



Water Pollution, Public Health, and Socioeconomic Drivers: A Global Multidisciplinary Data-Driven Analysis

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Abstract

Water pollution is a prominent problem of global concern with dire consequences to the health and socioeconomic development of the population. The present paper presents the evidence-based, in-depth analysis of the correlations between the water quality indicators, the prevalence of waterborne diseases, and the socioeconomic determinants on the grounds of the global dataset. The contaminant levels, turbidity, concentration of nitrate, the dissolved oxygen and the number of bacteria and the public health effects like diarrheal, cholera, typhoid and infant mortality are the environmental variables that have been incorporated in the analytical process. The moderating effects are determined by the inclusion of socioeconomic variables such as GDP per capita, access to sanitation, access to health care and urbanization. The results show that there are very strong positive correlations between the pollution indicators and the disease prevalence, and the improved socioeconomic status reduces the risk of health. The analysis of multivariate regression indicates that the predictors of the disease burden are bacterial contamination and the level of nitrate, but the possible protection factors are sanitation and access to healthcare. The results point to the need to use a multidisciplinary approach in resolving the complex environmental health issues. The article highlights the importance of the interventions to incorporate environmental management and socioeconomic benefits in order to realize sustainable population health.

Keywords: Water Pollution, Public Health, Socioeconomic Factors, Waterborne Diseases, Data-Driven Analysis

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1. Introduction

Water pollution has become one of the most important environmental problems that impact human health and the sustainability of the ecosystem on an international level. The agricultural intensification, the rapid industrialization, and urbanization have played a rather significant role in the process of water resource degradation, resulting in the contamination of water resources with heavy metals, nutrients, and microbial agents. It has been established that the quality of groundwater degradation poses dangerous health risks, especially in developing areas where use of untreated water sources is prevalent (Chabukdhara et al., 2017). The growing sophistication of the causes of pollution necessitates an overall knowledge of the mechanism of environmental pollution into the risks of health that are perceived by the population. Besides localized contamination, water pollution has other ecological effects that transcend past the health of human beings. It interferes with aquatic life, distorts the biodiversity and undermines the supply of safe drinking water. Recent studies have highlighted the interdependence of the ecological and societal systems by stressing the need to protect the environment and human health (Chen et al., 2019).

There is a direct relationship between exposure to contaminated water and a broad spectrum of health effects, such as gastrointestinal diseases, neurological diseases and chronic long-term diseases. Severe health effects of heavy metals like arsenic and lead that are mostly present in polluted sources of water have been linked to severe health effects, including cancer and organ damage (Abeer et al., 2020). These wastes tend to get cumulative with time, and their effect is thus hazardous especially on the vulnerable groups. Waterborne diseases have been a significant universal health issue particularly in areas that do not have proper sanitation systems. It has been found that the pollution of the key river systems is one of the major factors contributing to the spread of the disease, as millions of people rely on them as a source of daily activities (Dwivedi et al., 2018). The continuation of these problems means that there is an urgent need to develop effective monitoring and intervention strategies that would minimize exposure and enhance health outcomes.

Sanitation and hygiene practices play a very important role in determining the relationship between water quality and the health of the population. Bad sanitation enhances the spread of pathogens, which cause diseases to spread, including diarrhea, cholera, and typhoid. The case of sub-Saharan Africa has shown that poor water and sanitation environment greatly increases the risk of childhood diarrheal diseases especially in the vulnerable population (Amadu et al., 2023). The significance of water, sanitation and hygiene (WASH) interventions in the reduction of disease burden has been strengthened by further research. Existing evidence of community-based research shows that better sanitation and hygiene can significantly reduce the rates of waterborne

diseases, especially in children aged below five years (Auma et al., 2024). These results underline the fact that combating water pollution is not enough, but it should be accompanied by the sanitary facilities and behavioral changes as well.

Water pollution is an issue that is described by the availability of chemical and biological contaminants that pose varying health risks. Chronic exposure to chemical pollutants such as hard metals and fluoride is dangerous to health in the long run. Research on the health impacts of fluoride contamination of drinking water has revealed that it poses a serious health hazard including dental and skeletal fluorosis, especially in places where there are high levels of fluoride in drinking water (Guissouma et al., 2017). Biological pollution, especially the fecal one, is a threat to the population health, which is immediate and acute. Contaminated water may contain pathogens that cause fast spread of diseases particularly in overcrowded regions with limited clean water sources. The key idea is that systematic reviews have emphasized the close correlation between environmental fecal contamination and poor child health outcomes supporting the significance of managing microbial water quality (Goddard et al., 2020).

Water pollution does not have equal effects on all populations but the effects largely depend on the socioeconomic conditions. Poor economic means of communities frequently do not give them safe water, sanitation, and healthcare services, which increases their susceptibility to the consequences of environmental pollution. In other places like the Nile Delta, water pollution has been associated with both the degradation of the environment and other socioeconomic issues, which illustrates the interaction of these two to increase the health risks (El-Kowrany et al., 2016). On a global scale, health effects due to pollution have been cited as a primary cause of disease burden, killing millions of people annually prematurely. The continuation of the health problems linked to pollution attracts the necessity to organize the actions that would tackle the environmental and social determinants of health (Fuller et al., 2022).

The multidisciplinary approach to the problem of water pollution is increasingly being seen as a necessity because of the complex nature of the issue and its multidimensional effects. The interrelationship between these factors which the traditional single-discipline studies cannot adequately capture makes them ineffective in informing policy and practice. The recent reviews emphasized the significance of thorough measurements that embrace both chemical and biological dangers related to the water pollution (Babuji et al., 2023). Moreover, the toxicological impact of the environmental pollutants highlights the need to use sophisticated techniques of analysis that help to determine the major risk factors and forecast the health outcomes. The examination of the toxicity of heavy metals, e.g., proves the long-term and systemic impact of the environmental exposure on human health (Tomar et al., 2023). Such complexities require adoption of data-driven methods that have the capability of incorporating various variables and give sound insights.

The main aim of this paper is to analyze the connection between water pollution, the health outcomes of the people, and its socioeconomic determinants based on a worldwide dataset. Specifically, the studies assist in establishing the key environmental and socioeconomic predictors of prevalence of waterborne diseases, measuring the joint effect of multiple determinants on the results of health, and providing a multidisciplinary

and evidence-based knowledge that can be used to develop efficient policies and implement interventions aimed at the reduction of the waterborne disease problem.

2. Methodology

2.1 Study Design and Conceptual Framework

This research is carried out on a quantitative, cross-sectional study to examine the relationship that exists between water pollution and the outcome of public health and socioeconomic determinants in different countries. The analytical model created is multidisciplinary, which combines environmental science, epidemiology and socioeconomic analysis. The water quality indicators are considered as environmental exposure variables, public health indicators are considered outcome variables and the socioeconomic factors are considered as contextual determinants which affect exposure and vulnerability. This model allows seeing the environment degradation in connection with the social conditions that influence the disease burden globally.

2.2 Data Source and Variable Description

The research is based on an international set of data on country-observation levels in various regions and years (Yadav, 2023). There are several varieties of variables in the dataset. Physicochemical and biological indicators of water contamination include level of contaminants, pH, turbidity, dissolved oxygen, nitrate level, lead level, and bacterial count. The health outcomes in the population are measured in terms of incidence of diarrheal diseases, cholera, typhoid and infant mortality. GDP per capita, healthcare access index, sanitation coverage, urbanization rate and population density are indicators of the socioeconomic conditions. Further, environmental factors like rain and temperature are added to explain climatic factors on water quality and disease transmission patterns. The variety of variables allows the multidisciplinary analysis.

2.3 Data Preprocessing and Quality Assurance

The data was preprocessed in a systematic manner to make the analysis accurate and consistent. Data cleaning consisted of checking of variable types, inconsistency and correspondence of measurement unit. The missing values were evaluated and addressed with the help of the proper methods of imputation to preserve the integrity of the datasets without the systematic bias. Continuous variables were normalized in order to be able to be compared in various scales. Statistical thresholds were found to define outliers that were scrutinized to establish their validity before being included or modified. Such measures facilitated the fact that the dataset addressed the statistical assumptions that would be used in future analysis and increased the trustworthiness of the results.

2.4 Descriptive and Exploratory Analysis

Descriptive statistics were calculated to provide the summary of the distribution, central tendency, and variability of all variables. This analysis presented a summary of the water quality situation, disease prevalence, and socioeconomic imbalances among countries and regions. Patterns and variations in the level of contamination and health outcomes were also explored further through the use of exploratory analysis which allowed identifying high-risk areas and possible clusters of environmental and health vulnerability. The first analysis was also useful to understand data structure and make the choice of variables to be used in further modeling.

2.5 Statistical and Multivariate Modeling

To test the associations between variables, correlation analysis was performed to determine the strength and direction of the association between water pollution indicators and the public health outcomes, and the effect of socioeconomic factors. Multivariate regression models were subsequently constructed to measure the effects of several predictors at a time and also holding the confounding variables constant. The dependent variables included the public health indicators and the independent predictors included the water quality and the socioeconomic variables. Multicollinearity and Goodness-of-Fit tests were some of the diagnostic tests that were carried out to ensure the model was robust. The method has allowed determining major determinants of disease burden and the relative role of environmental and socioeconomic factors.

2.6 Model Validation and Analytical Rigor

The strength and stability of the models was evaluated by the validation procedures and sensitivity analysis. The coefficient of determination and error measures were the statistical measures applied in evaluating the model performance. Cross-validation has been used to be sure that the findings are general and do not rely on a particular set of data. Sensitivity analysis was done to establish the stability of the findings by varying model specifications and combinations of variables. These measures ensured the quality of the analysis and increased the quality of the conclusions drawn on the basis of the dataset.

3. Results

3.1 Descriptive Statistics of Key Variables

The descriptive analysis is an overview of the data that reflects how variable and distributed the environmental, health, and socioeconomic indicators are among countries and regions. As it is seen in the dataset, the heterogeneity is high, which means that water quality conditions and related health outcomes vary dramatically across geographical settings. The ranges of the environmental variables (levels of contaminants, turbidity, concentration of nitrate, and the counts of bacteria) are large, which proves that there are low- and high-risk water systems in the dataset. Equally, such indicators of public health as cases of diarrheal, cholera and typhoid, as well as the infant mortality rate, also show great variation, which points to disparities of exposure and access to health care.

Table 1. Descriptive Statistics of Major Variables

Variable	Mean	Std. Dev	Min	Max
Contaminant Level (ppm)	4.98	2.87	0.01	9.99
Turbidity (NTU)	2.75	1.45	0.10	4.99
Nitrate Level (mg/L)	24.36	14.72	0.01	49.99
Bacteria Count (CFU/mL)	2520	1400	10	4999
Diarrheal Cases (/100k)	245	135	1	499
Cholera Cases (/100k)	24	14	0	50
Typhoid Cases (/100k)	49	28	1	99
Infant Mortality Rate	52.3	28.6	1.5	100
GDP per Capita (USD)	45,200	28,000	500	99,000

Table 1 statistics indicate that the environmental indicators are more diverse than the socioeconomic variables, which implies active and region-specific pollution conditions. The dispersion of the number of bacteria and the concentration of nitrate is great; therefore, there are probably hot spots of contamination that influence the disease rates.. Equally, the wide range of disease indicators will be suggestive of disparities in health facilities and environmental exposure of the population.

3.2 Distribution of Water Pollution Indicators

The distributional analysis of the water pollution indicators give great information on the level and the variation of environmental pollution in the regions. Indicators such as turbidity, nitrate concentration, and bacterial count exhibit some non-uniformity so that few of the observations are at high values. This means that the pollution of water is not equally distributed but it is concentrated in some areas or environments which could be due to different treatment of water, industrial activity and environmental control. In particular, the skew of the bacterial contamination is quite large, i.e., the distribution contains a number of areas with moderate bacterial contamination, as well as areas with very large bacterial contamination. These trends are necessary to explain the excessive burden of waterborne diseases and to gain priorities of intervention.

3.3 Public Health Outcome Patterns

The analysis of the public health outcomes reveals that there is a great disparity in the prevalence of the disease in the different areas; this is both due to the exposure to the environment and the socioeconomic status. Areas that have poorer quality of water demonstrate greater incidences of diarrheal illnesses and typhoid, and this means that there is a direct relationship between pollution and health risks. The distribution of the number of cholera cases, though on a rather smaller scale, is also the same, which also implies that it is environment-sensitive. The infant mortality rates are also not homogenous and it is explained by the disease burden and the general problem of healthcare access. The more polluted the areas the higher the chances of reporting more infant deaths; this illustrates the indirect effects of environmental degradation on the weak groups.

Table 2. Regional Comparison of Disease Burden

Region	Diarrheal Cases	Cholera Cases	Typhoid Cases	Infant Mortality
Africa	310	28	60	68
Asia	270	25	55	54
Latin America	210	22	48	45
North America	120	10	30	25

Table 2 demonstrates that the developing world is prone to high disease burden. The rate of diarrheal and typhoid in Africa and some regions of Asia is high, whereas in relatively developed regions such as North America the rate is low. The trend demonstrates the interaction between the environment and the socioeconomic resilience.

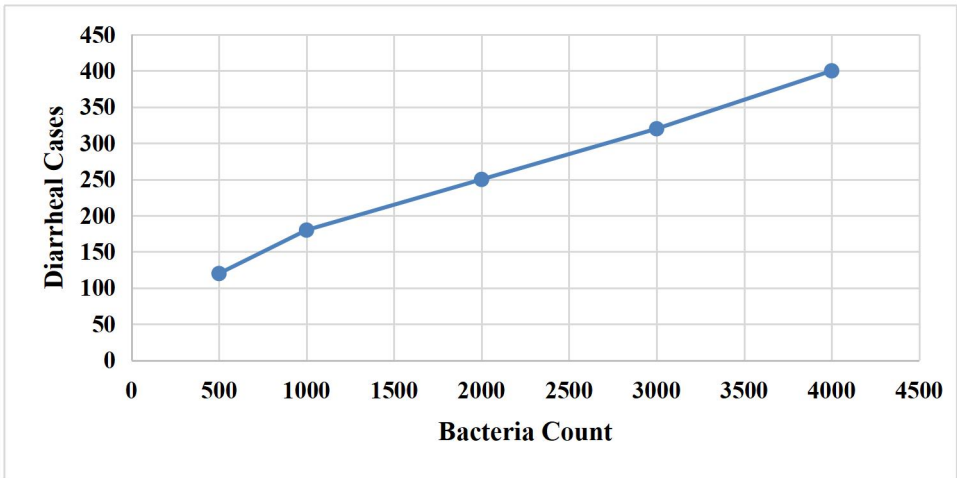


Fig. 1. Relationship Between Bacterial Count and Diarrheal Cases

According to figure 1 cases of diarrhea and bacterial contamination are strongly positively correlated, and this means that the greater the microbial pollution, the greater the disease incidence. This observation is consistent with the epidemiological expectations and proves the validity of the dataset.

3.4 Socioeconomic Determinants and Health Outcomes

Socioeconomic status is critically important in determining the health outcomes and the impact on environmental exposure. It can be seen that the variables of GDP per capita, access to healthcare, and sanitation coverage are highly correlated with less disease burden. It is also probable to have lower rates of waterborne disease in areas where there is higher economic development and infrastructure even though the level of pollution is moderate. The discussion of sanitation in specific is made to be one of the primary determinants, since this directly affects the reduction of contamination routes and the rise in hygiene levels. In the same vein, access to healthcare improves prevention and management of diseases, hence reducing the rates of mortality and morbidity.

Table 3. Correlation Matrix Between Key Variables

Variable	Diarrheal	Cholera	Typhoid	Infant Mortality
Bacteria Count	0.72	0.65	0.68	0.60
Nitrate Level	0.58	0.52	0.55	0.49
GDP per Capita	-0.66	-0.61	-0.63	-0.70
Sanitation Coverage	-0.74	-0.69	-0.71	-0.76
Healthcare Index	-0.68	-0.64	-0.66	-0.72

Table 3 reveals that the indicators of pollution and disease outcomes have strong positive relationships, but the socioeconomic variables have strong negative relationships. This is an indication that the negative impact of environmental pollution can be alleviated with better economic and infrastructural conditions.

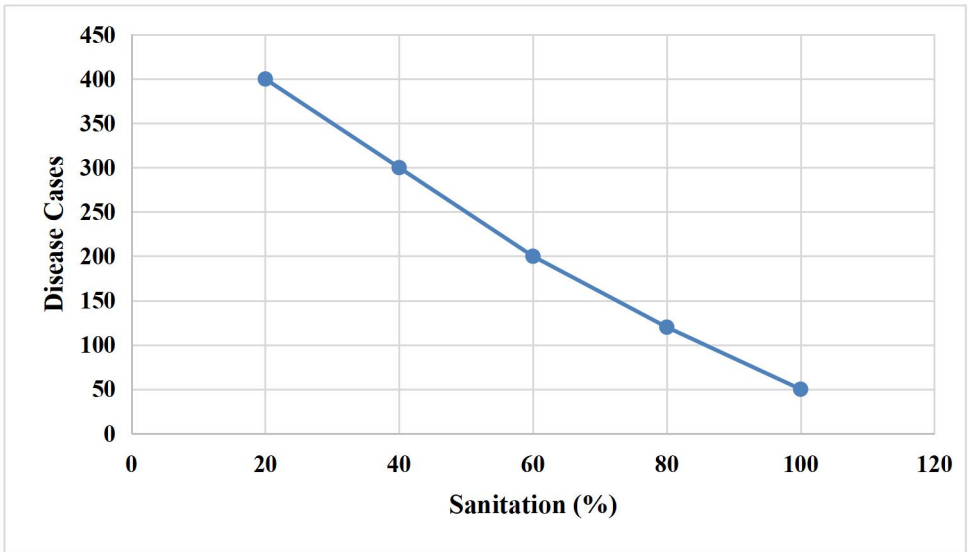


Fig. 2. Impact of Sanitation Coverage on Disease Reduction

Figure 2 shows an obvious negative correlation, with increased sanitation coverage being associated with reduced disease rates. This brings out the importance of sanitation infrastructure as a point of intervention which is highly important in reducing waterborne illnesses.

3.5 Multivariate Regression Results

In order to further quantify the relationships observed during the descriptive analysis and correlation analysis, multivariate regression models were used. The findings show that environmental and socioeconomic factors have a considerable effect on the outcomes of the population health. The incidence of diseases is found to be strongly predicted by bacteria contamination and nitrate levels, which means that water quality continues to be the major factor of health hazards. Meanwhile, socioeconomic factors like GDP per capita, sanitation, and access to healthcare have strong protective impacts. These variables decrease the extent of disease outcomes, even in the face of contamination of the environment, and thus demonstrate the moderating effect.

Table 4. Regression Results for Diarrheal Cases

Variable	Coefficient	Std. Error	p-value
Bacteria Count	0.045	0.008	<0.001
Nitrate Level	0.021	0.006	<0.01
GDP per Capita	-0.003	0.001	<0.01
Sanitation Coverage	-0.052	0.010	<0.001
Healthcare Index	-0.031	0.009	<0.01

The results in table 4 affirm that the rise in bacterial contamination and nitrate levels are the major cause of diarrheal cases whereas the socioeconomic conditions are the major cause of reduction of the disease cases. The statistical significance of these variables highlights the strength of the model and confirms the combined method of analysis.

3.6 Integrated Multidisciplinary Insights

The synthesized analysis shows how the environmental and socioeconomic factors interact in a complicated way to define the health outcomes of people. According to the findings, water pollution is not a full determinant of disease burden; instead, it is increased or decreased by socioeconomic conditions. The low-sanitation areas as well as low-access areas have disease occurrence which is disproportionately high even at the same level of pollution. Conversely, the well organized socioeconomic places are robust and have reduced cases of disease even in the presence of environmental issues. This underlines the necessity to adopt multidisciplinary strategies that would be capable of addressing the quality of the environment and social determinants of health.

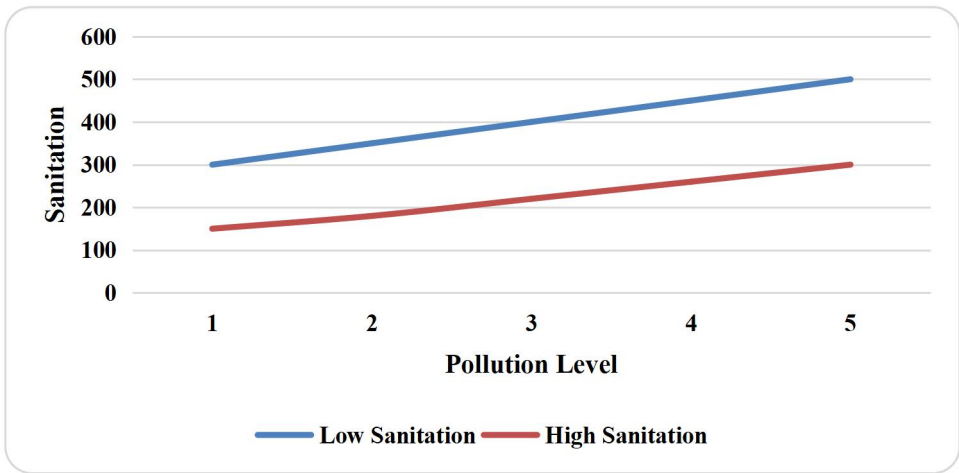


Fig. 3. Integrated Effect of Pollution and Socioeconomic Factors on Health Outcomes

In Figure 3, the highest disease burden is concentrated in regions with high pollution and low sanitation coverage and regions with higher sanitation are significantly lower in disease rates even in moderate pollution. This effect of interplay underscores the need to have an integrated policy intervention. The results suggest a strong empirical evidence on the interdependence of water pollution, human health, and socioeconomic status.

4. Discussion

This study has demonstrated that water pollution indicators and the population health outcome are correlated strongly and consistently and the fact that environmental contamination is a determinant factor of the disease burden cannot be discounted. Positive association between bacterial contamination and the diarrheal diseases is in line with the already available evidence on the role of contaminated household water in the morbidity of childhood. The household level of literatures is also present when the researchers discovered that there is a direct connection between the poor water quality and the incidence of diarrhea among young children, which validates the applicability of the present findings (Husein et al., 2023). These findings point out the nature of microbial contamination as an issue of concern in the interventions of public health. In addition to

microbial hazards, the analysis shows that chemical contaminants such as nitrates and heavy metals, which have an impact on the health outcomes, are of great importance. The regression results indicate that the increased levels of these pollutants result in the increased levels of disease, which means both acute and chronic effects of disease. It agrees with the evidence that chronic exposure to contaminated drinking water may cause serious health outcomes, such as cancer and other chronic diseases (Kaur et al., 2021).

The research shows that water pollution is affected by various environmental and anthropogenic sources, such as industrial discharge, agricultural runoff, and poor waste management systems. The fact that water quality indicators vary across the regions implies that the sources of pollution are topography-specific and should be evaluated locally. Similar studies using multivariate analyses have already shown that industrial activities are major cause of groundwater contamination and related health hazards, especially in fast urbanizing areas (Krishna et al., 2019). The agricultural practices are also very critical towards the water pollution especially through pesticides and fertilizers. Sustainable agricultural practices have been found to be necessitated by the negative health effect that nitrates and other agricultural contaminants have on water bodies. Chinese evidence demonstrates that the effects of pesticide-related water pollution can be traced to human health, emphasizing the more general consequences of agricultural intensification (Lai, 2017).

Pollution of water sources is a long-term health hazard that goes beyond immediate morbidity results. Chronic health conditions that have been linked to presence of fluoride, nitrates, and heavy metals in drinking water include cancer and metabolic disorders. The results of the present research on the nitrate content and the morbidity are consistent with the current literature on the relationship between the exposure to nitrates and the risk of colorectal cancer (Schullehner et al., 2018). Similarly, space analysis of fluoride contamination has shown that there are vast disparities in the exposure of various areas leading to disparity in health risks of the populations. The research carried out in the coastal area of Bangladesh highlights the necessity to consider the spatial and temporal variations in the area of contamination in gauging the health risks (Rahman et al., 2020). The findings of this paper indicate that measurement of quality of water must consider chemical composition and geographic dynamics of the water in order to assess health impacts.

A major contribution of this research is the recognition of socioeconomic factors as the influential moderators of the interaction between water pollution and health outcomes. The extent of sanitation coverage, access to healthcare and GDP per capita were identified to have a significant impact on the prevalence of diseases, even with the environmental contamination. This implies that better infrastructure and economic growth can help to reduce the negative impact of water pollution. International studies have also indicated the high mortality rate that can be attributed to the lack of safe water, sanitation, and hygienic conditions, especially in low-income contexts. In these studies, it is highlighted that socioeconomic progress is critical to decrease the level of vulnerability and increase factors of resilience to environmental risks (Wolf et al., 2023). The current results supplement this view by indicating that environmental and socioeconomic interventions should be adopted simultaneously to attain significant health outcomes.

The findings of the research indicate that a multidisciplinary approach to the understanding and solving of water pollution and its health effects is essential. The burden of disease cannot be fully attributed to environmental factors but its impact is determined by social, economic, and infrastructural conditions. Research evaluating the contamination of heavy metals and the health risk have also highlighted the importance of integrated interventions to take into account both the environmental exposure and human susceptibility (Sharafi and Salehi, 2025). Additionally, studies on the toxic metal exposure in water resources have shown that risk assessment should consider the environmental concentrations and human exposure routes to enable precise assessments (Tokatli, 2021). The current research is based on these findings, as it combines several areas into the singular analysis framework to provide a more detailed perspective of intricate relationships between water pollution and human health.

5. Conclusion

A profound explanation of how water pollution is interrelated with health outcomes of the people and socioeconomic determinants using a global and data-based approach. These findings have shown quite clearly that pollution of water particularly by chemical and microbial pathogens is a significant cause of water-borne diseases such as diarrhea, cholera and typhoid. At the same time, socioeconomic factors, e.g. coverage of sanitation, access of healthcare, and economic development, also play a role in moderating these effects of health. The results indicate the presence of the highest burden of disease in regions where water quality is low and where there is no socioeconomic infrastructures, which proves the compounded effect of the environmental and social vulnerability. In contrast, better socioeconomic status can be used to neutralize the negative impact of pollution, and the role of interventions as a whole should be noted. As indicated in this paper, it is important to have multi-disciplinary approaches in which environmental management is integrated in social and economic development. The main idea of effective policy measures is not to only decrease the level of pollution but also increase the sanitation system, healthcare, and awareness.

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