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Water Fluoridation Survey

Yanchep

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Water Unit
Environmental Health Directorate, Public Health Division
Department of Health, WA

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Correspondence to:

Water Unit
Environmental Health Directorate
Public Health and Clinical Services Division
Department of Health
PO Box 8172
Perth Business Centre WA 6849

Email: ehinfo@health.wa.gov.au

www.health.wa.gov.au/contact/

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Disclaimer:

Table of Contents

List of Figures **1**
Executive Summary **3**
1. Introduction **5**
2. Methodology **6**
2.1 Sample selection 6
2.2 Data Collection 6
2.3 Data analysis 7
2.4 Response rate 7
2.5 Weighting the data 8
3. Results **9**
3.1 Demographics 9
3.2 Fluoride in the public water supply 11
3.3 Attitude towards fluoridation 13
3.4 Perceptions of safety and efficacy of fluoridation 17
3.5 Drinking water source 24
3.6 Information received on fluoridation 28
Appendix A: Approach letter **29**
Appendix B: Water Fluoridation Survey Questionnaire **31**
Appendix C: Result tables **35**
Appendix D: Respondents' comments **41**

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List of Figures

Figure 1 Percentage of valid respondents connected to the public drinking water supply, Yanchep 11

Figure 2 Percentage of valid respondents knowing whether fluoride has or has not been added to the public drinking water supply, Yanchep 12

Figure 3 Percentage of valid respondents and their agreement to adding fluoride to the public drinking water supply, Yanchep 13

Figure 4 Percentage of valid respondents and their agreement to public drinking water supply fluoridation by knowledge of current fluoridation status of the water supply, Yanchep 14

Figure 5 Percentage of valid respondents and their agreement with the addition of fluoride into the public drinking water supply, by age group, Yanchep 15

Figure 6 Percentage of valid respondents who agreed that the addition of fluoride to the public drinking water supply is safe, Yanchep 17

Figure 7 Percentage of valid respondents and their perceived safety of the addition of fluoride to public drinking water supplies and agreement to public water supply fluoridation, Yanchep 18

Figure 8 Percentage of valid respondents and their agreement that fluoride in the public drinking water supplies can help prevent tooth decay, Yanchep 19

Figure 9 Percentage of valid respondents and their agreement that the addition of fluoride to public drinking water supplies can help prevent tooth decay, by age group, Yanchep 20

Figure 10 Percentage of valid respondents and their agreement that the addition of fluoride to public drinking water supplies can help prevent tooth decay, Yanchep 22

Figure 11 Percentage of valid respondents (who agreed to fluoridation) and their perception on the benefits of the addition of fluoride in public drinking water supplies, Yanchep 23

Figure 12 Percentage of valid respondents and their most commonly used source of drinking water, Yanchep 24

Figure 13 Percentage of valid respondents and their agreement that the addition of fluoride to public drinking water supplies can help prevent tooth decay, by water source, Yanchep 25

Figure 14 Percentage of valid respondents and their agreement to addition of fluoride to public drinking water supplies, by water source, Yanchep 27

Figure 15 Percentage of respondents and their source of information about adding fluoride to the public drinking water supply, Yanchep 28

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Executive Summary

The Water Unit at the Environmental Health Directorate of the Department of Health WA was requested by the Fluoridation of Public Water Supplies Advisory Committee to organise a postal survey of residents of the community of Yanchep. The purpose of the survey was to ascertain the level of awareness and support within the community for the addition of fluoride to the local public drinking water supply.

The postal survey took place in October 2011.

The major findings of the survey were:

- Just under half (44%) of the respondents agreed to the addition of fluoride in public drinking water supplies. The proportion who agreed to the addition of fluoride was higher than those who did not agree to the addition of fluoride (39%) and those who were unsure (16%).

- Agreement with the addition of fluoride to the public drinking water supply was similar to or higher than not agreeing to or being unsure about this matter, for all age groups except for the 18 - 27 years age group, where 36% of respondents were unsure.

- Overall, 42% of respondents agreed that the addition of fluoride to the public drinking water supply is safe, with 33% not agreeing and 24% unsure.

- Overall, 54% of respondents agreed that fluoride in the public drinking water supplies can help prevent tooth decay. This was larger than the 22.5% who did not agree and the 21% who were unsure (2.5% unstated).

- When comparisons were made between age groups, the majority of respondents in each age group agreed that adding fluoride to the public drinking water supply can assist in preventing tooth decay, except for the 18 – 27 years age group, in which case the proportion in favour and unsure were equal. The proportion that did not agree was uniformly lower.

- Respondents who were in favour of adding fluoride to the public drinking water supply stated the benefit was seen to be for both adults and children.

- Overall, 76% of respondents stated that they usually consumed tap water from the public drinking water supply, with 8% stating that they use rain water as their most common drinking water source and 7% stating that they use bottled water as their most common drinking water source.

- For respondents who usually drink water from the public drinking water supply, the majority (59%) agree that the addition of fluoride to this type of water supply can assist in preventing tooth decay, with 20% not agreeing and 20% unsure. A greater proportion of the respondents who usually consumed bottled water, rain water or other sources of water did not agree with the proposition.

- Newspapers were the most important individual source of information about fluoridation, with “Television”, “Health authorities”, “Dentist” and “No information” also being common responses.

- The results from the Water Fluoridation Survey indicate that around half of the respondents from Yanchep were in favour of the addition of fluoride to the public drinking water supply and agree that its addition can assist in the prevention of tooth decay. This is greater than the proportion of the respondents who were not in favour of it or the proportion of respondents who were unsure.

1. Introduction

This report has been prepared by the Water Unit, Environmental Health Directorate, Department of Health WA for the Fluoridation of Public Water Supplies Advisory Committee[1].

The Water Unit at the Environmental Health Directorate was requested by the Fluoridation of Public Water Supplies Advisory Committee to organise a postal survey of residents of the community of Yanchep to ascertain the level of awareness and support within the community for the addition of fluoride to the local public drinking water supply.

This report documents the results of the Water Fluoridation Survey.

The Water Fluoridation Survey had two main objectives:

- To ascertain the level of awareness in the community on fluoride addition to the public water supply.
- To measure local support for the addition of fluoride in the Yanchep public drinking water supply.

Yanchep is a community of approximately 4280 people[2], located 50 km north of Perth, Western Australia. Drinking water is supplied to Yanchep by Water Corporation. This supply is presently not fluoridated[3].

Information about drinking water supplied by Water Corporation can be found at:

www.watercorporation.com.au/about-us/our-performance/drinking-water-quality

[1] Refer: www.public.health.wa.gov.au/3/1583/2/fluoride_in_drinking_water.pm
[2] Refer: www.censusdata.abs.gov.au/census_services/getproduct/census/2011/quickstat/SSC50876?opendocument&navpos=220
[3] Water fluoridation is the adjustment of the amount of fluoride in drinking water to a level that helps protect teeth against decay. [source: www.health.vic.gov.au/environment/fluoridation/community_info.htm]

2. Methodology

2.1 Sample selection

Survey forms were based on the questions used previously for a similar survey of the greater Bunbury area[4]. This was designed to facilitate comparison of the results. The Yanchep survey was run at the same time as a similar survey of the nearby Two Rocks community.

The survey questions were chosen based on previously published literature on attitudes towards the addition of fluoride to public drinking water supplies and were worded to be succinct, centred on the research and ethically appropriate.

The survey sought some basic demographic and age breakdown information about the respondent's household but did not seek identifiable information about individuals. The approach letter and survey forms are set out in Appendix A and Appendix B respectively.

2.2 Data Collection

The postal survey was sent out in October 2011 to residential properties in Yanchep that have a registered Water Corporation service. The addresses were based on a (deidentified) database of addresses provided by Water Corporation. The survey form was addressed "Dear Householder" and was accompanied by a reply paid envelope for return at no cost to the respondent. A code was attached to the unmarked survey response sheets to ensure that duplicates were not submitted.

Whilst the survey form requested surveys to be returned by 21 October 2011, all surveys returned by 21 November 2011 were included in the data analysis, to ensure that as many survey results as possible were considered. Eight survey forms were received later, between 22 November and 16 January 2012 – please refer section 2.3 for details.

[4] Epidemiology Branch (2011). Water Fluoridation Survey, Bunbury Area. Perth: Department of Health WA.

The survey was conducted in accordance with all applicable record keeping and privacy provisions for the Western Australian public sector.

2.3 Data analysis

For analysis that involved cross tabulation of multiple factors or areas of interest, only data that has a response was included. All analysis presented in this report was completed using de-identified data.

Survey responses that did not answer questions 1, 2 and 3, or were completely blank, were not considered as valid responses and were not included in the analysis.

As indicated in section 2.2, eight survey forms were received between 22 November 2011 and 16 January 2012. Whilst these eight survey forms were received too late to be included in the detailed data analysis, the responses in relation to fluoridation of the water supply were three “Yes”, two “Unsure” and three “No”, which was in line with the general results of the survey.

2.4 Response rate

A total of 1968 survey forms were sent out to Yanchep households. A total of 528 valid survey responses were returned, giving a response rate of 26.8%. Of the 1968 surveys that were sent out, 52 (2.6%) had undeliverable addresses and were returned unopened.

Based on peer-reviewed literature, the desirable response rate for a mail out survey, regardless of its subject matter, is 60%[5]. However this is not usually reached, with most response rates in mail out surveys generally ranging from 30% to 70%, with 45% response rates being the average in surveys reported in published literature.

[5] References:

Owen-Smith, V., Burgess-Allen, J., Lavelle, K., Wilding, E., 2008. Can lifestyle surveys survive a low response rate?, Public Health vol 122: 1382-1383.
Hikmet, N., Chen, S.K., 2003. An investigation into low mail survey response rates of information technology users in health care organizations, International Journal of Medical Informatics vol 72: 29-34

The lower the response rate, the more important is the issue of whether or how well the respondents represented the views of the community of interest overall.

Nevertheless, peer reviewed literature on survey methodology indicates that a person's decision about whether to participate in a survey or not is in part determined by how important the topic of the survey is to them, potentially leading to self-selection bias. [6]

In essence, this means that community members with a view on the subject matter of a survey (in this case, fluoridation of public drinking water supplies) are more likely to respond than those with little interest in the topic.

2.5 Weighting the data

The survey results have not been statistically weighted according to the estimated resident population for Yanchep. The results and findings were solely based on the data from the responses of the returned surveys and need to be viewed in that light and the information in section 2.4 above.

[6] Rogelberg SG, Fisher GG, Maynard DC, Hakel MD, Horvath M. 2001 Attitudes Towards Surveys: Development of a Measure and Its Relationship to Respondent Behavior. Organizational Research Methods. vol 4(1):3-25.

3. Results

Results are presented for each question asked in the survey. Results that are presented in graphic form are also shown in table format in Appendix C of this report.

3.1 Demographics

The socio-demographic characteristics of the 528 valid responses are shown in Table 1. On balance, the survey respondents were predominantly male (61% male, 37% female, 2% not stated), relative to the gender ratios of the Yanchep community (approx. 50% each), and were predominantly over 47 years of age (64%), with 33% between 18 and 47 years of age and 3% unstated age.

Table 1 Demographic and socio-demographic characteristics of valid respondents, Yanchep

Age groups		
18-27	23	4.4%
28-37	56	10.6%
38-47	94	17.8%
48-57	85	16.1%
58-67	132	25.0%
68+	123	23.3%
Not stated	15	2.8%
TOTAL	528	100.0%
Gender		
Male	320	60.6%
Female	197	37.3%
Not stated	11	2.1%
TOTAL	528	100.0%
Who they live with		
Alone	98	18.6%
Partner only	21	4.0%
Partner and children	15	2.8%

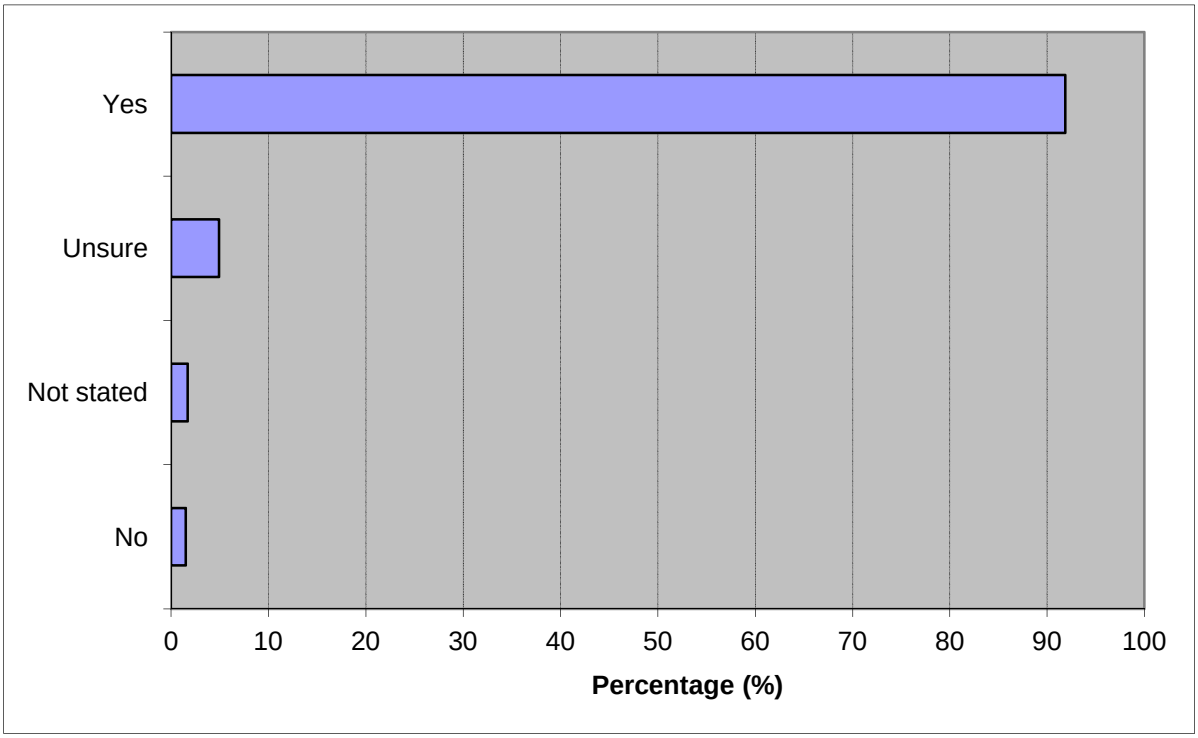
Children only	11	2.1%
Friends or relatives	8	1.5%
Other	234	44.3%
Not stated	141	26.7%
TOTAL	528	100.0%
Youngest person in household		
0-10	98	18.6%
11-20	54	10.2%
21-30	33	6.2%
31-40	28	5.3%
41+	292	55.3%
Not stated	23	4.4%
TOTAL	528	100.0%
Oldest person in household		
11-20	1	0.2%
21-30	22	4.2%
31-40	66	12.5%
41+	418	79.1%
Not stated	21	4.0%
TOTAL	528	100.0%
Duration of residency		
< 1 year	76	14.4%
1 – 5 years	158	29.9%
6 – 10 years	70	13.3%
>10 years	210	39.8%
Not stated	14	2.6%
TOTAL	528	100.0%

3.2 Fluoride in the public water supply

Respondents were asked if their premises were currently connected to the public drinking water supply.

Figure 1 shows that 92% of all valid respondents stated that they were connected to the Yanchep public drinking water supply, with 1.5% answering no, 1.7% not answering and 5% unsure. The data is in Table 2 (in Appendix C).

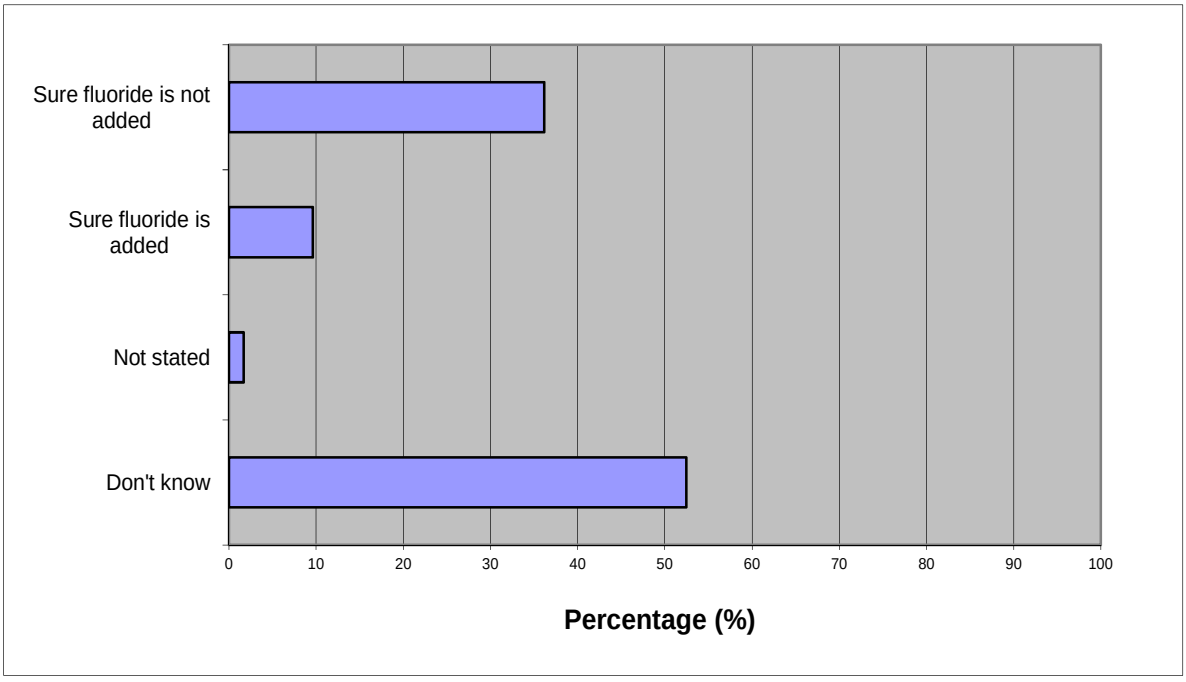
Figure 1 Percentage of valid respondents connected to the public drinking water supply, Yanchep



Respondents were also asked if they knew whether their drinking water supply currently had fluoride added to it.

Figure 2 illustrated that slightly over half of the respondents did not know if fluoride was currently added to their drinking water supply or not (52.5%). Thirty-six percent (36%) of valid respondents were sure that fluoride was not currently added and approximately one-tenth (9.6%) were sure that the public water supply was currently fluoridated. The data is in Table 3. NB The Yanchep drinking water supply is presently not fluoridated.

Figure 2 Percentage of valid respondents knowing whether fluoride has or has not been added to the public drinking water supply, Yanchep

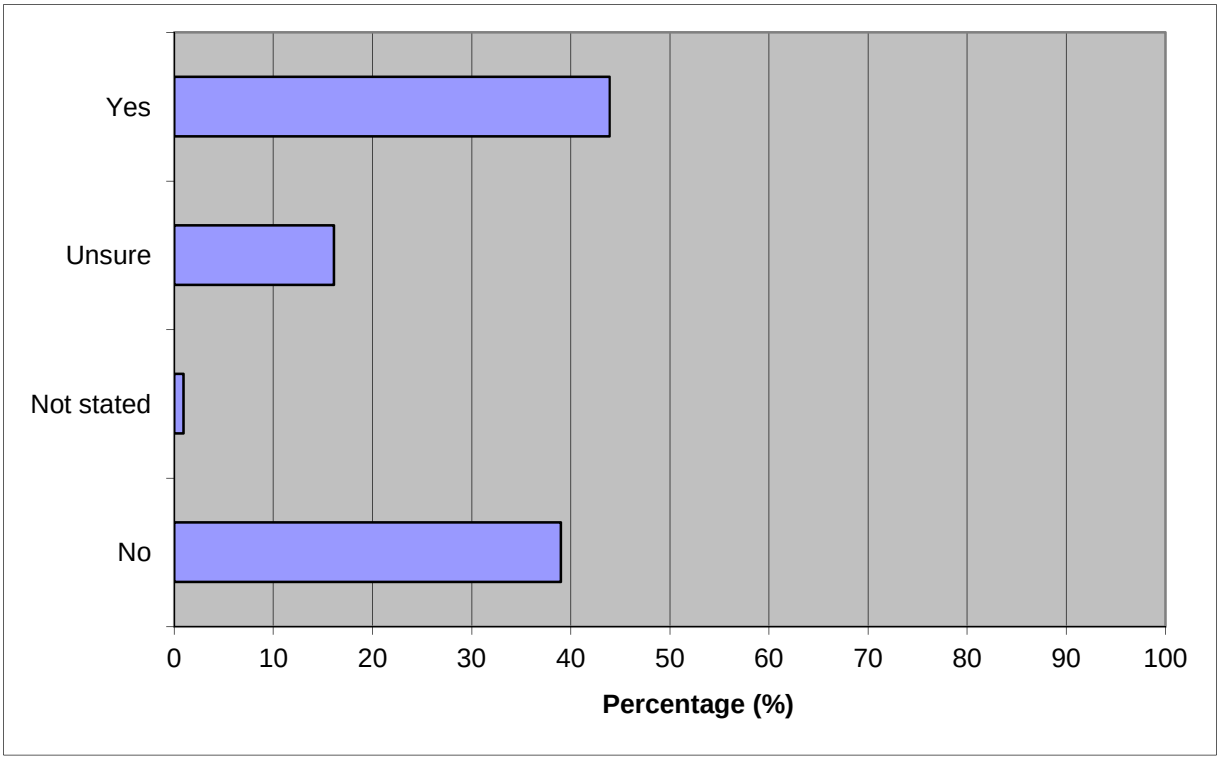


3.3 Attitude towards fluoridation

The survey asked about attitudes towards the addition of fluoride to the Yanchep public drinking water supply and the perceived safety and efficacy of fluoridation.

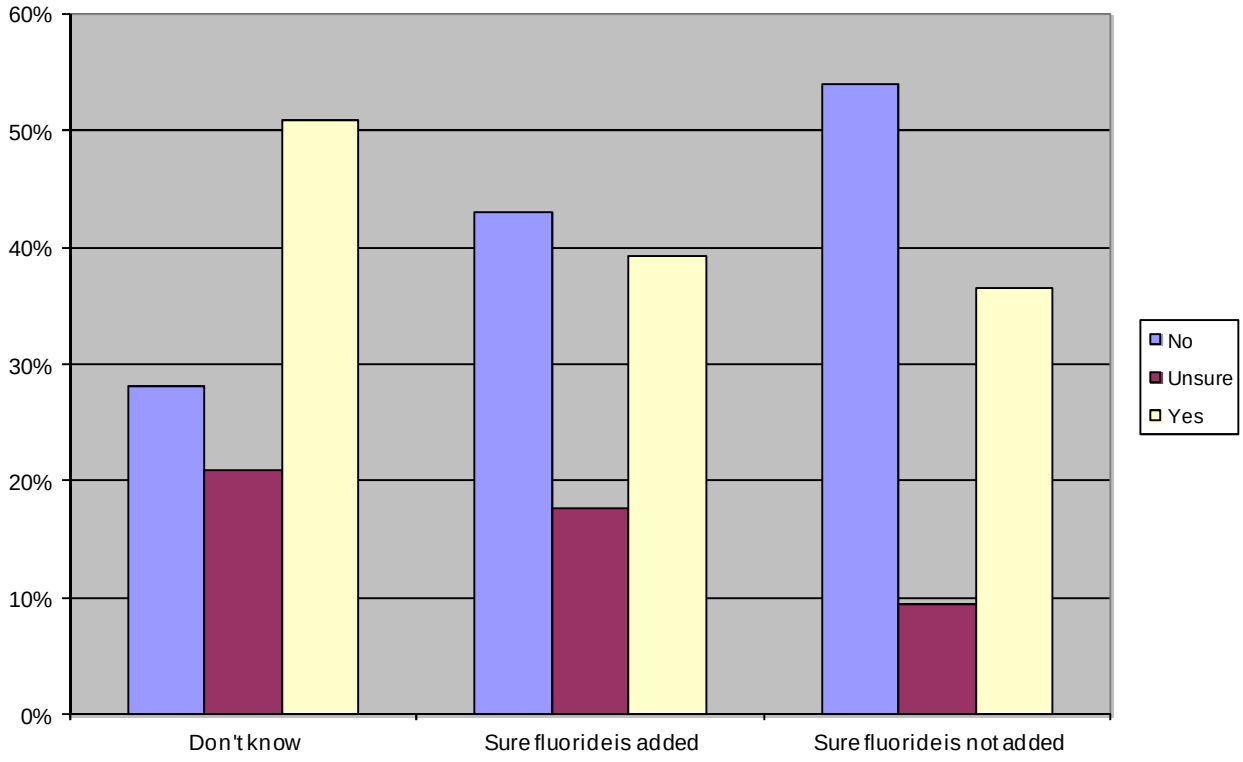
Overall, 44% of valid respondents agreed to adding fluoride to the public drinking water supply. Figure 3 illustrates that the proportion in agreement to the addition of fluoride was slightly higher than those who did not agree to the addition of fluoride (39% of respondents) but considerably higher than those who were unsure (16% of respondents) or not stated (1% of respondents). The data is in Table 4 (in Appendix C).

Figure 3 Percentage of valid respondents and their agreement to adding fluoride to the public drinking water supply, Yanchep



Whether respondents were sure whether the public drinking water supply was currently fluoridated, or not fluoridated, or whether they were unsure, was analysed to determine the degree to which they agreed with fluoride being added to the public drinking water supply.

Figure 4 Percentage of valid respondents and their agreement to public drinking water supply fluoridation by knowledge of current fluoridation status of the water supply, Yanchep



The yellow columns in Figure 4 show that 51% of valid respondents who were unsure if the public drinking water supply was fluoridated or not were in favour of its addition, 39% were in favour if they thought the water supply was already fluoridated and 36.5% were in favour of fluoridation if they thought the water supply was not currently fluoridated.

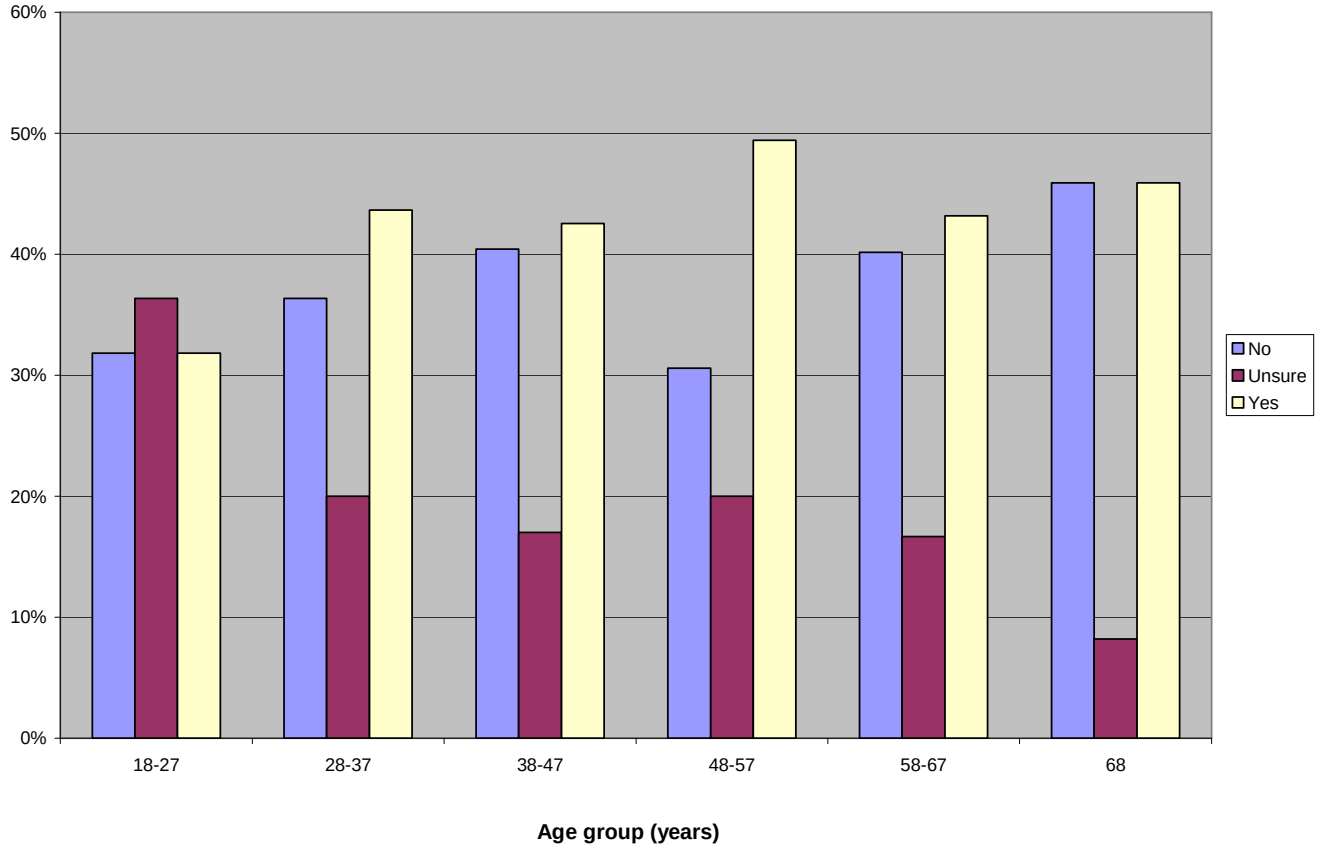
The blue columns in Figure 4 show that 28% of valid respondents who were unsure if the public drinking water supply was fluoridated or not were not in favour of its addition, 43% were not in favour if they thought the water supply was already fluoridated and 54% were not in favour of fluoridation if they thought the water supply was not currently fluoridated.

The proportions of those who were not sure of the fluoridation status of the public drinking water supply, which was the single largest group of respondents for this question, were more in favour of the water supply being fluoridated (51%) and were more equally split between no (28% of respondents) and unsure (21% of respondents). Similarly, the proportions of those who were sure the water was currently fluoridated, a smaller proportion of total respondents, were more equally split between yes (39%) and no (43%).

Note that the column heights in Figure 4 need to be viewed in light of the breakdown by knowledge of fluoridation status in Figure 2, where not being sure whether the water supply was fluoridated or not was the most common response.

The data is in Table 5 (in Appendix C).

Figure 5 Percentage of valid respondents and their agreement with the addition of fluoride into the public drinking water supply, by age group, Yanchep



To determine if age was a significant factor in agreeing (or otherwise) with the addition of fluoride in the Yanchep public drinking water supply, comparison was made between six adult age groups. The proportion of valid respondents that agreed with the addition of fluoride to the public drinking water supply slightly exceeded the proportion that did not agree, across all age groups, except for the 18 - 27 years age group, where they were similar, and the 48 - 57 years age group, in which case the difference between in favour of fluoridation or not was more significant (49% in favour to 31% not in favour, 20% unsure).

The yellow columns in Figure 5 (previous page) show that 44% of valid respondents aged 28 - 37 years were in agreement, along with 43% of valid respondents aged 38 - 47 years, 49% of valid respondents aged 48 - 57 years 43% of valid respondents aged 58 - 67 years and 46% of valid respondents 68 years and over. The data is in Table 6 (in Appendix C).

The maroon columns in Figure 5 show that the proportion of valid respondents that were unsure about the addition of fluoride to the public drinking water supply was similar across all groups, at about 20%, except for the 18 - 27 years age group. For the 18 - 27 years age group, more (46%) were unsure than were in favour or not in favour (at 32% each), and the 68+ age group, with only 8% of respondents unsure.

Agreement with the addition of fluoride to the public drinking water supply (yellow columns) was similar to or higher than not agreeing (blue columns) or being unsure (maroon columns) for all age groups except for the 18 - 27 years age group, where 36% of respondents were unsure.

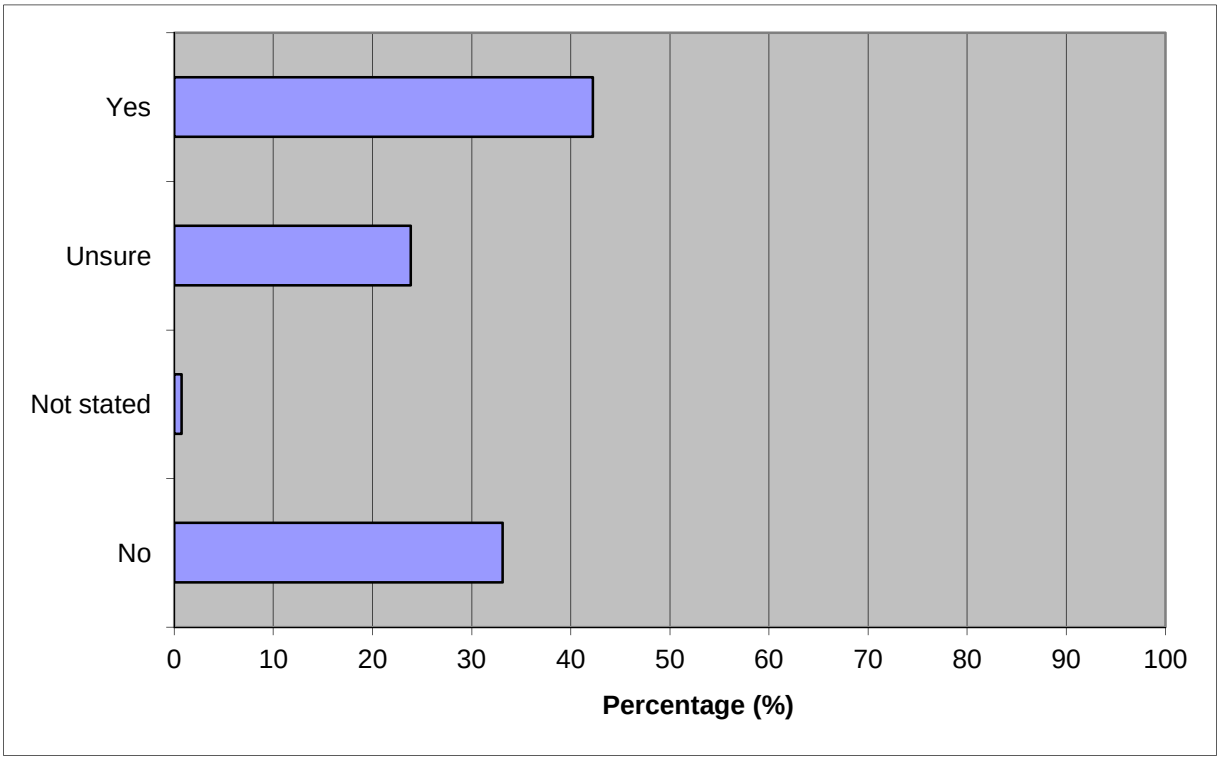
3.4 Perceptions of safety and efficacy of fluoridation

Figure 6 illustrates the breakdown of responses in relation to the safety of the addition of fluoride to public drinking water supplies.

Overall, 42% of valid respondents agreed that the addition of fluoride to the public drinking water supply is safe. This was greater than the 33% of valid respondents who did not agree that the addition of fluoride to public drinking water supplies was safe and the 24% of valid respondents who were unsure (with 1% not stated).

The data is in Table 7 (in Appendix C).

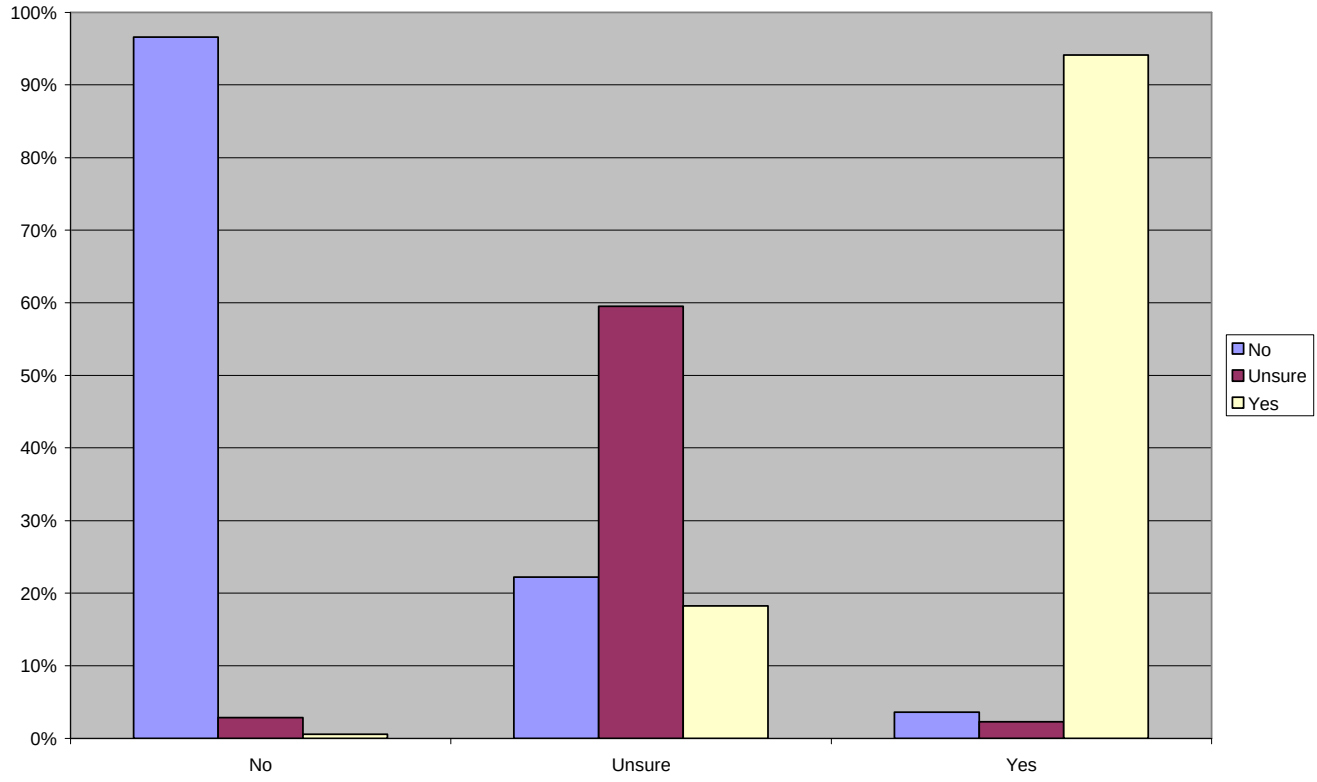
Figure 6 Percentage of valid respondents who agreed that the addition of fluoride to the public drinking water supply is safe, Yanchep



Respondents' perception of safety around the addition of fluoride to public drinking water supplies was linked to their agreement with adding fluoride to the public drinking water supply.

Figure 7 illustrates that the majority (94%) of respondents who agreed with the addition of fluoride to public drinking water supplies agreed it was safe, while the majority (96.6%) of those who did not agree to the addition of fluoride to public drinking water supplies also did not agree that it was safe. Of those who neither agreed nor disagreed with the addition of fluoride, the majority was unsure whether it was safe (59.5%), with an approximately even split otherwise. The data is in Table 8 (in Appendix C).

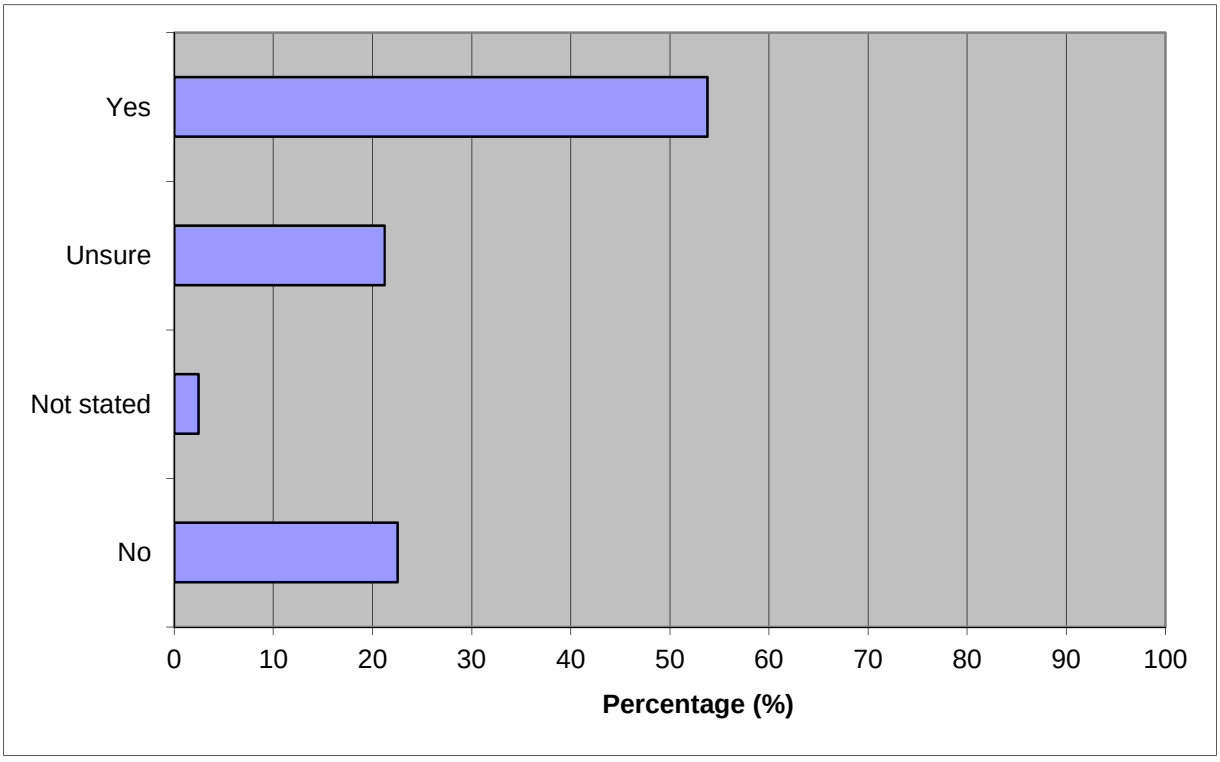
Figure 7 Percentage of valid respondents and their perceived safety of the addition of fluoride to public drinking water supplies and agreement to public water supply fluoridation, Yanchep



Respondents were asked if they agreed that the addition of fluoride to public drinking water supplies can help prevent tooth decay (efficacy of fluoridation).

Figure 8 shows that the majority (53.8%) of valid respondents agreed that the addition of fluoride to the public drinking water supplies can help prevent tooth decay. This was larger than the 22.5% who did not agree that the addition of fluoride to public drinking water supplies can help prevent tooth decay and the 21.2% who were unsure (with 2.5% not stating a response to this question). The data is in Table 9 (in Appendix C).

Figure 8 Percentage of valid respondents and their agreement that fluoride in the public drinking water supplies can help prevent tooth decay, Yanchep

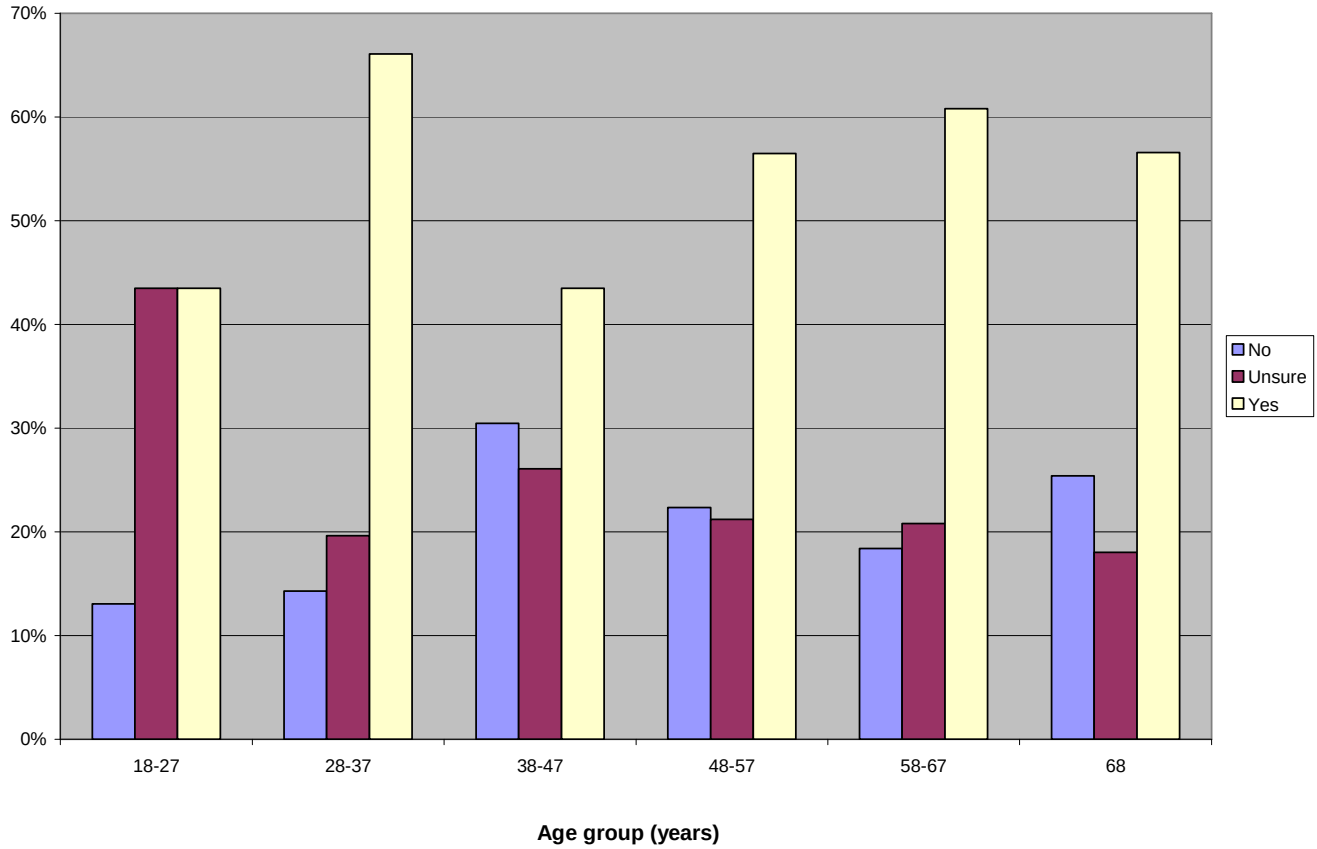


A number of respondents also provided written comments in the returned survey forms. These comments are set out verbatim in Appendix D (except for correction of spelling errors).

When comparisons were made between age groups, the majority of valid respondents in most age groups agreed that adding fluoride to the public drinking water supply can assist in preventing tooth decay. Figure 9 illustrates that 66% of respondents aged 28 - 37 years, 44% of respondents aged 38 - 47 years, 56% of respondents aged 48 - 57 years 61% of respondents aged 58 - 67 years and 57% of respondents aged 68 years and over agreed that fluoride in the public drinking water supply could assist in the prevention of tooth decay (yellow columns in Figure 9). For the 18 - 27 years age group, the data was more equally split, with 43% agreeing and 43% unsure.

The proportion of respondents who were unsure whether adding fluoride to the public drinking water supply could assist in the prevention of tooth decay was usually around 20% for most age groups, as represented by the maroon columns in Figure 9. More respondents in the 18 – 27 years age group (43%) were unsure whether adding fluoride to the public drinking water supply could assist in the prevention of tooth decay.

Figure 9 Percentage of valid respondents and their agreement that the addition of fluoride to public drinking water supplies can help prevent tooth decay, by age group, Yanchep



In all age groups the proportion that did not agree that adding fluoride to the public drinking water supply can assist in preventing tooth decay was uniformly lower than the proportion that agreed.

Figure 9 shows that 13% of respondents aged 18 - 27 years, 14% of respondents aged 28 - 37 years, 30% of respondents aged 38 - 47 years, 22% of respondents aged 48 - 57 years, 18% of respondents aged 58 - 67 years and 25% of respondents aged 68 years and over) did not agree, as represented by the blue columns in Figure 9. The difference in proportion between those who agreed and those who did not agree was more marked than the results shown in Figure 5.

The data is in Table 10 (in Appendix C).

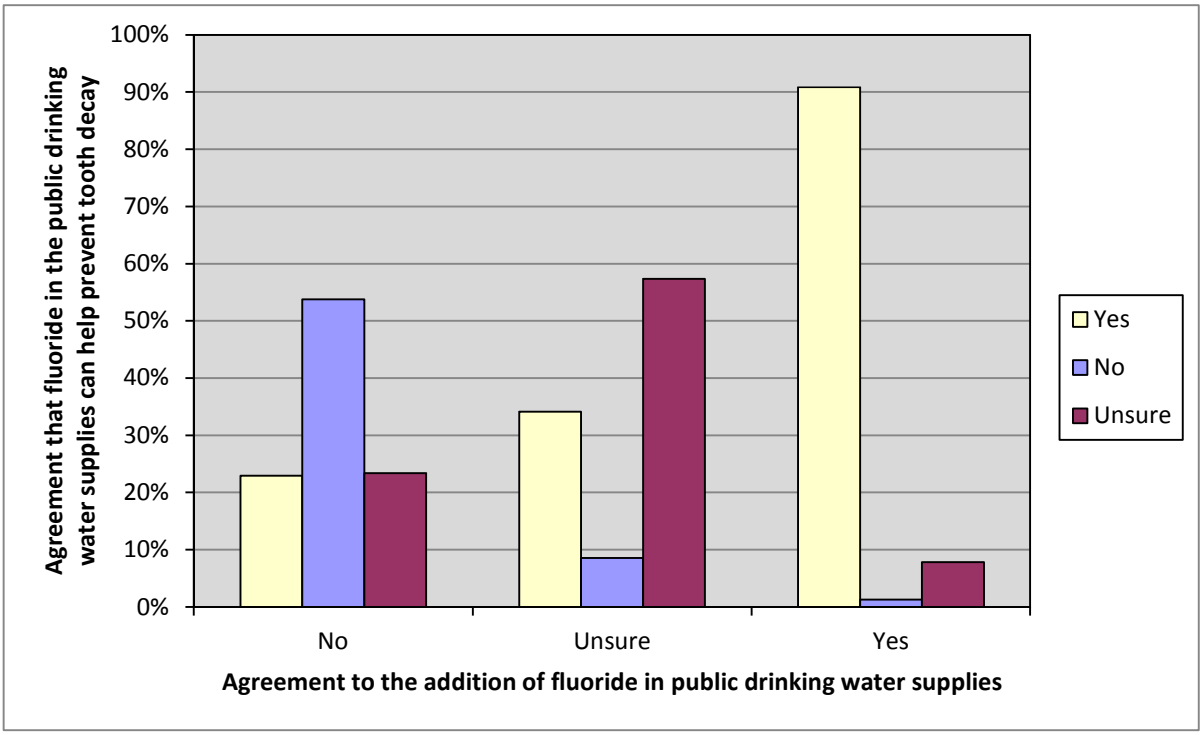
The views of respondents on whether adding fluoride to the public drinking water supply can help prevent tooth decay was significantly correlated with their agreement (or otherwise) to adding fluoride to the public drinking water supply.

Figure 10 illustrates that 91% of valid respondents who agreed to adding fluoride to the public drinking water supply agreed that doing so can help prevent tooth decay, with 8% of this group unsure and only 1% of this group not agreeing.

On the other hand, 54% of valid respondents who did not agree to adding fluoride to the public drinking water supply did not agree that doing so can help prevent tooth decay. Nevertheless, 23% of this group still agreed that adding fluoride to the public drinking water supply can help prevent tooth decay, with 23% unsure.

Most (57%) of the respondents who were unsure about adding fluoride to the public drinking water supply were also unsure whether doing so can help prevent tooth decay, with 34% agreeing and 9% not agreeing. The data is in Table 11.

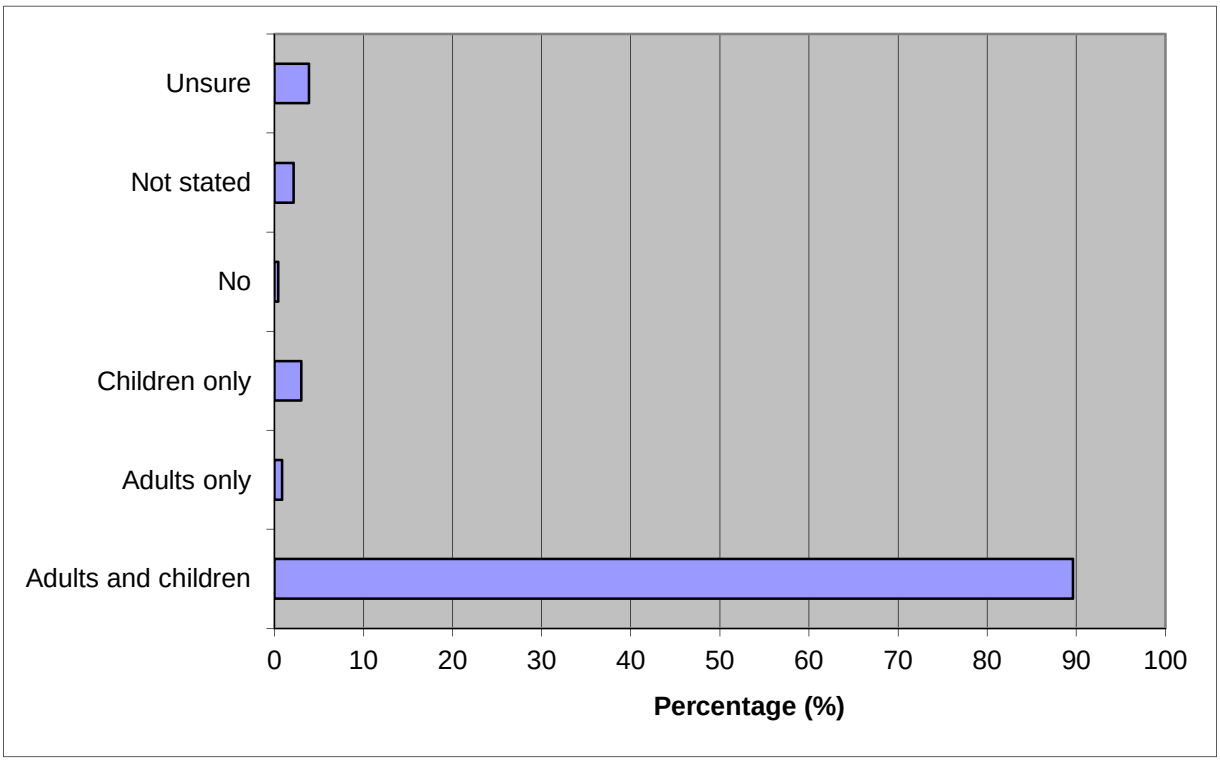
Figure 10 Percentage of valid respondents and their agreement that the addition of fluoride to public drinking water supplies can help prevent tooth decay, Yanchep



Those respondents who agreed that fluoride could assist in the prevention of tooth decay were asked if they would be in favour of adding fluoride to the public drinking water supply to assist with preventing tooth decay and what groups in the community they felt would benefit.

Figure 11 illustrates that, for respondents who were in favour of fluoridation of public water supplies, the benefit was overwhelmingly seen to be for both adults and children (89.7%). The data is in Table 12 (in Appendix C).

Figure 11 Percentage of valid respondents (who agreed to fluoridation) and their perception on the benefits of the addition of fluoride in public drinking water supplies, Yanchep

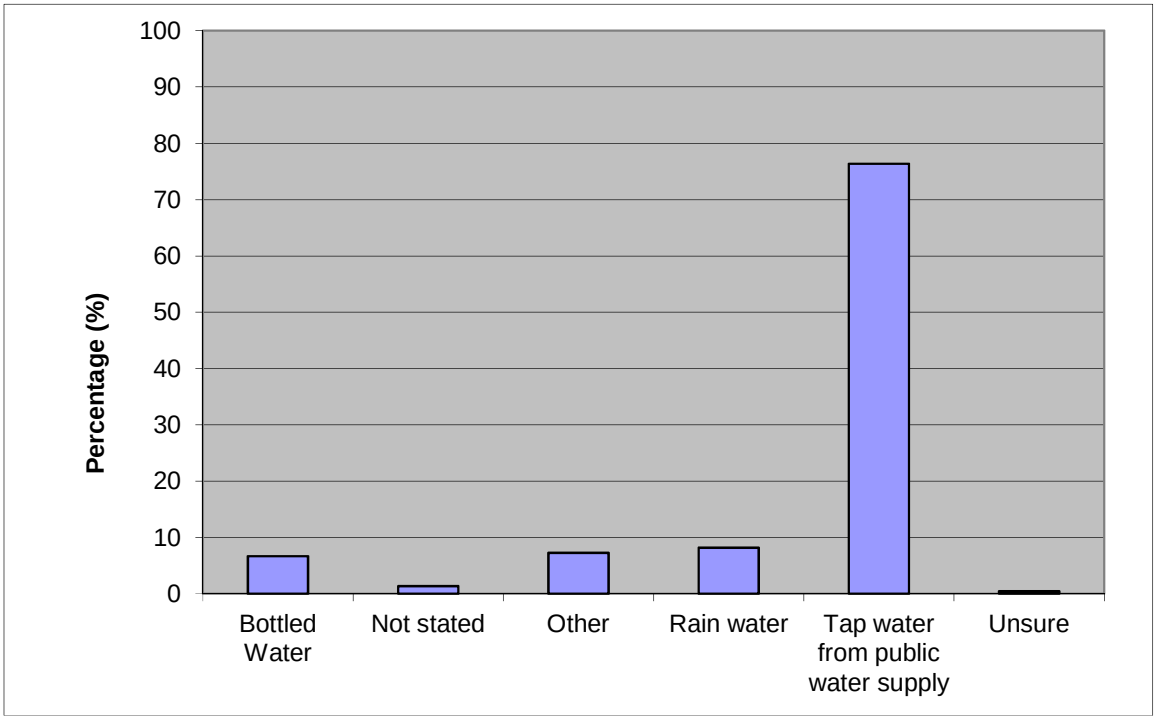


3.5 Drinking water source

While almost all households in the survey were connected to the Yanchep public drinking water supply, it was also of interest to determine what proportion of respondents actually consumes water from this supply.

Figure 12 illustrates that tap water is by far the most common type of water consumed. Overall, 76% of valid respondents stated that they usually consumed tap water from the public drinking water supply, with 8% stating that they use rain water as their most common drinking water source and 7% stating that they use bottled water as their most common drinking water source. The data is in Table 13 (in Appendix C).

Figure 12 Percentage of valid respondents and their most commonly used source of drinking water, Yanchep



Along with agreement to the addition of fluoride there was also interest in determining if the type of water consumed had an impact on the respondent's perception of the benefits (or otherwise) of adding fluoride to public drinking water supplies in assisting to prevent tooth decay.

Figure 13 illustrates that, for those who stated that they usually drink water from the public drinking water supply (i.e. 76% of respondents, as shown in Figure 12), the majority (59%) agree that the addition of fluoride to this type of water supply can assist in preventing tooth decay, with 20% not agreeing and 20% unsure.

For the other 24% of respondents, who stated that they usually drink other water types, 43% agreed that the addition of fluoride to the public drinking water could assist in preventing tooth decay, with the remainder being split between those who did not agree (33%) and those who were unsure (24%). The data is in Table 14 (in Appendix C).

Note that the column heights in Figure 13 need to be viewed in light of the breakdown by water source in Figure 12, where tap water from the public water supply was stated as being the most common type of water consumed. In some cases the total number of responses was slightly below 528, because not all respondents answered all parts of this question.

Figure 13 Percentage of valid respondents and their agreement that the addition of fluoride to public drinking water supplies can help prevent tooth decay, by water source, Yanchep

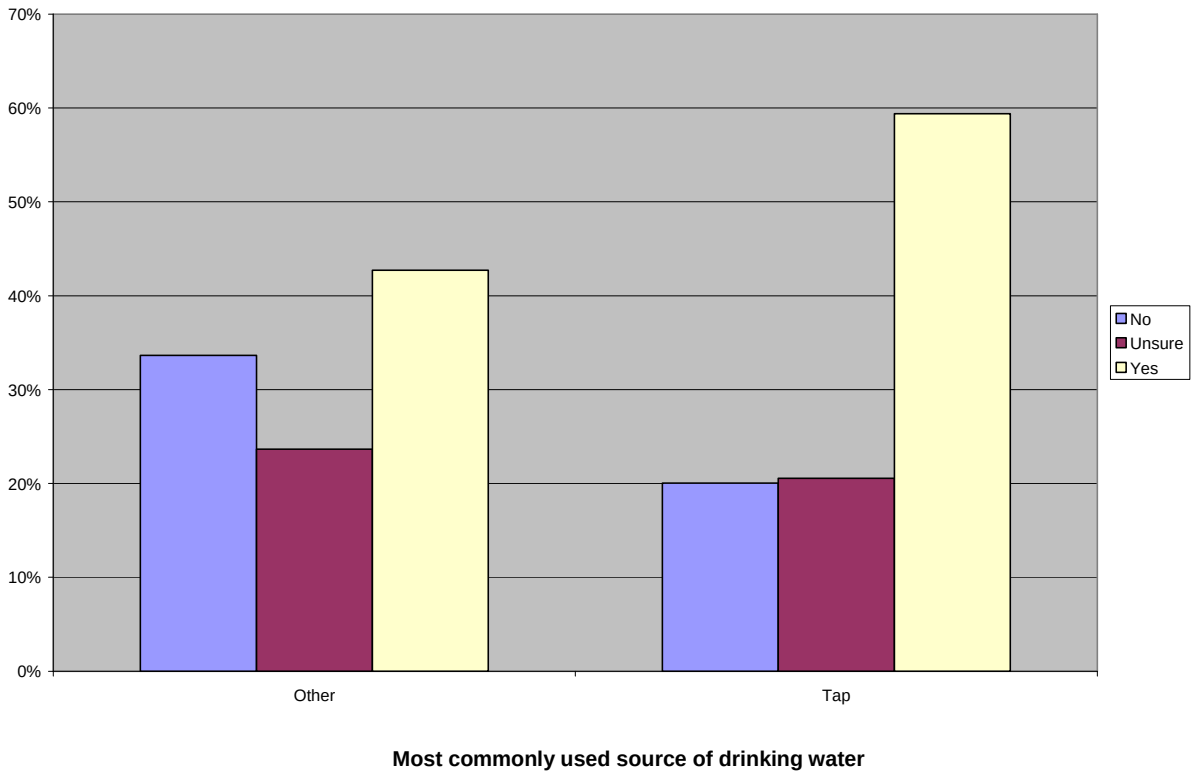


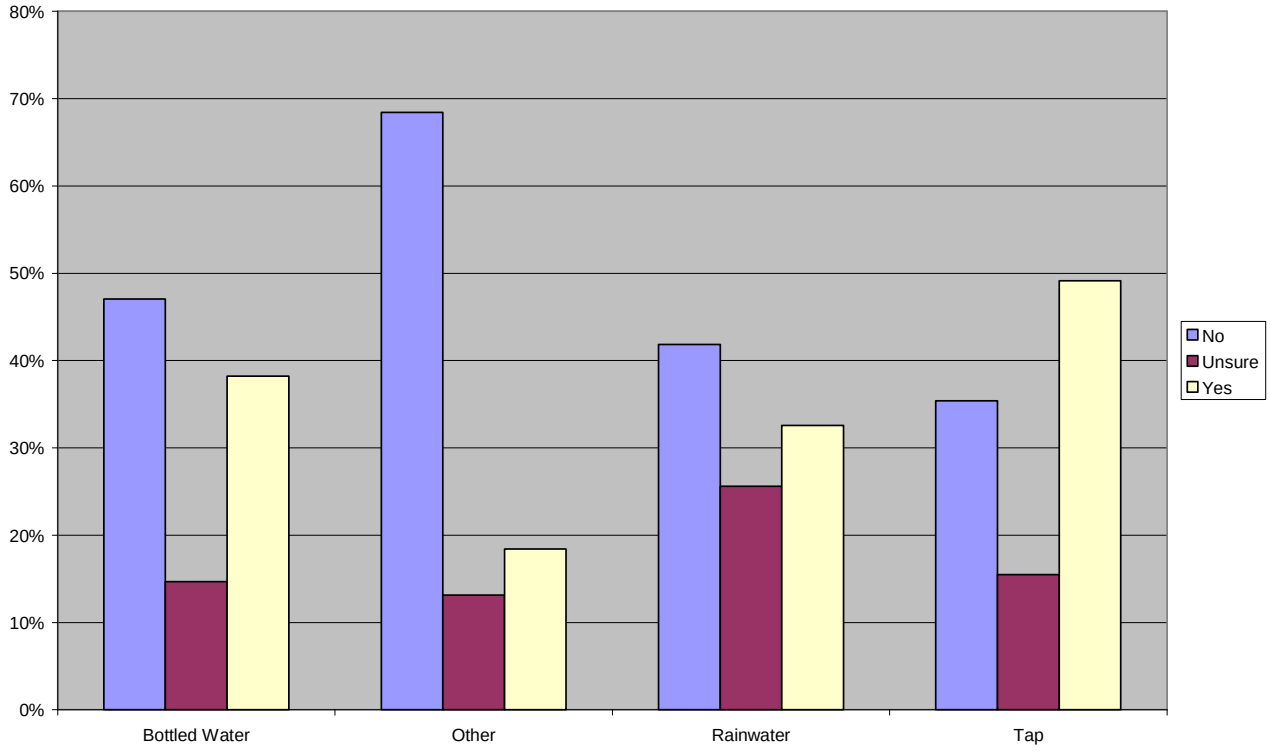
Figure 14 (overleaf) illustrates that, of the respondents who usually consumed tap water from the public water supply, approximately half agreed to the addition of fluoride to public drinking water supplies, but a greater proportion of the respondents who usually consumed bottled water, rain water or other sources of water did not.

The yellow columns show that 49% of those who stated that they usually drink water from the public drinking water supply, 32.5% of those who stated that they usually drink rain water and 38% of those who stated that they usually drink bottled water agreed to the addition of fluoride to public drinking water supplies.

The blue columns in Figure 14 show that 35% of those who stated that they usually drink water from the public drinking water supply and 42% of those who stated that they usually drink rain water and 47% of those who stated that they usually drink bottled water did not agree to the addition of fluoride to public drinking water supplies. The maroon columns indicate that a significant 20% of respondents were unsure on this matter.

The column heights in Figure 14 need to be viewed in light of the breakdown by water source in Figure 12, which indicated that tap water from the public drinking water supply was by far the predominant source. The number of respondents in the bottled water, rain water or other water source categories was considerably smaller. The data is in Table 15.

Figure 14 Percentage of valid respondents and their agreement to addition of fluoride to public drinking water supplies, by water source, Yanchep



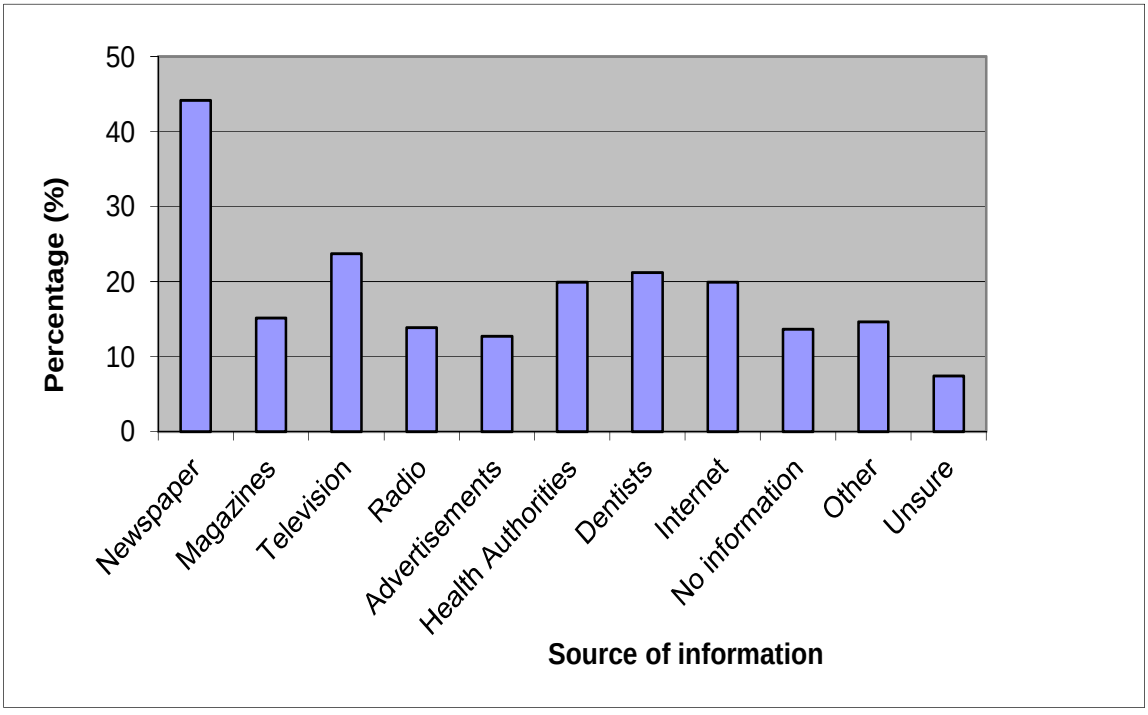
3.6 Information received on fluoridation

Respondents were asked where they had received information about the addition of fluoride to public drinking water supplies.

Figure 15 illustrates the main sources of information for those respondents who answered this question. Multiple responses were possible for this question. The information sources were reasonably equally split, with newspapers being the most important individual source, at 44%, with “Television”, “Health authorities”, “Dentist” and “No information” being also common responses to this question, at approximately 20% each.

As multiple responses were possible for this question, the data total exceeds 100%. The data is in Table 16 (in Appendix C).

Figure 15 Percentage of respondents and their source of information about adding fluoride to the public drinking water supply, Yanchep



Appendix A: Approach letter

Government of **Western Australia**
Department of **Health**

049 1033

Dear Householder

Water Fluoridation Survey

The Department of Health is inviting residents of Yanchep and Two Rocks to take part in a survey on attitudes towards the addition of fluoride to public drinking water.

The survey will take no more than a few minutes to complete. All information collected will be strictly confidential. The answers from all people who respond will be gathered together and no individual answers will be published or passed on. While you do not have to participate I hope that you do.

The results of the survey will be used to help us obtain a community view on the addition of fluoride to public drinking water supplies in Yanchep and Two Rocks.

The survey needs to be completed by an adult over the age of 18 years and returned in the enclosed reply paid envelope by the **21 OCTOBER 2011**.

If you have any queries about the survey, please call Richard Theobald on 9388 4967.

I would like to thank you in advance for your support and for participating in this important initiative.

Yours sincerely

Jim Dodds
DIRECTOR
ENVIRONMENTAL HEALTH DIRECTORATE
Encs

Environmental Health
All Correspondence: PO Box 8172 Perth Business Centre Western Australia 6849
Grace Vaughan House 227 Stubbs Terrace Shenton Park WA 6008
Telephone (08) 9388 4999 Fax (08) 9388 4955
wa.gov.au
ABN 28 684 750 332

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Appendix B: Water Fluoridation Survey Questionnaire

Government of **Western Australia**
Department of **Health**
Public Health

Water Fluoridation Survey 2011

0001

How to complete this form:
Answer questions by ticking only the single most appropriate option unless otherwise specified. Please provide additional comments in the space provided.

Q1) Is your residence connected to the public water supply? (Please tick only ONE box)

☐ No (Go to Q3)
☐ Yes (Go to Q2)
☐ Unsure (Go to Q2)

Q2) Do you know whether fluoride has or has not been added to your public water supply? (Please tick only ONE box)

☐ No, I don't know if fluoride has been added to the public water supply
☐ Yes, I am sure the public water supply has had fluoride added
☐ Yes, I am sure the public water supply has not had fluoride added

Q3) Do you agree with the addition of fluoride to the public drinking water supply? (Please tick only ONE box)

☐ Yes
☐ No
☐ Unsure

Q4) Do you believe that the addition of fluoride to the public drinking water supply is safe? (Please tick only ONE box)

☐ Yes
☐ No
☐ Unsure

Please turn over

Delivering a **Healthy WA** **Page 1/4**

Y

Q5) Do you believe that the addition of fluoride to public drinking water supplies can help prevent tooth decay? (Please tick only ONE box)

☐ No (**enter comment Q5a)** (Go to Q7)

☐ Yes **(enter comment Q5a)** (Go to Q6)

☐ Unsure (Go to Q6)

Q5a) Comment_____

_____*[specify]*

Q6) Would you be in favour of adding fluoride to the public drinking water supply to assist in the prevention of tooth decay? (Please tick only ONE box)

☐ No

☐ Yes, in children only

☐ Yes, in adults only

☐ Yes, in both adults and children

☐ Unsure

Q7) Where have you received information on the addition of fluoride to public drinking water supplies? Please select multiple options if applicable.

☐ Newspapers

☐ Magazines

☐ Television

☐ Radio

☐ Advertisements for dental products

☐ Health authorities

☐ Dentists

☐ Internet

☐ No information/source

☐ Other_____ *[specify]*

☐ Unsure

Y

Q8) What is your most commonly used source of drinking water? (Please tick only ONE box)

- ☐ Tap water from public drinking water supply
- ☐ Store bought bottled water
- ☐ Rainwater tank
- ☐ Other _____ *[specify]*
- ☐ Unsure

Below are some demographic questions to help to categorise your answers

Q9) *Are you?*

- ☐ Male
- ☐ Female

Q10) What age group are you? (Please tick only ONE box)

- ☐ 18-27 years
- ☐ 28-37 years
- ☐ 38-47 years
- ☐ 48-57 years
- ☐ 58-67 years
- ☐ 68 years and over

Q11) Do you live? (Please tick only ONE box)

- ☐ alone
- ☐ with partner/spouse only
- ☐ with partner/spouse and children
- ☐ with children only
- ☐ with friends or relatives
- ☐ other_____ *[specify]*

Please turn over

Q12) How old is the youngest person living in your household? Select your age group if you are living alone. (Please tick only ONE box)

☐ 0-10 years
☐ 11-20 years
☐ 21-30 years
☐ 31-40 years
☐ 41+ years

Q13): How old is the oldest person living in your household? (Please tick only ONE box)

☐ 11-20 years
☐ 21-30 years
☐ 31-40 years
☐ 41+ years

Q14) Which of the following best describes how long you have lived in this community? (Please tick only ONE box)

☐ less than one year
☐ 1-5 years
☐ 6-10 years
☐ greater than 10 years

NO MORE QUESTIONS

Thank you for taking the time to complete this survey (No. 0001).

Please return it by the **21 October 2011** in the reply paid envelope.

Y

Appendix C: Result tables

Table 2 Number and percentage of valid respondents connected to the public drinking water supply, Yanchep

Connected to public drinking water supply	Number of valid responses	Percentage
No	8	1.5%
Yes	485	91.9%
Unsure	26	4.9%
Not stated	9	1.7%
Total	528	100.0%

Table 3 Number and percentage of valid respondents knowing whether fluoride has or has not been added to the public drinking water supply, Yanchep

Knowledge of current fluoridation status of the water supply	Number of valid responses	Percentage
Don't know	277	52.5%
Not stated	9	1.7%
Sure fluoride is added	51	9.6%
Sure fluoride is not added	191	36.2%
Total	528	100.0%

Table 4 Number and percentage of valid respondents and their agreement to adding fluoride to the public drinking water supply, Yanchep

Agreement to public drinking water supply fluoridation	Number of valid responses	Percentage
Yes	232	43.9%
No	206	39.0%
Unsure	85	16.1%
Not stated	5	1.0%
Total	528	100.0%

Table 5 Number and percentage of valid respondents and their agreement to public drinking water supply fluoridation by knowledge of current fluoridation status of the public drinking water supply, Yanchep

Knowledge of current fluoridation status of public drinking water supply	Agreement to public drinking water supply fluoridation			Total
	Yes	No	Unsure	
Sure added	(20) 39.2%	(22) 43.1%	(9) 17.7%	(51) 100.0%
Sure not added	(69) 36.5%	(102) 54.0%	(18) 9.5%	(189) 100.0%
Not sure	(141) 50.9%	(78) 28.2%	(58) 20.9%	(277) 100.0%
Total	(230) 44.5%	(202) 39.1%	(85) 16.4%	(517) 100.0%

Table 6 Number and percentage of valid respondents and their agreement with the addition of fluoride to the public drinking water supply, by age group, Yanchep

Age group	Agree with the addition of fluoride			Total
	Yes	No	Unsure	
18-27	(7) 31.8%	(7) 31.8%	(8) 36.4%	(22) 100.0%
28-37	(24) 43.6%	(20) 36.4%	(11) 20.0%	(55) 100.0%
38-47	(40) 42.6%	(38) 40.4%	(16) 17.0%	(94) 100.0%
48-57	(42) 49.4%	(26) 30.6%	(17) 20.0%	(85) 100.0%
58-67	(57) 43.2%	(53) 40.1%	(22) 16.7%	(132) 100.0%
68 +	(56) 45.9%	(56) 45.9%	(10) 8.2%	(122) 100.0%
Total	(226) 44.3%	(200) 39.2%	(84) 16.5%	(510) 100.0%

Table 7 Number and percentage of valid respondents and their perception of the safety of fluoridation, Yanchep

Agrees fluoridation is safe	Number of valid responses	Percentage
Yes	223	42.2%
No	175	33.1%
Not stated	4	0.8%
Unsure	126	23.9%
Total	528	100.0%

Table 8 Number and percentage of valid respondents and their perceived safety of the addition of fluoride to public drinking water supplies and agreement to public water supply fluoridation, Yanchep

Perceived safety of the addition of fluoride to public drinking water supplies	Agreement to public water supply fluoridation			Total
	Yes	No	Unsure	
Yes	(208) 94.1%	(8) 3.6%	(5) 2.3%	(221) 100.0%
No	(1) 0.6%	(169) 96.6%	(5) 2.8%	(175) 100.0%
Unsure	(23) 18.3%	(28) 22.2%	(75) 59.5%	(126) 100.0%
Total	(232) 44.4%	(205) 39.3%	(85) 16.3%	(522) 100.0%

Table 9 Number and percentage of valid respondents and their perception of the efficacy of fluoridation, Yanchep

Agrees fluoridation can help prevent tooth decay	Number of valid responses	Percentage
No	119	22.5%
Yes	284	53.8%
Unsure	112	21.2%
Not stated	13	2.5%
Total	528	100.0%

Table 10 Number and percentage of valid respondents and their agreement that the addition of fluoride to public drinking water supplies can help prevent tooth decay, by age group, Yanchep

Age group	Agreement that the addition of fluoride to public water supplies can help prevent tooth decay			Total
	Yes	No	Unsure	
18-27	(10) 43.5%	(3) 13.0%	(10) 43.5%	(23) 100.0%
28-37	(37) 66.1%	(8) 14.3%	(11) 19.6%	(56) 100.0%
38-47	(40) 43.5%	(28) 30.4%	(24) 26.1%	(92) 100.0%
48-57	(48) 56.5%	(19) 22.3%	(18) 21.2%	(85) 100.0%
58-67	(76) 60.8%	(23) 18.4%	(26) 20.8%	(125) 100.0%
68 +	(69) 56.6%	(31) 25.4%	(22) 18.0%	(122) 100.0%
Total	(280) 55.7%	(112) 22.2%	(111) 22.1%	(503) 100.0%

Table 11 Number and percentage of valid respondents and their agreement to public drinking water supply fluoridation by their agreement that the addition of fluoride to public drinking water supplies can help prevent tooth decay, Yanchep

Agreement that the addition of fluoride to public water supplies can help prevent tooth decay	Agreement to public drinking water supply fluoridation			Total
	Yes	No	Unsure	
No	(46) 22.9%	(108) 53.7%	(47) 23.4%	(201) 100.0%
Unsure	(28) 34.2%	(7) 8.5%	(47) 57.3%	(82) 100.0%
Yes	(208) 90.8%	(3) 1.3%	(18) 7.9%	(229) 100.0%
Total	(282) 55.1%	(118) 23.0%	(112) 21.9%	(512) 100.0%

Table 12 Number and percentage of valid respondents (who agreed to fluoridation) and their perception of the benefits of the addition of fluoride in public drinking water supplies, Yanchep

Perception of the benefits of the addition of fluoride	Number of valid responses	Percentage
Adults only	2	0.9%
Children Only	7	3.0%
Adults and children	208	89.7%
No	1	0.4%
Not stated	5	2.1%
Unsure	9	3.9%
Total	232	100.0%

NB – This table adds to 232.

Table 13 Number and percentage of valid respondents and their most commonly used source of drinking water

Most commonly used source of drinking water	Number of valid responses	Percentage
Tap water from public water supply	403	76.3%
Rain water	43	8.2%
Bottled water	35	6.6%
Other	38	7.2%
Unsure	2	0.4%
Not stated	7	1.3%
Total	528	100.0%

Table 14 Number and percentage of valid respondents and their agreement that the addition of fluoride to public water supplies can help prevent tooth decay by water source, Yanchep

Most commonly used source of drinking water	Agreement that the addition of fluoride to public water supplies can help prevent tooth decay			Total
	No	Unsure	Yes	
Other	(37) 33.6%	(26) 23.7%	(47) 42.7%	(110) 100.0%
Tap	(80) 20.1%	(82) 20.5%	(237) 59.4%	(399) 100.0%
Total	(117) 23.0%	(108) 21.2%	(284) 55.8%	(509) 100.0%

Table 15 Number and percentage of valid respondents agreement to the addition of fluoride to public drinking water supplies by water source, Yanchep

Most commonly used source of drinking water	Agreement to public drinking water supply fluoridation			Total
	No	Unsure	Yes	
Tap water	(142) 35.4%	(62) 15.5%	(197) 49.1%	(401) 100.0%
Rain water	(18) 41.9%	(11) 25.6%	(14) 32.5%	(43) 100.0%
Bottled water	(16) 47.1%	(5) 14.7%	(13) 38.2%	(34) 100.0%
Other	(26) 68.4%	(5) 13.2%	(7) 18.4%	(38) 100.0%
Total	(202) 39.1%	(83) 16.1%	(231) 44.8%	(516) 100.0%

Table 16 Percentage of respondents and their source of information about adding fluoride to the public drinking water supply, Yanchep

Information Source	Newspaper	Magazines	Television	Radio	Dental Products Ads	Health Authorities	Dentists	Internet	No information	Other	Unsure
Counts	233	80	125	73	67	105	112	105	72	77	39
Percent	44.1%	15.2%	23.7%	13.8%	12.7%	19.9%	21.2%	19.9%	13.6%	14.6%	7.4%

Total counts for this question: 1088 responses from 528 respondents
Multiple responses were possible for this question.
Percentage sum is a percentage of respondents (not responses) and therefore exceeds 100.

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Appendix D: Respondents' comments

All comments are presented verbatim (apart from spelling corrections).

- Fluoride does affect to assist against tooth decay, however it is a toxic substance.
- Family was raised on rural property with own water supply 15 years no tooth decay problems.
- But that positive doesn't compensate for the negatives.
- The less additives the better. We should not be drinking dosed water. We should have clean and pure water available.
- In Europe they stop add fluoride.
- I assumed that was already happening as I remember the debate years ago. Guess the area dipped out - Shame!
- I think fluoridation is good for dental health.
- Don't think the amount added is very much.
- I believe that people tend to then rely on the water for teeth health and disregard other dental health routines.
- Child has not had any decay at all and is now 17 years of age.
- Medically proven fact.
- Assists with prevention of dental decay.
- Studies have shown in areas fluoride was added to water supply tooth decay declined.
- I hear too many negatives.
- Brushing teeth and eating less sugar reduces tooth decay.
- Community health and school nurse in this area for years I know teeth decay is higher here than other areas.
- My children grew up with fluoride in water and have fewer fillings.
- Better to have than not.
- Teeth brushing with fluoride toothpaste and education of parents with young children about the sugar in food and drinks would be more effective. Not much point adding fluoride to water if other nutrition practices are poor.
- Granddaughter lived in Two Rocks since birth is now 6, new teeth pitted dentist advises this is caused by lack of fluoride.
- The single best thing we could do for our children's teeth.
- Plenty of proven evidence to suggest fluoride helps tooth decay, but other to suggest harmful to health in other ways and people should have freedom of choice.
- I've always been told by authorities that it does just that, I've always had very little decay.
- How can you split the public drinking water system? I think this is a really stupid suggestion and find it insulting to my intelligence.
- If it was natural fluoride ok, not waste from aluminium.
- Health side effects more dangerous than preventing tooth decay through chemical fluoride.
- Recent research indicates so.
- Can help but not prevent.

- Yes it's proven to reduce tooth decay at 1 ppm.
- I grew up with fluoride in public drinking water and have no tooth decay.
- When I and family lived in a area that has fluoride added we had all dental problems, I have now lived in Yanchep for 23 years have had no further decay since I attended the dentist regularly.
- Going on what I have been told as a kid.
- Science evidence exists.
- International research demonstrates does aid prevention.
- I am from Melbourne and Fluoride has been in the water supply.
- Never worked in UK. USA & UK abandoned this because of links to cancer. Don't hoist this on us.
- We had it in Katooura [*sic*] NSW in the 1980's.
- I lived in Canada, we added fluoride to the water.
- As far as I am lead to believe. Certainly evidence by better teeth in the young.
- Improved dental service available to all age groups would be far more effective and less expensive.
- There are enough additives in the public drinking water.
- Fluoride is in toothpaste.
- Never. There's too much poisons in this water now. We want water from Kununurra - NOW.
- Fluoridation has been used for many years in country towns that I resided in which was serviced from Mundaring weir.
- not need proven.
- It's what I heard all my childhood!
- ABC radio says there is great doubt over the health benefits. Can you please take the calcium out of the water - Kidney stones can kill!
- Many previous surveys have shown that fluoridation has a beneficial effect.
- Have read that fluoride added to water helps prevent dental decay especially in children.
- It’s a poison. Target food eaten that has so much sugar.
- I am not aware of any evidence available.
- Applied to teeth only not whole of body is a start.
- So I have heard. I have not seen any study results.
- That’s why its in toothpaste. But is has to be below –smg/ltr.
- I am from Zimbabwe & we always had fluoride in the water supply there even the poorest people there had good teeth, despite poor nutrition.
- Why at regular intervals does our water from the tap taste of TCP (antiseptic smell + taste).
- So that dentists say - more money.
- It is a proven fact fluoride in public drinking water supplies increases dental decay.
- All health stones in U.S.A and N.Z much public info is available of deleterious side-effects of fluoride. Many places that did have FL in water have thrown it out.
- I know it's a contradiction, but I think it does worst things to you body.
- Reduce dental problems, reduce pain, cosmetic problems & cost of dental repairs.

- Fluoride doesn't stop tooth decay but actually causes teeth to rot. fluoride in this form has no nutrient value. It changes enzymes, this can damage immune digestive systems, respiratory system, blood circulation, kidney, liver, brain, & thyroid function.
- 7 adult children with excellent teeth - although both parents pre-fluoride did not.
- Yes but can cause cancer it is a by product that needs to be found a use for.
- I think it can along with many other tooth treatments.
- Cannot hurt, may help.
- We are all brushing teeths nowadays!
- Had fluoride in the water in the UK it taste awful and does nothing for teeth.
- Research supports this.
- I think everybody should be allowed to decide for himself what to believe.
- Toothpaste and some mouth wash have it.
- In areas in fluoride in H2O public supply there is less tooth decay in children.
- Only because fluoride is on anti-decay.
- I believe it helps prevent tooth decay & should be added to all supplies.
- Fluoride in water makes it available to all tissues in body, not just teeth. If it is helpful to teeth then its use should be limited to toothpaste where choice is possible for customer.
- Only because we were told as children fluoride in the water helped stop decay in teeth.
- What's wrong with leaving the water as it is and encouraging the cleaning of teeth more often.
- Well as advised by many dentists I use fluoride toothpaste.
- There are other sources of fluoride to anyone who wants it I am concerned about possible side effects of putting it in our water supply. Namely cancer.
- extra fluoride added to drinking water supply has got other health issues. Information is provided by health authorities.
- What % of water is drunk? Surely sell bottle water of cool drink with/without fluoride let people make a choice for themselves & their kids.
- When the school dental van was at Yanchep DHS a few years ago, it was reported in the YDMS newsletter that the dental staff were shocked at the rate or decay in local children's teeth.
- Self oral hygienist will prevent tooth decay.
- Stop poisoning children and elderly with acid!!!
- I have read reports on how tooth decay has decreased since induction.
- Unsure about fluoride no nothing about how much is needed.
- But I'm unsure of other effects it could cause in humans.
- Fluoride is poison.
- I do think it helps but I don't want it added & too much is always put in.
- but too much fluoride in drinking water can have various bad effects - lower IQ, cause cancer etc.
- As it has been proven.
- Please help protect our citizens especially children Yanchep has the worst statistical data evident in tooth decay amongst children. This is terrible! As they represent only a small majority heath dept and gvnment need to ensure they provide adequate fluo.

- At age 69 I have all my own teeth in good condition with few fillings, I have lived in UK for 58 of those years and know that our water supply contained added fluoride.
- Apparently in some cases teeth are showing signs of fluorosis due to excessive intake of fluorides - as in drinking water.
- What are the negative side effects of fluoride?
- I have previously drunk water with fluoride added and this has not prevented tooth decay not any other person that I know believe in this society good dental hygiene practice and reduction of sugar and sugar drinks in the best way to reduce tooth decay.
- should be guaranteed with food and drink supply / not every kid lacks fluoride, why giving eventually too much.
- IT may help tooth decay but has other bad health effects. People can choose to take fluoride but we can't easily extract it from the water.
- Not enough evidence.
- Studies have linked fluoride for everything from mental disorders brain damage arthritis and bone fractures. Please don't poison our water fluoride is in all the toothpaste all ready.
- I have been drinking for years and my teeth are falling out.
- Fluoride is banned by law in Holland in 1977 because of 'Health Danger'.
- I believe that additional fluoride will help prevent tooth decay.
- We don't think it does as most water ends up on lawns or down drains.
- More information required.
- Fluoride needs to be on the teeth for best results not consumed.
- More information on pros and cons.
- Proven over the years and in conflict with countries who do not have fluoride in water.
- If fluoride can prevent tooth decay it will be much better to use it as a topic straight on teeth without swallowing.
- I believe it does help reduce tooth decay.
- I have read bad reviews about fluoride in water.
- but I believe it is unnecessary with today's dental regimes.
- there is no proof - Europe and Canada are removing fluoride because of adverse health issues. fluoride should be administered via toothpaste if individuals wish to do so. DO NOT POISON US!!!
- Or so I have 'heard'.
- My mother gave me fluoride tablets at a child. Don't believe everyone needs it.
- There is more than enough poisons being aimed at people without more in the water supply.
- I have seen no definitive studies with proof. Strongly disagree, it should be a personal choice. If people believe they need fluoride they can use tablets and or toothpaste with fluoride.
- silicofluorides are non biodegradable hazardous waste products which contain both lead and arsenic and are more toxic that either.
- I gave my babies & young children fluoride supplements. They grew up in NSW - no fluoride in water.
- Yes it can prevent tooth decay but may come at other health costs, which may cause greater issues.

- That's what the dentist tells me/.
- It will reduce tooth decay.
- Only aware of fluoride in the water since Feb. 2011 when it was in local newspaper. We have lived here since 06.
- I believe in fluoride tablets for children only & fluoride for adults. I gave these to my daughters until in their teens & they have very good teeth, but it could be detrimental to adults health.
- Internet research.
- Can cause dental fluorosis in young children. There is no need to add fluoride to drinking water because Australians have access to hundreds or oral hygiene products containing fluoride. Daily ads on TV & improved dental health makes sure we have enough.
- Only till 12 years of age then it's cancer forming.
- Fluoride is an industrial, poisonous waste product and must not poison our drinking water. This theory is 50 years old and was debunked in Europe long ago. American and European studies proving the opposite plus fluorosis is making teeth brittle.
- my children and grandchildren grew up w/ fluoride in their water supplies and unlike their grand parents. They have excellent teeth.
- Yes but brushing and flossing teeth prevent tooth decay and if done wouldn't need fluoride.
- but don't believe addition with water is best option. Treatment by dentist gives people the choice.
- Definitely helps prevent tooth decay.
- Strengthens and protects teeth.
- Fluoride in toothpaste which protect teeth.
- Yes, but added fluoride to your diet may cause more problems than it fixes.
- but terrible for the rest of the body.
- Increase in bad diet is the concern - cavities = sweeteners.
- It might, but there is a link between bone cancer and fluorated water in boys. I'd prefer my boy to have cavities not cancer. Side effects cannot be excluded. Fluoridated water must be treated as a medicine + cannot be used to prepare food.
- Toothpaste will provide enough.
- Only in children.
- Less sugar in diet & better hygiene would do more.
- No doubt whatsoever.
- It is a toxin.
- Proven in the UK.
- I worked for a dentist it does make a difference.
- I believe it has been proven that fluoridation of the water supply prevents tooth decay.
- Minimal decrease in dental caries. Increase in dental fluorosis. Research this it is very interesting. Principal Dental Officer Dr John Colquhorn, Auckland toured world in search of evidence only to find reasons not to introduce it into water supplies. Also evidence discussed today is based on 1945 statements about addition to water supplies – outdated and unconfirmed - fluoride can be found naturally and we have toothpaste mouthwashes and processed foods which all have fluoride in them.
- Fluoridation in water is not good for older people, there bones break easier.

- It has been made dogma but without any hard evidence. Conversely detrimental side effects are openly acknowledged overseas (but of course not in Oz).
- It has been proven in Melbourne I believe.
- Added fluoride aides in dental health.

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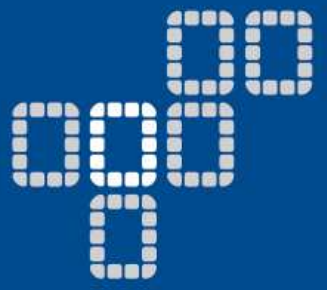

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