

Determine the best plan to improve health in rural areas related to water and sanitation?

Best methods of measuring improvement?

- 1) One year from today what would be different in health of populations that could be celebrated?

Support at State and Federal levels

- 1) Well supported at federal level (ex. Murkowski)
- 2) Some support at State, but economic limitations

Innovations vs. Current technologies

Health benefits to improved water and sanitation...

- 1) Strategy for capturing the health benefits / effects of improved water and sanitation
- 2) Maximizing the health benefits of the technology
- 3) Assessing the potential benchmarks
- 4) Standard education to go along with improved water and sanitation

5 year goal for health

10 year goal for health

Categories to measure 1) respiratory disease, 2) dental decay, 3) diarrheal disease, 4) skin disease

Can improved water and sanitation mechanisms lead to other potential health improvements like recycling waste to allow green house projects and increased jobs

What are the effective ways to treat waste so that it can be applied safely?

Improved quality and quantity of water may be priority over sanitation...

Health issues can provide leverage and advocacy

- 1) Economic aspects of health gains
- 2) Characterize waterborne and/or waterwash disease burden

What does cost for hospitalization of waterborne/sanitation diseases? Some evidence that these interventions pay off 23 to 1. Policymakers need this data to believe that waterborne disease is an issue.

Who are most affected and what are the most realistic solutions in 1 to 5 years?

Elderly, children, infants?

Who gets new resources first? IHS prioritization is in place for water, but not based on health effects

Kwethluk coming online soon...consider determining disease rates now, so that post-implementation rates can be compared to pre-implementation rates.

Potable water available in almost all villages via washeteria...

Community education is key...need education on handwashing, need education on changing the communal eating off the same plate.

Observation on site of water use (and potential contamination via cultural use)

CDC, DHSS, ANTHC may not be on the same stage...

Urban vs. rural legislators are not on the same page

Can losses be framed in terms of Medicaid dollars (more meaningful to State)?

Out of the box items...

- 1) Look at subset of population (the most vulnerable of the vulnerable).
- 2) Hygiene education study and absenteeism (coupled with an education campaign)
- 3) Study disease rates prior to institution of water system in a vulnerable village