## **Department of Applied Geology**

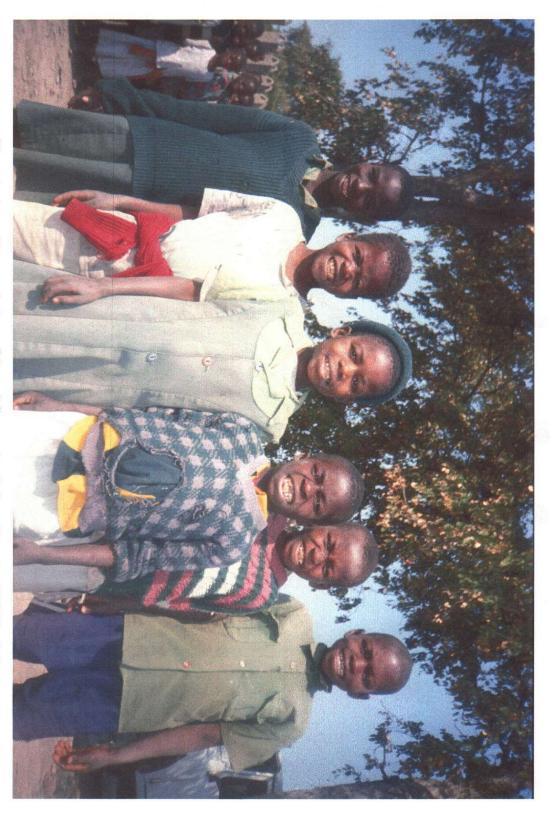
Fluoride Contaminated Drinking Water in Gokwe District (NW Zimbabwe): Spatial Distribution, Lithostratigraphic controls and Implications for Human Health

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This thesis is presented for the Degree of Master of Science (Applied Geology) of Curtin University of Technology

Declaration	1

This thesis contains no material which has been accepted for the award of any other degree or diploma in any university.
To the best of my knowledge and belief this thesis contains no material previously published by any other person except where due acknowledgment has been made.
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Frontispiece: Young victims of dental fluorosis, Gokwe District, NW Zimbabwe.

#### ACKNOWLEDGEMENTS

This research and precursor studies were undertaken during the tenure of an AusAID scholarship. I would like to acknowledge the perennial support I received from Deb, Julie and Anita of the AusAID Liaison Office at Curtin University of Technology.

Fieldwork was financially and materially supported by EIGG (Environmental Inorganic Geochemistry Group, Curtin University of Technology) and the ZGS (Zimbabwe Geological Survey). Foremost, I would like to thank my supervisor Ron Watkins for guidance, sound advice and thoughtful comments throughout this project. I am also grateful to my colleagues at the ZGS for their assistance and support. Forbes Mugumbate is credited for recommending and supporting this project. Ali Ait-Kaci Ahmed and Artwell Mukandi provided eye-opening comments during the reconnaissance phase of this project. Ali unfailingly continued to ply me with valuable information through correspondence. Bornwell Mupaya imbued me with a wealth of research and write-up tips. Warren Makamure provided unwavering logistical and technical assistance in the field. Wilmose Mafuse deserves special mention for accompanying me across the border into Zambia to attend to certain logistics of the project. Peter is thanked for sample preparations. Richard Owen of the University of Zimbabwe provided advice and supplied a water level dip meter. My colleagues at EIGG, namely Ryan, Troy, Dave, Eddie, Bob and John are thanked for logistical, technical and social support throughout my two years at Curtin and during the course of the project.

I was privileged to spend three months at the GSWA (Geological Survey of Western Australia) learning aspects of GIS that helped shape this project. I would like to thank Tim Griffin (Director) and all staff at GSWA, particularly Andrew Goss (organizer/process leader) and the staff at the Geoscience Data Management Section for their support and patience. Lindsay Collins (Head of the Department of Applied Geology, Curtin University) is thanked for arranging the work experience program through which I was involved with GSWA.

Finally, I am indebted to my wife Dealia and son Precise for their forbearance to my prolonged mental absences from family life caused by this enterprise.

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#### ABBREVIATIONS USED IN THIS THESIS

CDTA Cyclohexylene Dinitrilo Tetraacetic Acid

CSIR Centre for Scientific and Industrial Research (S. Africa)

DEP Department of Environmental Protection (USA)

EIGG Environmental Inorganic Geochemistry Group

ESRITM Environmental Systems Research Institute

FISE Fluoride Ion Selective Electrode

GIS Geographical Information System

GSWA Geological Survey of Western Australia

HPIC High Performance Ion Chromatography

IDW Inverse Distance Weighted

MSL Mean Sea Level

NRC National Research Council (U.S.A)

ppb parts per billion

ppm parts per million

TISAB Total Ionic Strength Adjustment Buffer

TDS Total dissolved solids

UNICEF United Nations International Children and Education Fund

UTM Universal Transverse Mercator

WHO World Health Organisation

ZGS Zimbabwe Geological Survey

ZINWA Zimbabwe National Water Authority

#### **ABSTRACT**

The supply of drinking water in Gokwe District (NW Zimbabwe) is almost entirely based on groundwater drawn from boreholes and open dug wells. In certain areas of the district, the occurrence of dental fluorosis has been linked to excessive fluoride in the water supplies. A high prevalence of dental fluorosis (about 62%) was previously recorded among school children in the district. The aim of this study was to determine relationships between the spatial distribution of fluoride content in drinking water supplies in Gokwe, and lateral and vertical geological variation.

A total of 224 water samples were collected from 196 water sources in the study area (a further 18 water sources just outside the study area were also sampled). All the samples were analysed for fluoride in the field using the fluoride ion selective electrode method (FISE). One hundred and fifty nine duplicate samples were analysed for fluoride and common anions and cations using High Performance Ion Chromatography (HPIC) in the laboratory. Two main groups of computer programmes were employed: (1) Geographic Information System (ArcView® GIS) was used to store, analyse and display multiple layers of surface geologic and geographic information, and (2) a three-dimensional visualisation programme (Rockworks) was used to interpret and illustrate site stratigraphy based on borehole information.

Results indicated that the fluoride content of drinking water in the study area ranges from 0 to 9.65 mg/L. Forty-seven water sources (24%) yielded water containing fluoride in excess of the World Health Organisation's (WHO) health limit of 1.5 mg/L F. Of the 47

high fluoride water sources, 43 were borcholes (pumped or artesian). The shallower water sources (dug wells, streams and dams) largely yielded low-fluoride water. The groundwater fluoride contamination is stratigraphically controlled and originates from carbonaceous material (carbonaceous shales, carbonaceous mudstones and coaly material) within the Lower Madumabisa and Middle Wankie Members of the Lower Karoo Group. It has been shown that in general the greater the proportion of carbonaceous material intersected by a borehole, the greater the fluoride concentration of the water. Probable mineral sources of fluoride within the carbonaceous material include fluorapatite, kaolinite and trona. Chemical parameters that appear to influence the concentration of dissolved F in the water supplies include total dissolved solids (TDS), NaCl and pH. In relatively low fluoride waters, F concentrations generally increase with TDS and NaCl concentrations, whereas the highest F concentrations are found in moderately alkaline (pH 7.8-9) waters.

Based on ranges of fluoride concentration in drinking water, fluorosis-risk zones were identified and have been illustrated on a fluorosis-risk map. The zones are: No Risk Zone (0-1.5 mg/L F), Moderate Risk Zone (1.5-3.0 mg/L F), High Risk Zone (3.0-6.0 mg/L F) and the Very High Risk Zone (6.0-10.0 mg/L F). The map suggests that groundwater available to people occupying 3650 km² (60.8%) of the study area potentially contains excessive fluoride (F>1.5 mg/L), presaging the occurrence of dental fluorosis, skeletal fluorosis and crippling skeletal fluorosis in the area.

Different strategies may be employed to ameliorate the fluoride problem in Gokwe.

These include sinking new boreholes to optimal depths and in appropriate locations, promoting the use of surface water and shallow groundwater, resettlement and defluoridation. However in order to fully understand the problem and to prescribe these or other solutions more comprehensively, multi-disciplinary studies may be required. Such studies may consider isotopic dating of water to investigate any relationships between fluoride concentration and residence time of water, geochemical analyses of rocks and soils, detailed fluorosis epidemiology studies and test-scale defluoridation investigations.

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