

**Written evidence submitted by John Spottiswoode, Chairman of Hampshire Against Fluoridation (HAF) (HSC0015)**

**For the attention of the Select Committee on Health and Social Care, 12th April 2021**

I wish to make a written statement to the Health and Social Care Select Committee on the Government's White Paper "Integration and Innovation: working together to improve health and social care for all" in relation to the DHSC's wish to transfer responsibility for Water Fluoridation Proposals and Public Consultations to Central Government. (Paragraphs 1.20, 3.26, 5.120, 5.132 - 5.136)

I am submitting this evidence to strongly oppose the centralisation of decisions around the fluoridation of water.

**Summary**

The decision to fluoridate water MUST be a local matter decided by local elected representatives who know the local situation and are directly responsible to the people in the area. Central government is far too remote and unresponsive to the people on this sort of issue. In addition, the government decision-making process has been seriously flawed due to one-sided lobbying by industry in parliament. This needs to be balanced and counteracted by local decision-making where profit-orientated companies are not tipping the scales unfairly, unscientifically and unethically. Decisions like this on personal health matters need to be decided locally by people directly elected by the people affected.

Hampshire Against Fluoridation (HAF) had a long campaign from 2008 to 2015 in Southampton and South-East Hampshire to stop the dangerous and scientifically reckless idea of fluoridating water in our area. South Central Strategic Health Authority (SCSHA) ran a heavily biased so-called 'consultation' on the proposal to fluoridate water, pushing it with the financial and manpower might of a SHA against opposition from part-time volunteers belonging to a hastily constituted local group, HAF.

Despite this extremely one-sided battle, the public agreed with HAF and 72% in the consultation said that they did NOT want water fluoridation. However, the SHA then decided to ignore local people's strongly held views.

This opposition to water fluoridation existed for very good reasons, including the long-term extremely serious effects of accumulation of fluoride in the body. There is a lot of excellent research on this issue and it was shocking that so little of this had been seen or understood by the health authorities, and SCSHA in particular. There is huge body of detailed high quality research clearly demonstrating major health problems, including deaths and disability, caused by water fluoridation - much too much to list in this submission, but it can all be viewed by looking on the web with an open mind and a systematic analytical approach. Fluoride Action Network is a good scientifically solid place to look as a start. <http://fluoridealert.org/>

In the end it was clear to HAF that against all research logic and health safety, SCSHA were pushing water fluoridation simply because it was government policy. The Strategic Health Authority was not listening to the strongly-expressed views held by the local people who would be forced to drink

fluoride in their water. SCSHA was remote from the people affected and was much more interested in doing central government bidding than listening to the fully justified objections of residents of Southampton.

This was in evidence when SCSHA refused to accept the results of their own Public Consultation and decided to proceed with water fluoridation very much against the stated will of the majority of people. It was only when SHAs were abolished and the decision-making on Water Fluoridation was devolved to the local Councils and the local Public Health England that sense prevailed and Water Fluoridation plans were dropped. Local Councillors knew that they were likely to lose their seats if they imposed water fluoridation, so strong was the reaction against it.

If the proposal in the White Paper goes ahead, then centralisation will be disastrous as water fluoridation will be decided by a remote government which is not in tune with what affected people think once they are informed of the serious dangers of water fluoridation.

It seems that because of heavy lobbying by industrial companies in Parliament who have a lot to gain by selling the toxic waste called fluoridating acid, the government in its politically-based ignorance of the subject decided to support Water Fluoridation as a policy. Hard lobbying by those from one side of the argument only has badly skewed policy making.

This being government policy means that every government agency HAS to support government policy. Staff could be sacked for not doing so. In particular, it means that PHE at the DHSC creates posts with the express requirement of administering and promoting Water Fluoridation. It also means that research evidence questioning the effectiveness and safety of swallowed fluoride has been ignored, or worse, dismissed, despite the strong evidence of serious harm being done to people subjected to long-term fluoride exposure. What is more, investigations into people's ill-health in fluoridated areas has often not been commissioned, presumably because it would be embarrassing if it was discovered that the investigations confirmed what research had indicated would be found. Therefore, the lack of evidence of harm (due to not looking for it) could be touted with massively wrong statements saying that Water Fluoridation was supposedly 'safe and effective', when the situation is quite the opposite. It is unsafe and ineffective. Saying 'no proof' rings hollow when we know that proof has not been sought, or indeed is not possible as it is unethical to experiment on humans expecting to do harm. Illnesses caused by fluoride have been ignored, or not recognised, or confused with illnesses with similar symptoms. Differences of health in fluoridated areas are unjustifiably put down to other things.

If local democracy means anything, then it is giving local people, through their directly elected Councillors, the right to have a say on whether things like water fluoridation is imposed on them. Safe water is a human right and adding fluoride is considered to be very unsafe by a majority of scientists in the world who do not have to support pro-fluoride government policies, including across Europe.

As the average person does not know of the research, and indeed been bombarded for years about how important it is to have fluoride toothpaste, it is crucial that people are properly informed via a Public Consultation. The Consultation process, however flawed, must take place so that groups like Hampshire Against Fluoridation can tell people about the immensely strong case against the fluoridation of our drinking water. It is only when information is disseminated and digested from both sides in a fair and equal way that a Public Consultation can be meaningful. People must see both sides of the issue so that they are not taken in by half-truths and one-sided persuasion techniques that are all too common.

It is a basic human right to be able to say 'no' to forced medication and to have a fair consultation vehicle available in order to become sufficiently informed to give consent or to refuse consent.

This consultation vehicle **must** be run by local authorities, such as Councils, where the people can vote off Councillors who try to force things on people against their will. It is also necessary that people who already have fluoride added to their water can have it removed without extra cost to themselves. It is the average person who would be harmed by swallowing fluoride, particularly if they are disadvantaged and have poor nutrition.

People affected must be fully informed and be able to give or withhold consent on health matters such as water fluoridation via their elected representatives at a local level.

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