there are more recorded hazards.

### Who can participate?

Children aged 6-59 months old and their households.

### What does the study involve?

Participants who agree to take part in the study are asked about how they store, treat and handle water in the home, as well as livestock-keeping, handwashing and sanitation arrangements. The study team makes observations of potential contamination hazards, both concerning water stored in the home and at water sources. The study team also takes samples of source water and of water stored in the home, testing these for microbial contamination. The team returns 12 weeks later, asking the same questions, taking the same water samples, and making the same observations. Participants are also asked about diarrhea in children 1 week and 13 weeks later as part of the ongoing study of human and livestock disease.

What are the possible benefits and risks of participating?

Where practical to do so, participants are provided with advice on steps that could be taken to reduce contamination risks affecting water sources such as wells or rainwater systems. There is potential for the study team to inadvertently contaminate stored water during sampling.

Where is the study run from?

Kenya Medical Research Institute (Kenya)

When is the study starting and how long is it expected to run for?

October 2016 to December 2018

Who is funding the study?

Medical Research Council (UK)

Who is the main contact?

Dr James Wright

## Contact information

**Type(s)**

Public

**Contact name**

Dr James Wright

**ORCID ID**

<https://orcid.org/0000-0002-8842-2181>

**Contact details**

University of Southampton  
Geography and Environment  
Highfield  
Southampton  
United Kingdom  
SO17 1BJ

## Additional identifiers

**Protocol serial number**

MR/P024920/1

## Study information

**Scientific Title**

A longitudinal study of child diarrhoea and stored water contamination in rural Kenyan households in relation to livestock management and ownership

**Acronym**

OneHealthWater

## **Study objectives**

Livestock management and ownership affects faecal contamination of household stored water and thereby diarrhoea in children.

## **Ethics approval required**

Old ethics approval format

## **Ethics approval(s)**

1. Kenya Medical Research Institute Scientific and Ethics Review Unit, 17/10/2017, ref: KEMRI/SERU/CGHR/091/3493
2. Ethics Committee of the Faculty of Social, Human and Mathematical Sciences, University of Southampton, 20/07/2017, ref: 25247

## **Study design**

Prospective observational longitudinal study at a single centre, Siaya County, Kenya, with two sets of observations taking place in wet and dry seasons in a six month period

## **Primary study design**

Observational

## **Study type(s)**

Prevention

## **Health condition(s) or problem(s) studied**

Self-reported diarrhoeal disease

## **Interventions**

Participants who give their informed consent to participate in the study are asked via questionnaire interview about how they store, treat and handle water in the home, as well as livestock-keeping, handwashing and sanitation arrangements. Recording observations and questionnaire responses via cell phone data entry, the study team makes observations of potential contamination hazards, both concerning water stored in the home and at water sources. The study team also takes samples of source water and of water stored in the home, testing these for two faecal indicator bacteria groups, *E. coli* and intestinal enterococci. The team then returns 12 weeks after baseline to administer the same questionnaire, taking the same water samples and testing these for faecal indicator bacteria, and making the same observations. Participants are also asked via questionnaire interview about diarrhea in children 1 week and 13 weeks after baseline, via their participation in the ongoing linked human and animal disease syndromic (PBASS) study. The total duration of observation is thus 13 weeks with 12 weeks of follow-up, thereby observing conditions in both wet and dry season.

## **Intervention Type**

Other

## **Primary outcome(s)**

*E. coli* and intestinal enterococci in household stored water are measured respectively through membrane filtration (0.45µm pore size) and culture with chromogenic coliform agar medium (incubation period: 24 hours) and m-Enterococcus agar medium (incubation period: 48 hours), followed by enumeration of both target organisms at baseline and 12 weeks thereafter.

## **Key secondary outcome(s)**

Self-reported diarrhea (defined as  $\geq 3$  loose stools within a 24-hour period) is measured using questionnaire interview to household members at 1 week and 13 weeks.

**Completion date**

14/12/2018

## Eligibility

**Key inclusion criteria**

1. Children aged 6-59 months (as the cohort at greatest risk of diarrhoeal disease) in households
2. Participating in an ongoing population-based animal syndromic surveillance (PBASS) study

**Participant type(s)**

Healthy volunteer

**Healthy volunteers allowed**

No

**Age group**

Child

**Lower age limit**

6 months

**Upper age limit**

59 months

**Sex**

All

**Total final enrolment**

234

**Key exclusion criteria**

Child's carer/parent unavailable or unable to provide informed consent

**Date of first enrolment**

13/02/2018

**Date of final enrolment**

29/03/2018

## Locations

**Countries of recruitment**

Kenya

**Study participating centre**

**Kenya Medical Research Institute**  
Kisumu  
Kenya  
PO Box 1578-40100

## Sponsor information

### Organisation

University of Southampton

### ROR

<https://ror.org/01ryk1543>

## Funder(s)

### Funder type

Government

### Funder Name

Medical Research Council

### Alternative Name(s)

Medical Research Council (United Kingdom), UK Medical Research Council, Medical Research Committee and Advisory Council, MRC

### Funding Body Type

Government organisation

### Funding Body Subtype

National government

### Location

United Kingdom

### Funder Name

Department for International Development

### Alternative Name(s)

Department for International Development, UK, DFID

### Funding Body Type

Government organisation

## Funding Body Subtype

National government

## Location

United Kingdom

# Results and Publications

## Individual participant data (IPD) sharing plan

The datasets generated during and/or analysed during the current study will be stored in a publicly available repository at <http://doi.org/10.5255/UKDA-SN-854302>.

## IPD sharing plan summary

Stored in repository

## Study outputs

Output type	Details	Date created	Date added	Peer reviewed?	Patient-facing?
<a href="#">Results article</a>		01/09/2020	23/04/2021	Yes	No
<a href="#">Basic results</a>		07/06/2020	11/06/2020	No	No
<a href="#">Other files</a>	Consent form version v1.5	14/12/2017	09/08/2018	No	No
<a href="#">Participant information sheet</a>	version v1.5	14/12/2017	09/08/2018	No	Yes
<a href="#">Study website</a>	Study website	11/11/2025	11/11/2025	No	Yes