

Water Quality, Nitrates and Health Policy Statement

Public Health Association members are calling for urgent action to protect the mauri and sustainability of Aotearoa New Zealand's drinking water sources. A stronger, long-term health approach is needed to protect the well-being of people and their environment. Public health policy must move to protect water sources from contaminants such as nitrates and ensure kaitiaki can monitor for health effects on people and their environments.

Overview

This policy position statement highlights the relationship between water quality and health outcomes. Access to safe drinking-water is essential to health, acknowledges indigenous relationship with natural resources and is a component of effective policy for health protection and promotion. Nitrate contamination impacts life-sustaining mauri of water and the public health principles protecting health in Aotearoa New Zealand. With management of the country's 'three waters' in transition, it is timely to add a public health focus to help protect communities from degraded drinking water sources and reverse processes that disrupt mauri or life-sustaining capacities.

Adverse health outcomes may occur at concentrations of nitrate in drinking water considerably below 50 mg/L, the level currently permitted as determined by World Health Organization (WHO) Guideline Value¹ and 'Maximum Acceptable Value' (MAV) of the Drinking-water Standards for New Zealand.² Health outcomes for which associations have been shown include bowel cancer,^{3,4} breast cancer³⁰, ovarian cancer³⁰, preterm birth^{5,31}, congenital abnormalities^{6,31} and paediatric cancer³². Widespread nitrate contamination of New Zealand's groundwater creates an urgent case for robust policy to decrease permitted nitrate levels in drinking water and re-orient the system that enabled it.

Integrating public health measures with an indigenous long-term view, a proactive precautionary approach is advocated to recognise water as a life-sustaining resource for future generations.

Background

Our Relationship with Water

Safe drinking water is a fundamental human right, essential to all life and a key element of United Nations 2030 Sustainable Development Goals.^{7,8} Water contamination in Aotearoa New Zealand has had severe consequences for human health,⁹ prompting the focus of increased regulatory, financial and cultural resource to water reforms. Māori, as Tiriti o Waitangi partners, have a traditional relationship with water as a taonga, with rights of protection and kaitiakitanga reflected in the transformation of water law and policy.¹⁰

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		(Peer reviewed by Dr Jörg Schullehner, 22.02.2022)	
Date ratified by AGM	9/12/2022	Date to be reviewed	2025 Policy Cycle

Guiding Frameworks

Te Mana o te Wai is central to Government's Essential Freshwater policies and regulations, enforced through The National Policy Statement for Freshwater Management 2020. ¹¹ This firstly protects the life-supporting capacity of the water, then provides for human health needs, with new requirements to apply a Māori lens to decision-making on freshwater. ¹¹ Te Mana o Te Wai highlights the direct connection between the health of water bodies and the outcomes that support physical well-being, mental and emotional well-being, social well-being, and spiritual well-being, Hauora. ¹⁰ Restoring the mauri of water from the degradation of post-colonial activities (including industrialised agriculture) supports a healthy relationship with water and access to safe drinking water.

Action is required within current water reforms to retain a public health focus, such as the ability to track drinking water qualities and impacts on health outcomes. With the transfer of public health drinking water records to the new water authority Taumata Arowai, 12 incorporation of public health priorities for researching and tracking health outcomes related to water quality and contributing environments is urgent.

Nitrate, ecological impacts and scale of pollution

Nitrate is one of the most common drinking water contaminants in Aotearoa New Zealand, largely driven by agricultural activity (nitrogen fertiliser application and livestock waste). Nitrate pollution of freshwater poses an intergenerational challenge due to the extent of the pollution, the lag times to cleanse freshwater sources and the cost of treatment. Between 2014-2018, 44% of the groundwater sites routinely monitored by Ministry for Environment showed nitrate levels above natural levels (i.e. anthropogenic pollution), with 38% of sites worse than 2009-2018, despite environmental regulations. One study of 34 Aotearoa New Zealand water catchments estimated the median lag time was 4.5 years, with some lag times being several decades. Thus, in many areas the peak pollution from agricultural intensification has yet to present in our water bodies, while interventions introduced today may not have noticeable impacts for years. Once a drinking water supply is contaminated with nitrate it is costly and difficult to remove. A recent cost estimate for a nitrate treatment system for Christchurch's water supply was \$1,507 million (based on a ~4 mg/L nitrate level), including an estimated \$24 million annual operating cost. In the context of the pollution of the pollutio

Nitrate and direct health impacts

The current regulatory limit for nitrate in drinking water, 50 mg/L, was established to prevent cases of infantile methaemoglobinemia "Blue Baby Syndrome."^{1,2,} caused by mixing infant formula with contaminated water, but other health effects were not considered³³. Adverse infant health outcomes are also linked with maternal exposure to nitrate. Importantly, increased risk of preterm birth^{5, 31} and congenital abnormalities⁶, impacting across the life course, are seen well below the current MAV.

Recent experimental, ¹⁸ epidemiological ^{19,20} and genetic ^{18,21-23} evidence also implicates nitrate in drinking water in the development of adult cancers, including bowel cancer. ²⁴ Nitrate is classified as a probable human carcinogen (class 2A). ²⁴ In the largest study, increased risk of bowel cancer was observed at nitrate levels as low as 3.8 mg/L. ⁴ Note: The high levels of antioxidants in vegetables (the main source of dietary nitrate) helps explain why we do not see an adverse relationship between nitrate in vegetables and any cancers. ²⁴ Thus, this policy statement follows the International Agency for Research on Cancer recommendations to assess nitrate from dietary sources and drinking water separately. ²⁴

Despite increasing nitrate levels in groundwater nationally, most registered water supplies in Aotearoa New Zealand presently have low levels of nitrate.²⁵ However, some unregistered supplies, particularly

wells in Canterbury, Nelson / Marlborough and Waikato, have very high nitrate levels.²⁵ Current estimates suggest that 800,000 New Zealand adults consume water with nitrate levels above the threshold (3.8 mg/L) observed for increased risk of bowel cancer. ^{25,26} Concerningly, under current rural landuse practice, nationally, trends for nitrate pollution of groundwater show nitrate levels in drinking water are likely to increase¹⁴. Similarly, nitrate levels in major municipal water supplies are predicted to increase.²⁷ For example, nitrate levels in Canterbury's aquifers supplying Christchurch City are predicted to increase to 13-33 mg/L if current land use practices persist.²⁷

Direct health implications of nitrate in drinking water requires further research to establish the complete risk profile. ^{28,29} However, recent, robust evidence from interdisciplinary research across several health outcomes, the considerable lag time to effect and the potential scale of the problem of nitrate pollution, support recommendation of a proactive precautionary approach.

The PHA supports:

- a proactive approach
- establishment of a national database for water quality testing, monitoring and record keeping facilitating ongoing research, surveillance and kaitiakitanga.
- development of policies that prioritise restoring the health of the water (Te Mana o te Wai) with sustainable approaches to caring for water recognising its impact on health
- application of the precautionary principle.

PHA actions to support this policy:

- Keep members informed of relevant research, key policy/legislative developments, and consultations
- Influence local and central government policymaking through submissions and participation in policy development forums
- Strengthen relationships with kaitiaki Māori, researchers, aligned advocacy groups, and policy officials and decision makers at local, regional and national levels.

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