

NINETEENTH CONGRESS OF THE REPUBLIC OF THE PHILIPPINES First Regular Session

22 JUL 13 PS :19

SENATE

s. No. 551

RECEIVED BY:

Introduced by Senator PIA S. CAYETANO

AN ACT ESTABLISHING AN INTEGRATED UTILIZATION AND PROMOTION OF FOLIC ACID FOOD FORTIFICATION AND SUPPLEMENTATION

EXPLANATORY NOTE

Maternal health has been closely linked to newborn survival. The desire to have children and raise them well empowers many women and families to plan for their pregnancies. Women who want to prepare for their pregnancy must give due importance to their health and well-being, especially when it comes to proper nutrition, as this will also affect their children.

In the Philippines, congenital anomalies are in the top ten (10) causes of infant and child mortality for the past six decades. Some of these defects, such as neural tube defects (NTDs), happen in the first month of pregnancy—often before a woman even knows that she is pregnant. NTDs are birth defects of the brain, spine and cord.

Globally, an estimated 260,000 pregnancies are affected by NTDs, with 75% of live births resulting in mortality before the age of five. They are associated with

¹ Alcausin, M.M.L., Sur, A.L.D., Tumulak, M.J.R., & Padilla, C.D. (Sep 5, 2017). AB122. Occurrence of birth defects at the Philippine General Hospital, 2013–2014: a prospective study. Retrieved July 5, 2022, from https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5641757/.

increased fetal and infant mortality, morbidity, lifelong disability, and high economic costs.²

Folic acid is a micronutrient belonging to the B complex group of vitamins. This micronutrient can be found in fruits, vegetables, legumes, and dairy products; and its deficiency can be brought about by low intake of the food group mentioned above, malabsorption and intestinal parasite infections, and genetic disorders of folic acid metabolism. The consumption of folic acid before and during early pregnancy makes NTDs preventable, with the U.S. Public Health Service recommending 0.4mg daily. Its supplementation should start five to six (5-6) months before conception but many pregnancies happen unplanned, especially among teenagers and young adults.³

Folic acid deficiency increases the risk of pregnant women to have a miscarriage or give birth to a child with congenital anomalies or birth defects.⁴ In the Philippines, the scale and impact of folic acid deficiency is still difficult to quantify due to insufficient data. To meet the dietary requirements of folic acid, it is recommended to consume food that includes green leafy vegetables (spinach, kangkong, asparagus), fruits (melon, oranges, banana, avocado) and legumes, beef liver, and lean beef. Consuming a multivitamin of 0.4mg of folic acid daily also guarantees a woman of receiving the amount needed for a healthy pregnancy.⁵

First filed in the 17th Congress by the undersigned at the House of Representatives, this proposed measure aims to provide a comprehensive approach to address the causes of folic acid deficiency and its association to miscarriages and congenital anomalies. By fortifying food products with folic acid and ensuring its adequate intake among women of reproductive age, congenital anomalies can be

https://actamedicaphilippina.upm.edu.ph/index.php/acta/article/view/5539.

² Ostrea, Jr., E.M. (Mar 30, 2022). Prevention of Fetal Neural Tube Defect with Folic Acid Supplementation. Retrieved July 5, 2022, from

³ Ibid.

⁴ Office on Women's Health. (n.d.). Folic acid. Retrieved July 5, 2022, from https://www.womenshealth.gov/a-z-topics/folic-acid.

⁵ Food and Nutrition Research Institute. (n.d.). Folic Acid Prevents Birth Defects. Retrieved July 5, 2022, from https://www.fnri.dost.gov.ph/index.php/publications/writers-pool-corner/59-babies-and-children/96-folic-acid-prevents-birth-defects.

prevented. Thus, this bill aims to implement policies and programs to promote and increase the supply, access, consumption, and utilization of an adequate quantity, quality, and a variety of food with folic acid for different population groups, which shall also include food-based strategies, nutrition counseling, public health and food safety measures.

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For these reasons, the passage of this bill is urged.

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Be it enacted by the Senate and the House of Representatives of the Philippines in Congress assembled:

1 ARTICLE I
2 GENERAL PROVISIONS

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Section 1. Short Title. - This Act shall be known as the "Folic Acid Act".

Sec. 2. *Declaration of Policy.* – It is the policy of the State to equally protect the life of the mother and the lives of the unborn from conception, promote the right to health of the people, and instill health consciousness among them. In pursuit of these policies, the State recognizes the need to adopt and support a comprehensive approach that addresses the causes of folic acid deficiency and its association to miscarriage and congenital anomalies. Programs, projects, and activities to promote and increase the supply, access, consumption, and utilization of an adequate quantity, quality, and a variety of food for different population groups shall be enacted to strengthen policies that were formulated and in plemented which includes food-based strategies, nutrition education, public health, and food safety measures, and supplementation. The State also recognizes that an effective public education program is vital in preventing the ill-effects of folic acid deficiency among pregnant women, such as miscarriages and congenital anomalies.

1		Se	c. 3. Objectives. — The objectives of this Act are:
2		a)	To support the achievement of the Sustainable Development Goals (SDGs),
3			particularly on SDG 3 (Good Health and Well-being), for adequate nutrition
4			and attainment of healthy life for all and at all ages;
5		b)	To ensure that every woman of reproductive age has access to food and
6			food products containing folate and folic acid and folic acid supplements to
7			reduce the risk of miscarriage and having babies with neural tube defects
8			and other birth defects;
9		c)	To ensure that there is adequate supply of folic acid-fortified food and food
l0			products and folic acid tablets at an affordable price;
l1		d)	To ensure that there is sufficient and correct information on the role of
L2			folate and folic acid for women of reproductive age and their children;
L3		e)	To ensure the creation of a sustained inter-agency collaboration for the
L4			aggressive implementation and monitoring of this Act; and
L5		f)	To foster collaborative undertakings in continuous research on folic acid
L6			food fortification and supplementation.
L7			ARTICLE II
L8			DEFINITION OF TERMS
L9		Se	c. 4. Definition of Terms. — For the purpose of this Act, the following terms
20	shall b	e d	lefined as follows:
21	a)	Bir	th Defect refers to a physical or biochemical abnormality present at birth,
22		wh	nich may be inherited or is a result of environmental influence, while the baby
23		is (developing in the mother's womb;
24	b)	Fo	lic Acid refers to a micronutrient belonging to the B complex group of
25		vit	amins, available in its endogenous (as folate) and synthetic forms;
26	c)	Fo	rtification refers to the practice of deliberately increasing the content of an
27		ess	sential micronutrient in food, so as to improve the nutritional quality of the
28		foc	od supply and provide a public health benefit with minimal risk to health;
29	d)	Ne	eural Tube Defects refer to birth defects of the brain and spinal cord which
30			cur in the first month of pregnancy;
31		e)	Reproductive Age refers to the age from first menstruation period of a
32			woman up to the age of cessation of menstruation; and

f) Supplementation refers to the provision of relatively large doses of micronutrients, usually in the form of pills, capsules, or syrups.

ARTICLE III

INTEGRATED UTILIZATION AND PROMOTION OF FOLIC ACID FOOD

FORTIFICATION AND SUPPLEMENTATION

Sec. 5. Awareness and Promotion. — Medical and allied professionals in the healthcare delivery system shall integrate in their practice, reproductive health, existing burden of miscarriages and birth defects, folic acid intake and deficiency, as well as the nature and benefits of dietary diversifications, fortification, and supplementation. The Department of Education (DepEd) and the Commission on Higher Education (CHED) shall incorporate the above-mentioned information in their curriculum.

The Department of Health (DOH), in coordination with the Philippine Information Agency (PIA), shall disseminate information and produce other awareness and promotional programs deemed appropriate under this Act through print, broadcast, and social media, the use of mobile and computer applications, among others.

Sec. 6. *Dietary Diversification.* – The Food and Nutrition Research Institute (FNRI), in collaboration with the National Nutrition Council (NNC), shall design functional food and promote nutrition practices through nutrition education.

Sec. 7. Food Fortification. — Fortification of food and food products with folic acid shall adopt and strengthen Republic Act No. 8976 or the Philippine Food Fortification Act of 2000, which mandates the fortification of certain food and food products with vitamin A and iron. The type of fortification and the fortificant of choice shall be the responsibility of the Food and Drug Administration (FDA). Within three (3) years after the enactment of this Act, all food groups identified by the NNC as commonly consumed and should be consumed by women of reproductive age shall be fortified with folic acid, in addition to the other micronutrients added to these food groups.

Sec. 8. *Folic Acid Supplementation.* — All programs implemented pursuant to this Act shall adopt and strengthen the DOH Administrative Order 2010-0010 or the Revised Policy on Micronutrient Supplementation, and shall ensure that: 1) there is

adequate supply of folic acid tablets; 2) the production, packaging, and distribution of folic acid tablets meet quality standards; and 3) it is affordable and can be easily accessed by every Filipino.

The DOH shall ensure that folic acid supplements are part of the routine services in all barangay and municipal health centers. Women of reproductive age shall be required to take folic acid tablets daily. Supplements shall also be given in evacuation centers during emergencies, disasters, and calamities. The DOH shall ensure that adequate information regarding the prescriptions, administration, and delivery of supplements, as well as safety of ingestion, are provided to all barangay health workers and women of reproductive age.

Sec. 9. Research Development and Extension. — Research development and extension undertakings on folic acid shall be incorporated in the National Unified Health Research Agenda of the Philippine National Health Research System. The National Institutes of Health and all regional health research and development consortia are required to take part in these undertakings.

ARTICLE IV

IMPLEMENTATION

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Sec. 10. *Lead Agency.* — The DOH shall be the Lead Agency in implementing this Act. For the purposes of achieving the objectives of this Act, the DOH shall:

- 1) Establish a National Coalition on Folic Acid Provision and Utilization;
- 2) Develop the implementing rules and regulations for the immediate implementation of a comprehensive program on folic acid within one hundred eighty (180) days from the enactment of this Act;
- 3) Identify a regional agency that will oversee the implementation of the Act in every region in the country; and
- 4) Coordinate with government and non-government organizations for the implementation of this Act.

Sec. 11. *National Coalition on Folic Acid.* — A National Coalition on Folic Acid Provision and Utilization shall be established under the DOH to provide policy directions and to oversee the overall implementation of actions, programs, and projects related thereto. The National Coalition shall assist in the conceptualization, planning, and implementation of the various programs and projects, primarily on

health policy, research development, and extension, awareness and promotion,
 monitoring and review, regional operations, and support.

The National Coalition shall be composed of government and private sectors, academe, hospitals and other health centers, research institutes, and other non-medical societies.

Sec. 12. *Quality Assurance*. – A quality assurance system will be established in accordance with DOH guidelines for food fortification, as well as guidelines set by the World Health Organization (WHO) on food fortification and micronutrient supplementation.

Sec. 13. *Monitoring*. – The DOH is given the overall responsibility for the monitoring program and reporting progress. Other agencies may contribute to elements of the monitoring program as deemed appropriate by the DOH.

Sec. 14. *Review.* — A periodic review shall be done by the DOH, in coordination with the National Coalition on Folic Acid Provision and Utilization, at least once every five (5) years. Outcome data from the National Nutrition Survey and other nutrition surveillance systems shall be used in conducting such review.

Sec. 15. *Database.* — All DOH regional offices shall maintain a database of all patients receiving folic acid interventions and those who refuse to take folic acid supplements. The data shall be submitted to the DOH Central Office on an annual basis to establish a national registry pursuant to this Act. Outcome data from said registry shall form the basis for future programs and projects deemed necessary by the national government to be incorporated and implemented in this Act.

Sec. 16. Financing and Other Resources. — The Department of Trade and Industry, Department of Science and Technology, Livelihood Corporation, and government banks are hereby required to assist and support affected manufacturers in upgrading their technologies by facilitating soft loans and financial assistance for the procurement of necessary technologies and machines in compliance with the provisions of this Act. The Department of the Interior and Local Government shall mobilize and establish financing programs to support folic acid interventions. Provision for folic acid supplements and analytical and biochemical laboratory testing for folic acid levels shall be incorporated in benefit package of the Philippine Health Insurance Corporation.

Sec. 17. Establishment and Accreditation of Folic Acid Laboratory Services			
The DOH shall ensure that free-standing and hospital-based laboratories are offering			
affordable and accurate analytical and biochemical folic acid tests. These laboratories			
must be strategically located to be easily accessible to the public.			
Sec. 18. Non-Compliance with Folic Acid Fortification. — The following shall be			

- considered non-compliance with the fortification process:
 - a) If the food fortification levels do not comply with the DOH requirements and WHO guidelines, except when the deviation from the fortification levels is justified and is properly declared in the labeling; or
 - b) If the process of fortification does not conform with the DOH and other government standards.
- Sec. 19. Incentives and Disincentives. All women who have taken folic acid tablets before, during, and after conception up to delivery shall be given appropriate incentives as identified by the National Coalition on Folic Acid.

Any woman who refuses to take supplements on the grounds of religious and cultural beliefs and for other reasons not specified, must acknowledge in writing her understanding of the risks to her and to her unborn child. A copy of this refusal shall be indicated in the surveillance registry.

ARTICLE V 19

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FINAL PROVISIONS 20

- Sec. 20. International Commitments. Nothing in this Act is intended to violate provisions of treaties and international agenda to which the Philippines is a party.
- Sec. 21. Implementing Rules and Regulations. Within one hundred eighty (180) days from effectivity of this Act, the DOH shall issue the implementing rules and regulations to this Act.
- Sec. 22. Repealing Clause. All general and special laws, decrees, executive orders, proclamations and administrative regulations, or any parts thereof, which are inconsistent with this Act are hereby repealed or modified accordingly.
- Sec. 23. Separability. If, for any reason or reasons, any part of provisions of this Act shall be declared or held to be unconstitutional or invalid, other provision or provisions hereof which are not affected thereby shall continue to be in full force and effect.

- Sec. 24. Effectivity. This Act shall take effect fifteen (15) days after its
- 2 publication in at least two (2) newspapers of general circulation.

Approved,