

New Zealand Food Safety's Review of folic acid fortification of food

12 November 2019

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Introduction

- Nelson Marlborough Health (Nelson Marlborough District Health Board) (NMH) is a key
 organisation involved in the health and wellbeing of the people within Te Tau Ihu. NMH
 appreciates the opportunity to comment from a public health perspective on the New
 Zealand Food Safety's Review of folic acid fortification of food.
- 2. NMH makes this submission in recognition of its responsibilities to improve, promote and protect the health of people and communities under the New Zealand Public Health and Disability Act 2000 and the Health Act 1956.
- This submission sets out particular matters of interest and concern to the Public Health Service, NMH.

General Comments

- 4. NMH welcomes this review of the folic acid fortification of food. Mandatory folic acid fortification is linked to lower rates of birth defects. Providing access to healthy foods plays an important role in academic achievement of students. Lack of adequate consumption of specific foods, such as fruits, vegetables, or dairy products, is associated with lower grades among students. Deficits of specific nutrients (i.e., vitamins A, B6, B12, C, folate, iron, zinc, and calcium) are associated with lower grades and higher rates of absenteeism and tardiness among students. Folic acid is an essential B vitamin important for the healthy development of babies early in pregnancy. Taking folic acid supplements at the recommended doses in pregnancy has no adverse effects on pregnancy outcome or the child's health.
- 5. Mandatory fortification is in the best interest of the health of the public and will result in the greatest reduction in neural tube defects and associated healthcare costs. Mandatory fortification will be the most effective measure to reduce neural tube defect pregnancies. In NZ this is estimated to be a reduction of up to 20% (range is 5-20%) in neural tube defect pregnancies.
- 6. NZ has one of the highest rates of teenage pregnancy amongst developed countries⁵; with Pacific and Maori teenagers presenting the highest rates twice the European rate for

¹ Kleinman RE, Hall S, Green H, Korzec-Ramirez D, Patton K, Pagano, ME, Murphy JM. Diet, breakfast, and academic performance in children. Annals of Nutrition & Metabolism. 2002;46(suppl 1):24–30

² Taras, H. Nutrition and student performance at school. Journal of School Health. 2005;75(6):199-213

³ MacLellan D, Taylor J, Wood K. Food intake and academic performance among adolescents. Canadian Journal of Dietetic Practice and Research. 2008;69(3):141–144

⁴ Neumark-Sztainer D, Story M, Dixon LB, Resnick MD, Blum RW. Correlates of inadequate consumption of dairy products among adolescents. Journal of Nutrition Education. 1997;29(1):12–20

⁵ Ministry of Social Development (NZ). (2010). The Social Report 2010.

Pacific and more than three times for Maori⁶. Research has shown that lower socio-economic groups in NZ are more likely to have unplanned pregnancies⁷ and this group is less likely to understand the importance of folic acid⁸ and therefore less likely to take folic acid supplements or choose fortified food.

- 7. Voluntary fortification of any form is therefore likely to be least effective for young mothers, many Maori and Pacific and lower socio-economic groups and is unlikely to achieve the population reduction in the burden of neural tube defects that mandatory fortification is likely to achieve.
- 8. NMH supports the mandatory fortification of bread however acknowledgement needs to be given that the amount of bread women are consuming is reducing, therefore other measures also need to be considered such as increasing the amount of green leafy vegetables such as silverbeet, and increasing the amount of lentils and dried beans⁹.
- 9. The cost of vegetables have increased in recent years¹⁰ making it more difficult for those on lower incomes to afford healthy diets. In addition to the fortification of bread, consideration needs to be given to making fruit and vegetables more affordable, this could be achieved by removing the GST on fruit and vegetables.

Specific Comments

- 10. NMH agrees with the problem as stated but recommends that the problem statement acknowledges the long term effect neural tube defects (NTD) can have on a child and their families, and that families face many additional burdens in terms of home and car modifications and ongoing medical appointments.
- 11. NMH agrees with the objective of the review to increase the consumption of food containing folic acid by women of child-being age thereby reducing the number of NTD affected pregnancies.
- 12. NMH does not believe that the weighting criteria is correct because it does not acknowledge the long term financial burden that is placed on families with a child with NTD. The criteria looks at costs to government and industry but does not factor in costs to families.
- 13. NMH supports the mandatory fortification of non-organic bread and bread making wheat (Option 3c). NMH believes that the goal of any population wide health policy should be the targeted reduction of the health impact on those who experience it the most and therefore in this instance the focus must be on how to best reduce or eliminate NTD

⁶ Ministry of Social Development (NZ). (2010). ibid.

⁷ Amin Shokravi, F.,Howden Chapman, Ph., & Peyman N. (2009). op. cit., p. 2

⁸ Ministry for Primary Industries. (2012). op. cit., 5

⁹ https://www.nzdoctor.co.nz/article/undoctored/report-recommends-folate-fortification-bread-expert-reaction

¹⁰ https://www.stats.govt.nz/news/vegetable-prices-shoot-up-in-july

overall, and in particular for Māori whanau, therefore NMH supports Option 3c. The consultation document shows that Option 3c modelling demonstrated significantly improved health benefits than Option 3b.

14. NMH supports the Australia New Zealand Food Standards Code to continue to permit voluntary fortification of folic acid in other foods such as breakfast cereals.

Conclusion

15. NMH thanks the New Zealand Food Safety for the opportunity to comment on the Review of folic acid fortification of food.

Yours sincerely

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