

2 February 2017

Our ref: MT17-206

Health Select Committee Select Committee Services Parliament Buildings WELLINGTON 6610

To the Health Select Committee,

Health (Fluoridation of Drinking Water) Amendment Bill

Thank you for the opportunity to make a submission on the Health (Fluoridation of Drinking Water) Amendment Bill.

Firstly, the College supports evidence-based medicine, and there is strong scientific evidence to support drinking water fluoridation as a safe, effective measure to maintain oral health, prevent tooth decay, and reduce health inequities.¹

We understand that the Bill proposes to enable district health boards (DHBs) to direct a local government drinking-water supplier to add fluoride or not to add fluoride to drinking water, and that the local government drinking-water supplier must comply with direction. Additionally, suppliers that already add fluoride to drinking water must continue to do so unless directed not to by the relevant DHB.

The Royal New Zealand College of General Practitioners (the College) supports the direction of this Bill in that it releases the territorial local authorities (TLAs) from their decision-making responsibility for water fluoridation. However, the College recommends that central government - specifically the Director General of Health - is appointed as decision-maker on this matter, rather than the DHBs.

Introduction to general practice and the College

General practice is the specialty that treats patients: with the widest variety of conditions; with the greatest range of severity (from minor to terminal); from the earliest presentation to the end; and with the most inseparable intertwining of the biomedical and the psychosocial. General practitioners (GPs) treat patients of all ages, from neonates to elderly, across the course of their lives.

GPs comprise almost 40 percent of New Zealand's specialist workforce and their professional body, the Royal New Zealand College of General Practitioners (the College), is the largest medical College in the country. The College provides training and ongoing professional development for general GPs and rural hospital generalists, and sets standards for general practice. The College is committed to achieving health equity in New Zealand. To achieve health equity, we advocate for:

- A greater focus on the social determinants of health (including labour, welfare, education and housing).
- A greater focus on measures to reduce smoking and to increase healthy food options for low-income families.
- Health services that are better integrated with other community services.
- A review of the funding model for primary care to ensure that funding is targeted towards the most disadvantaged.
- Free primary health care for low-income families, because health inequities begin early and compound over the life course.

Submission

There is a solid evidence base, and sufficiently high levels of support among experts to warrant a national water fluoridation policy.

Fluoridation of drinking water is a public health measure, and the decision should ideally be made by Public Health Medicine Specialists (PHMS) who are equipped to understand the evidence, and are trained in evaluating the economic and ethical impacts of such a decision. To this end, it is noteworthy that the New Zealand College of Public Health Medicine, the vocational education and advisory body for PHMS, advocates community water fluoridation.² From a central policy stand point, the New Zealand Ministry of Health has also recommended that the level of fluoride in water be adjusted to between 0.7 and 1.0 parts per million (ppm).³ Consequently, the College argues that there are clear grounds, from a public health perspective, for the Director General of Health to introduce a minimum level of drinking water fluoridation as part of national policy; that is under the Drinking Water Standards for New Zealand.⁴

The Director General of Health is less susceptible to the pressure of powerful but ill-informed anti-fluoridation lobby groups or the threat of legal action.

The proposal to transfer the decision to fluoridate from TLAs to the District Health Boards is certainly better than the current situation. However, both authorities are comprised of elected representatives who are exposed to the influence of lobby groups, and other political pressures. As well as having to make and defend decisions regarding fluoridation under pressure from lobby groups, the DHBs would potentially face costly legal challenges as noted in the Regulatory Impact Statement.⁵ Furthermore, the elective nature and relatively low voting rates for DHB and TLA positions⁶ can allow anti-fluoridation lobbyists to gain office and push an agenda without having previously declared their intention to do so. This creates a difficult situation for the Board where the strong views of one or two members is counter to the majority view and the advice from expert DHB staff (e.g. Medical Officers of Health).

A national policy would allow an avenue to address inequitable barriers to fluoridation such as cost.

The cost of setting up and maintaining fluoridation has been cited as a reason for some TLAs to not fluoridate.¹⁰ This is an inequitable and unacceptable barrier, and an additional reason why a national policy is more appropriate. Fluoridation has been shown to be a very cost-effective means of preventing tooth decay and it is only in towns of less than 500 - 1000 population where it becomes financially less economical.^{7,8} Approximately half of New Zealanders already have access to fluoridated drinking water including the two largest cities of Auckland and Wellington.⁹ The Bill, as it stands, risks maintaining the current inequitable situation whereby some New Zealanders do not receive the health benefits of fluoridated drinking water, despite its cost-effectiveness.

To summarise, the College advocates that the Bill should be revised to transfer the decision-making power regarding drinking water fluoridation from the TLAs to the Director General of Health. The Director General of Health.

We hope you find our submission helpful. Should you require any further information or clarification please contact the College's policy team at <u>policy@rnzcgp.org.nz</u>.

Yours sincerely,

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References

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