



## A Public Health Resolution Supporting Community Drinking Water Fluoridation

WHEREAS, Box Elder, Cache, and Rich counties under Utah Code §11-13 and §26A-1-105 created and maintain the Bear River Health Department to serve as the local health department; and,

WHEREAS, Utah Code §26A-1-108 requires a local health department to have jurisdiction in all unincorporated and incorporated areas of the counties in which it is established; and,

WHEREAS, Utah Code §26A-1-109 requires a local health department to establish and maintain a board of health; and,

WHEREAS, Utah Code §26A-1-109 requires that the board of health shall determine the general public health policies to be followed in the administration of the local health department; and,

WHEREAS, Utah Code §26A-1-114 requires a local health department to establish programs or measures to promote and protect the health and general wellness of the people within the boundaries of the local health department; and,

WHEREAS, Utah Code §19-4-111 allows fluoride to be added to or removed from a community drinking water supply with the approval of a majority of voters in an election in the area affected; and,

WHEREAS, communities with fluoridated water have consistently seen a decrease in dental cavities, particularly in children and vulnerable populations, resulting in improved oral health and a reduction in the need for costly dental treatment<sup>4,8</sup>; and,

WHEREAS, fluoridated water supplies ensure that all members of the community, regardless of socioeconomic status or access to dental care, can benefit from the protection against tooth decay, thereby promoting social equity and reducing oral health disparities<sup>2, 5, 6, 7, 12</sup>; and,

WHEREAS, fluoridating public water supplies is acknowledged as one of the most cost-effective public health interventions available, as the cost of fluoridation is significantly lower than the expenses associated with treating dental problems that could have otherwise been prevented<sup>9</sup>; and,

WHEREAS, leading health organizations, including the United States Department of Health and Human Services (OAHHS), the American Dental Association (ADA), and the Centers for Disease

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Control and Prevention (CDC), have unequivocally endorsed and provided their full support for water fluoridation as a safe and effective means of promoting oral health<sup>1,3, 11</sup>; and,

WHEREAS, the process of water fluoridation is carefully regulated to guarantee that fluoride levels consistently adhere to recommended limits, and the prevailing scientific consensus firmly supports the safety and effectiveness of this practice<sup>10</sup>; and,

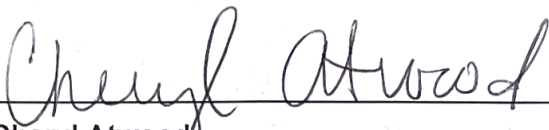
WHEREAS, fluoridation benefits individuals of all ages, extending advantages to young children in the critical stages of dental development, as well as adults and seniors who need to maintain their oral health<sup>4,8</sup>.

NOW THEREFORE, BE IT RESOLVED, that the Bear River Board of Health officially supports efforts to establish and maintain acceptable levels of fluoridation in community drinking water systems as a public health measure to improve and sustain oral health in the population.

1. Effective Date: This Resolution shall be effective immediately upon its adoption.

Resolved this 24 day of October 2023.

Authorized Signature:

  
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**Cheryl Atwood**  
Bear River Board of Health Chair

In Witness Thereof:

  
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**Jordan D. Mathis**  
Bear River Board of Health Secretary &  
Health Officer

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1. American Dental Association (2022, October 1). *Fluoride of Water Supplies*. Retrieved October 18, 2023, from <https://www.ada.org/about/governance/current-policies#fluoridation>
  2. Burt, B. A. (2002). Fluoridation and Social Equity. *Journal of Public Health Dentistry*, 62(4), 195-200.
  3. Centers for Disease Control and Prevention. (2020). CDC statement on Community Water Fluoridation. Retrieved on October 18, 2023 from: <https://www.cdc.gov/fluoridation>
  4. Centers for Disease Control and Prevention (2013). *CDC statement on Community Water Fluoridation*. Retrieved October 18, 2023, from <https://www.cdc.gov/fluoridation>
  5. Centers for Disease Control and Prevention. (1999). Ten great public health achievements – United States, 1900-1999. *Morbidity and Mortality Weekly Report*, 48(12), 241-243.
  6. Centers for Disease Control and Prevention (2016). *Water Fluoridation Basics*. Retrieved on October 18, 2020 from: <https://www.cdc.gov/fluoridation/basics/index.htm>
  7. Cho, H.J., Lee, H.S., Paik, D.I, and Bae, K.H. (2014). Association of Dental Caries With Socioeconomic Status in Relation to Different Water Fluoridation Levels. *Community Dentistry and Oral Epidemiology*, 42(6), 536 – 542.
  8. Featherstone, J. (1999). Prevention and the Reversal of Dental Caries. *Community Dentistry and Oral Epidemiology*, 17: 31-4.
  9. O'Connell, J., Rockell, J., Ouellet, J., Tomar S., and Maas, T. (2016). Costs and Savings Associated with Community Water Fluoridation in the United States. *Oral Health & Population Health*, 35(10), 2224-2230.
  10. Utah Department of Environmental Quality, Drinking Water. (2023) *Fluoridating Drinking Water in Davis and Salt Lake Counties*. Retrieved on October 18, 2023 from: <https://deg.utah.gov/drinking-water/fluoridating-drinking-water-davis-salt-lake-counties>
  11. United States Department of Health and Human Services. (2016). *Healthy People 2030: Oral Conditions*. Retrieved on October 18, 2023 from: <https://health.gov/healthypeople/objectives-and-data/browse-objectives/oral-conditions>
  12. Zokaie, T., & Pollick, H. (2022). Community water fluoridation and the integrity of equitable public health infrastructure. *Journal of Public Health Dentistry*, 82(3), 358-361. Retrieved on October 18, 2023 from <https://doi.org/10.1111/jphd.12480>