



## Proponent Testimony in Support of Ohio House Bill 182

March, 1, 2026

Chair Jones, Vice-Chair Blasdel, and Ranking Member Rogers, Jr., and members of the House Natural Resources Committee, thank you for the opportunity to provide testimony today regarding House Bill 182, the Safe Water Act. I appreciate your careful consideration of this issue that significantly impacts the health of our infants and children.

My name is Stephanie Stock, and I serve as President of Ohio Advocates for Medical Freedom (OAMF), a 100% volunteer nonprofit. Our organization represents Ohio families who are committed to protecting informed consent, bodily autonomy, and transparent public policy. I am testifying in strong support of House Bill 182 because it safeguards individual choice by prohibiting the mandatory addition of fluoride to Ohio's public water systems.

At the heart of this issue is the doctrine of informed consent — a principle deeply rooted in American jurisprudence and constitutional liberty. Courts have long recognized that competent adults possess a fundamental right to refuse unwanted medical treatment. In *Cruzan v. Director, Missouri Department of Health* (1990), the United States Supreme Court affirmed that individuals have a constitutionally protected liberty interest in refusing medical interventions. Similarly, in *Washington v. Harper* (1990), the Court recognized that forced administration of medication implicates significant liberty interests under the Due Process Clause.

Community water fluoridation is the deliberate addition of a chemical substance to alter bodily function for the stated purpose of preventing dental decay. Yet unlike vaccines, prescriptions, or supplements, fluoridation provides no individualized assessment, no physician oversight, no dosing control, and no opportunity to decline. A blanket, one-size-fits-all chemical intervention delivered through an essential public utility raises serious constitutional and ethical concerns under modern informed consent standards.

Beyond the constitutional question, years of scientific research warrant careful review of a practice that is based more on indoctrination than it is on scientific evidence. The negative effects on Ohio children, particularly in prenatal and early-life exposure, have been made evident today by our expert witnesses. When credible research raises questions about neurodevelopmental and endocrine impacts on our children, action by our government to protect them becomes paramount.

For many Ohio families, avoiding fluoridated water is not a simple matter of preference. Effective fluoride removal typically requires reverse osmosis or similarly advanced filtration systems, which involve significant upfront installation costs and ongoing maintenance expenses. Bottled water, while an alternative, imposes recurring financial burdens and contributes to plastic waste and environmental concerns. Lower-income families are disproportionately affected, leaving many without a realistic means to opt out. In practical terms, the current system functions as compulsory exposure for residents in fluoridated districts.



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House Bill 182 provides a reasonable, measured solution. It does not prohibit individuals from accessing fluoride through toothpaste, supplements, or professional dental treatments. It simply removes the mandate that all citizens ingest a chemical intervention through their tap water regardless of personal preference or medical circumstance. Respectfully, supporting this bill affirms Ohio's commitment to individual liberty, parental rights, the Make America Healthy Again agenda, and evidence-based policymaking. I urge this committee to support this important legislation and quickly move HB 182 out of committee. Let's protect our precious children and end the practice of forced medication without consent.

Respectfully,

**Stephanie Stock**  
**President, OAMF**