Report No. 00.445 14 June 2000

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Report to the Utility Services Committee from Murray Kennedy, Strategy and Asset Manager

Public Perception of Water Quality : Update

1. **Purpose**

To provide information subsequent to the report on the Public Perception of Water Quality (00.210) considered at the May meeting of the Committee.

2. Introduction

During the period since the last committee meeting several issues have arisen relating to water quality and have some relevance to Report 00.210.

2.1 **Distribution of the Report**

Report 00.210 was distributed to various organisations. The Consumers Institute has responded (**Attachment 1**). It is pleasing to note that the Institute agrees there is no need for Wellington residents to buy filters or distillers to ensure their drinking water is safe. The Institute also provides water grading on their website making this information more accessible to the public.

2.2 **Communications**

There were some printed media comments about the report. Most of the publicity though was before the Committee meeting. Television New Zealand arranged interviews with staff about the water quality but at the time of writing they have not been broadcast.

2.3 **Bottled Water Quality**

The Public Health Service has indicated the producer of the sterile water has made some changes to their production process. Also, water will in future be stored until it is confirmed as being sterile. Although not required to do so, the producer made a voluntary recall of their product. Water from a second producer is still being investigated by the Public Health Service.

2.4 Melbourne Water Quality Research

Monash University has recently completed a study in Melbourne into gastrointeritis. Six hundred households were fitted with water filters. Of those half the filters were active and the other half passive. The study cost \$A3M. It was concluded that there was no evidence of waterborne disease in the Melbourne metropolitan area with an unfiltered water supply drawn from a protected catchment. Attachment 2 provides additional information.

Melbourne's water harvesting is different from The Water Groups. In Melbourne 90 percent of the water supply comes from storage reservoirs where the water has been retained for between one and five years. Total useable storage is about 530 times the storage in the Te Marua lakes. The remaining Melbourne water comes from less secure sources and is treated.

Even given this difference, the study has highlighted the benefits of a highly protected catchment.

2.5 Water Quality Research

A media release by the Health Research Council on 30 May indicated a grant of \$361,000 had been made for research into "Quality of drinking water and its relation to gastrointestinal disease in children". The release was reported by the Dominion and Evening Post newspapers.

There were several aspects of the media release by the Health Research Council which were unfortunate. For example:

"The Wellington region has one of the highest rates of food and waterborne disease in the country. The study will provide evidence about the cost effectiveness of upgrading water supplies, and the relevance of current gradings of water supply to the risk of waterborne disease. It is likely to help improve the management of Wellington's drinking water".

As a consequence the Chairman of the Utility Services Committee signed off a media release "*Tummy bugs not from tap water, says WRC, which was issued on 2 June*".

Following the WRC media release, which was reported up by the local media, the Health Research Council has written to the WRC indicating the Wellington Medical School study is to be a national one. A point which could have been made in their original media statement.

A brief analysis of the Melbourne study results, the NZ Ministry of Health water gradings and our own water quality study raises serious doubts about the degree of linkage between reticulated water quality and gastrointestinal disease. It has been suggested to the Health Research Council that they reconsider the direction of the research and perhaps target it more towards food and lifestyles. That may then provide answers as to why Wellington has one of the highest rates of food disease in the country. It would also be in line with the WRC's, *Towards a Greater Wellington* objective of having "Healthy people in a safe region".

3. **Environment**

There are no direct environmental issues. However, healthier people provide a safer environment.

4. **Communications**

There are no immediate communications issues. Perhaps there is scope for contacting the Wellington Medical School to indicate areas of research which would be useful to the WRC.

5. **Recommendations**

That the report be received and the information noted.

Report prepared by:

Approved by:

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Attachments

Attachment 1: Letter from Consumers' Institute

Attachment 2: World first study shows water supply does not contribute to gastrointestinal disease