

escasos recursos económicos, situación que la obliga a asentarse en sitios carentes de servicios básicos, creándose así asentamientos humanos irregulares.<sup>3</sup>

La aptitud del agua es supervisada mediante la aplicación de criterios (estándar y guías). En Perú se carece de datos sensibles actuales a este respecto. La norma técnica nacional 214.003 ITENTEC y sus indicadores no garantizan que el agua que se consume no presente riesgos para la salud humana, ya que es una recopilación de normas aplicadas en el extranjero, donde priva una realidad muy distante a la nacional.<sup>4</sup>

Lima presenta una elevada prevalencia de enfermedades infectocontagiosas por microorganismos presentes en el agua;<sup>5</sup> los asentamientos humanos son abastecidos de este líquido mediante sistemas de cañerías y camiones cisterna. En ambos casos, la aptitud para el consumo es cuestionable.

Al revisar la literatura sobre calidad del agua en asentamientos humanos se hizo evidente que los trabajos al respecto son escasos, por no decir inexistentes. Así entonces, para establecer medidas sanitarias relativas al consumo de agua potable es necesario promover investigación relevante sobre la calidad de la misma.

En la actualidad, el Instituto de Investigación en Ciencias Biomédicas desarrolla un proyecto piloto cuyo objetivo es determinar la calidad del agua para consumo humano en el asentamiento de Casa Huerta, Lima. Sus habitantes consumen agua que proviene de un único caño de la red pública y de camiones cisterna. Las viviendas no cuentan con un sistema de cañerías, por lo que las personas almacenan el agua en depósitos de plástico, en algunos casos sin tapar, exponiendo el líquido a factores de riesgo que podrían contaminarla, como por ejemplo el hecho de que la mayoría de las viviendas tienen suelo de tierra, además de que abundan los animales y de que a menos de 100 metros se practica la crianza de cerdos de legalidad desconocida.

La municipalidad de San Juan de Miraflores aplica un programa de control de calidad del agua en asentamientos hu-

manos. Sin embargo, datos preliminares de nuestro estudio tomados del ciclo de distribución del agua demuestran que sólo 30% de las muestras tomadas fueron aptas para el consumo humano, lo cual generó una alerta epidemiológica ante las autoridades de salud ambiental, además de constituir un primer antecedente para identificar la situación real del control del agua en los asentamientos humanos en Perú.

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## Local committees for health administration: What can be improved through health policy

*To the editor:* Years ago Iwami *et al.* reported to the public health community the implementation of the Local Committees for Health Administration (LCHA), within

the primary level of the Peruvian health care system.<sup>1</sup> These are community-based organizations in which the community and the responsible for allocating budgets make joint decisions based on the health needs, assessed by the community itself.<sup>1</sup> It could have been thought that, because it is the organized community who takes care of itself, the resources will be better used, as they meet their exact needs; however, the authors found some limitations: i) poor communication with regional authorities as there were no clear guidelines for this relationship, and ii) lack of training among its administrators.<sup>1</sup>

I would like to point out some of the guidelines and laws that have been promoted by the government to address the LCHA's limitations, since they were first presented.

The Law 29124 (October, 2007), clearly establishes what duties belong to either the LCHA's government or to the Regional/Local Government. The former should use efficiently the resources (human and material) in order to satisfy the needs targeted at the Local Health Plan (which should have been identified through surveys, meetings and active participation of the community); also, to foster the participation of the community in health promotion activities, among other responsibilities. The Local/Regional Government, on the other hand, should provide the infrastructure and equipment to achieve the aims of the Local Health Plan, supervising the correct use of the financial resources and verifying that the LCHA's government is consistent with the law, among a few more duties.<sup>2</sup> Both entities should promote and provide, respectively, the continuing education of the LCHA's administration force, in order to ensure the good quality of its work. These, and other details of the LCHA's responsibilities, goals and plans, are detailed in the Law's guideline (Supreme Decree 017-2008-SA), published in the year 2008.<sup>3</sup> In table I, I present the laws and guidelines regarding LCHAs, published after the year 2002.

This letter's objective is neither to state that LCHAs are the best option

**Table I**  
**LAWS, GUIDELINES, AND THEIR OBJECTIVES, REGARDING LCHAs, ALL PUBLISHED AFTER 2002**

Law/Guideline	Date	Objective
Law N°29124	October 2007	To establish the general framework of the community's participation within the primary level of the health care system, in order to improve the quality and foster an equal access to health services through the participation of the organized community, according to the process of decentralization of health services.
Supreme Decree N° 017-2008-SA	July 2008	To establish the guidelines for the development of the community's participation, sanitary, administrative, legal and financial issues stated in the Law N° 29124.
Supreme Decree N° 010-2009-SA	June 2009	To postpone for six months, the time limit to adequate new implementations stated in the Supreme Decree N° 017-2008-SA.

for the primary level of any health care system, nor to highlight the work of the LCHAs at Peru. The real aim of this communication is to show that even though, at first, some health initiatives might not work as well as expected or plenty of limitation might arise, with adequate health policies and with the government commitment on health issues, plans and new strategies will survive, improve, and

impact positively on any community's health. However, continuous assessment, through research<sup>4,5</sup> and other methods, must be carried out to ensure the highest standards are achieved.

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