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Mandate of the Special Rapporteur on the human rights to safe drinking water and sanitation
Questionnaire for non-State Actors

The principle of accountability in the context of the human rights to safe drinking water and sanitation
As part of his research, the Special Rapporteur welcomes responses to the following questions:

1. Please describe the role and responsibilities of your organization in the water and sanitation sector.

TAM Ceramics of New York LLC < tamceramics.com > is beginning large scale production of water filter media of granulated ceramics, as contains a small amount silver, as from August 2017. The product specific site, while temporary, is: < <http://rharvey211.wixsite.com/tamceramics> >.

Note that while TAM Ceramics has the means to get pathogen free water to far larger numbers of those vulnerable than has been the case up to the present, most entries following apply to the experience of the inventor, as it were, and author here, A. Reid Harvey; as prior to August 2017. I.e. the water filter media of granulated ceramics will get point-of-use safe drinking water to entire communities, and not merely to individual households.

2. Depending on the role and responsibilities of your organization, please provide information on how the **principle of accountability is defined and applied** in the policies and activities of your organization, particularly to ensure the realization of the human rights to safe drinking water and sanitation.

While TAM Ceramics is in business to make money there is a consensus within that the needs of those vulnerable in the developing world are a priority. As of August 2017, following such a business model appears to be far more viable than pursuing strictly humanitarian objectives.

Alternatively, please provide information on how the **principle of accountability is defined and applied** in the legal, policy and institutional frameworks of the State(s) with whom your organization is working, particularly to ensure the realization of the human rights to safe drinking water and sanitation.

Because implementation in a humanitarian context had not been possible, upcoming distribution of this water filter media is dependent on the good conscience of TAM's business management. The model of community-sized, POU water filters, however, will make this far more viable.

3. Please describe any **challenges or gaps identified** when applying and implementing the principle of accountability in relation to the human rights to safe drinking water and sanitation. How were these challenges and gaps addressed?

In 2009, at a conference that included key decision makers (not to be named) there was to have been a meeting with me for planning the implementation of the water filter media. Having missed the meeting there was a lot of anger that effectively ruled out a second opportunity to meet. As a result, the technology of water filter media of granulated ceramics has been essentially suppressed, whether actively or not.

Responsibility

4. Please provide information on the **level of clarity and transparency of the roles and responsibilities, and performance standards of State and non-State actors** in accordance with the normative content of the human rights to water and sanitation. In other words, how are defined the roles of the actors responsible for the accessibility, availability, affordability, acceptability and quality of water and sanitation services in an equal and non-discriminatory manner.

Please allow a bit of commentary, that the question makes it sound as if decision makers behind this will be called to account. This should not be, in large part because the author himself has not been the best at forming such partnerships as those suggested. Those living in glass houses should not throw stones.

5. Please provide information on the **availability and accessibility of information about State and non-State actors** responsible for the realization of the human rights to safe drinking water and sanitation.

From 2003 to 2009 there was a lot of participation in international conferences, bringing about an awareness of the technology. From 2009 to 2013 there was little of this due to a lot of displeasure among decision makers. From 2013 to 2015 there was a building of awareness in Kenya, familiarizing stake holders. From 2015 to 2017, research was undertaken in collaboration with faculty of ceramic engineering, at the New York State College of Ceramics at Alfred University.

Answerability

6. Please provide examples of good practices or gaps on **how the State informs individuals or civil society organisations** of its progress, retrogression and failures in the realization of the human rights to safe drinking water and sanitation.

This very questionnaire gives indication that there are checks and balances, such that the objective of maximizing numbers of beneficiaries will be achieved. Decision makers need to look over each other's shoulders. In this way the right to safe drinking water will not be a hollow promise.

7. Please provide examples of good practices or gaps on how individuals or civil society organisations **obtain reasoned justification for actions and decision** of State and non-State actors.

Decision makers and lead organization need to be proactive, giving guidance as to best practices, while this has not been done. If not, those decision makers in the developing world are most likely not to act; not to take initiative. Without good guidance there are likely to be too many disparate opinions to allow for sound decisions. We must always seek out sustainable solutions that are inexpensive as such. Clearly there is a lot of pressure from those who are out for a lot of profit, and only clear guidance from lead organizations will prevent this.

8. Please outline the main **obstacles encountered when accessing existing accountability mechanisms***. *Examples may include judicial, quasi-judicial, administrative, political and social mechanisms.

As in no. 7, without clear guidance there are a great many roadblocks.

Enforceability

9. Please share your experiences in **holding States accountable** for violation of the human rights to safe drinking water and sanitation. How do these mechanisms work in practice?

Personally, I have no wish to hold anyone accountable.

10. Please provide examples of **accountability mechanisms* suited for holding non-State actors** accountable for breaches of its responsibility to respect human rights to safe drinking water and sanitation.

*Examples may include judicial, quasi-judicial, administrative, political and social mechanisms.

We need to look to the future while letting bygones be bygones.

11. Please describe **how your organization participated in mechanisms to hold State and non-State actors accountable** for the violation or abuse of the rights to water and sanitation. Has the contribution been taken into account in a meaningful manner and has it been included in State's follow-up action and reporting?

TAM Ceramics is new to this and can only contribute to upgrading objectives when next the MDGs/SDGs are updated with new goals. Far greater numbers of those vulnerable can be accounted for, for those who will get safe drinking water.

12. Please provide information on specific cases where **compliance with outcomes** of accountability mechanisms was or was not ensured or implemented.

As above. Many thanks for the opportunity of input!