

EIGHTEENTH CONGRESS OF THE )  
REPUBLIC OF THE PHILIPPINES )  
*First Regular Session* )

Senate  
Office of the Secretary

SENATE

19 JUL -8 P3:26

S. No. 293

J

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. Many, however, do not have the knowledge and access to reproductive health services.

Public health data show that congenital anomalies rank among the top 20 causes of death across the life span and are already the third leading cause of death in the infancy period. Some of these defects, like that of the neural tube defects, happen in the first month of pregnancy—often before a woman even knows that she is pregnant. Neural tube defects are birth defects of the brain, spine and cord.

In the Philippines, 17% of all intended pregnancies end up in miscarriage. Further, more than half of all pregnancies are unplanned.

Empirical studies have shown that folic acid deficiency increases the risk of pregnant women to have an early miscarriage or give birth to a child with congenital anomalies or birth defects. A prevalence study of folic acid deficiency among pregnant women showed that more than half (51.7%) had deficiency. Moreover, the

scale and impact of folic acid deficiency in the Philippines is still difficult to quantify due to insufficient data. However, folic acid deficiency makes a substantial contribution to the national and global burden of miscarriage, neural tube defects, intrauterine growth retardation and pre-term births. 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. Unfortunately, the mean one-day intake of Filipinos, women of reproductive age (including pregnant and lactating mothers), is low in vegetables (10.7%), fruits (7.3%), legumes (0.55%), and dairy products (3.8%), based on the 2008 National Nutrition Survey. Intervention studies claim that folic acid intake can lower the risk of miscarriages and neural tube defects by 20% and 70%, respectively.

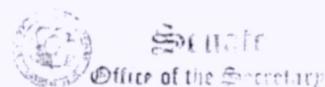
These premises, therefore, warrants a comprehensive approach that addresses the causes of folic acid deficiency and its association to miscarriages and congenital anomalies. Fortification of food products with folic acid has been considered to be the most effective method of ensuring adequate intake of folic acid in women of reproductive age. Periconceptional folic acid supplementation also has a strong protective effect against congenital anomalies. Actions, policies, and programmes to promote and increase the supply, access, consumption, and utilization of an adequate quantity, quality, and a variety of food for all population groups shall be enacted and supported, which further includes food-based strategies, nutrition counseling, public health and food safety measures.

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



PIA S. CAYETANO

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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**

3

4       Section 1. *Short Title.* – This Act shall be known as the "Folic Acid Act".

5       Sec. 2. *Declaration of Policy.* – It is the policy of the State to equally protect

6       the life of the mother and the lives of the unborn from conception, promote the right

7       to health of the people, and instill health consciousness among them. In pursuit of

8       these policies, the State recognizes the need to adopt and support a comprehensive

9       approach that addresses the causes of folic acid deficiency and its association to

10      miscarriage and congenital anomalies. Actions, policies, and programmes to promote

11      and increase the supply, access, consumption, and utilization of an adequate

12      quantity, quality, and a variety of food for all population groups shall be enacted to

13      strengthen other policies that were formulated and implemented which includes

14      food-based strategies, nutrition education, public health, and food safety measures,

15      and supplementation. The State also recognizes that an effective public education

16      program is vital in preventing the ill-effects of folic acid deficiency among pregnant

17      women, such as miscarriages and congenital anomalies.

- 1                   Sec. 3. *Objectives.* – The objectives of this Act are:
- 2                   a) To support the achievement of global goals for adequate nutrition and  
3                   attainment of healthy life for all and at all ages;
- 4                   b) To ensure that every woman of reproductive age has access to food and  
5                   food products containing folate and folic acid and folic acid supplements to  
6                   reduce the risk of miscarriage and having babies with neural tube defects  
7                   and other birth defects;
- 8                   c) To ensure that there is adequate supply of folic acid-fortified food and  
9                   food products and folic acid tablets at an affordable price;
- 10                  d) To ensure that there is sufficient and correct information on the role of  
11                  folate and folic acid for women of reproductive age and their children;
- 12                  e) To ensure the creation of a sustained inter-agency collaboration for the  
13                  aggressive implementation and monitoring of this Act; and
- 14                  f) To foster collaborative undertakings in continuous research on folic acid  
15                  food fortification and supplementation.

16

17                   **ARTICLE II**

18                   **DEFINITION OF TERMS**

- 19
- 20                  Sec. 4. *Definition of Terms.* – For the purpose of this Act, the following terms  
21                  shall be defined as follows:
- 22                  a) *Birth Defect* refers to a physical or biochemical abnormality present at birth,  
23                  which may be inherited or is a result of environmental influence, while the  
24                  baby is developing in the mother's womb;
- 25                  b) *Folic Acid* refers to a micronutrient belonging to the B complex group of  
26                  vitamins, available in its endogenous (as folate) and synthetic forms;
- 27                  c) *Fortification* refers to the practice of deliberately increasing the content of an  
28                  essential micronutrient in food, so as to improve the nutritional quality of the  
29                  food supply and provide a public health benefit with minimal risk to health;
- 30                  d) *Neural Tube Defects* refer to birth defects of the brain and spinal cord which  
31                  occur in the first month of pregnancy;

- 1           e) *Reproductive Age* refers to the age from first menstruation period of a  
2           woman up to the age of cessation of menstruation; and  
3           f) *Supplementation* refers to the provision of relatively large doses of  
4           micronutrients, usually in the form of pills, capsules, or syrups.

5

## 6           **ARTICLE III**

### 7           **INTEGRATED UTILIZATION AND PROMOTION OF FOLIC ACID FOOD 8           FORTIFICATION AND SUPPLEMENTATION**

9

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

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

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

25          Sec. 7. *Food Fortification.* – Fortification of food and food products with folic  
26        acid shall adopt and strengthen Republic Act No. 8976 or the Philippine Food  
27        Fortification Act of 2000, which mandates the fortification of certain food and food  
28        products with vitamin A and iron. The type of fortification and the fortificant of  
29        choice shall be the responsibility of the Food and Drug Administration (FDA). Within  
30        three (3) years after the enactment of this Act, all food groups identified by the NNC  
31        as commonly consumed and should be consumed by women of reproductive age

1 shall be fortified with folic acid, in addition to the other micronutrients added to  
2 these food groups.

3 Sec. 8. *Folic Acid Supplementation.* – All programs implemented pursuant to  
4 this Act shall adopt and strengthen the DOH Administrative Order 2010-0010 or the  
5 Revised Policy on Micronutrient Supplementation, and shall ensure that: 1) there is  
6 adequate supply of folic acid tablets; 2) the production, packaging, and distribution  
7 of folic acid tablets meet quality standards; and 3) it is affordable and can be easily  
8 accessed by every Filipino.

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

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

## **ARTICLE IV**

## **IMPLEMENTATION**

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

- 27        1) Establish a National Coalition on Folic Acid Provision and Utilization;

28        2) Develop the implementing rules and regulations for the immediate

29              implementation of a comprehensive program on folic acid within one

30              hundred eighty (180) days from the enactment of this Act;

31        3) Identify a regional agency that will oversee the implementation of the

32              Act in every region in the country; and

1           4) Coordinate with government and non-government organizations for the  
2           implementation of this Act.

3           Sec. 11. *National Coalition on Folic Acid.* – A National Coalition on Folic Acid  
4           Provision and Utilization shall be established under the DOH to provide policy  
5           directions and to oversee the overall implementation of actions, programs, and  
6           projects related thereto. The National Coalition shall assist in the conceptualization,  
7           planning, and implementation of the various programs and projects, primarily on  
8           health policy, research development, and extension, awareness and promotion,  
9           monitoring and review, regional operations, and support.

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

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

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

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

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

30          Sec. 16. *Financing and Other Resources.* – The Department of Trade and  
31          Industry, Department of Science and Technology, Livelihood Corporation, and  
32          government banks are hereby required to assist and support affected manufacturers

1 in upgrading their technologies by facilitating soft loans and financial assistance for  
2 the procurement of necessary technologies and machines in compliance with the  
3 provisions of this Act. The Department of the Interior and Local Government shall  
4 mobilize and establish financing programs to support folic acid interventions.  
5 Provision for folic acid supplements and analytical and biochemical laboratory testing  
6 for folic acid levels shall be incorporated in benefit package of the Philippine Health  
7 Insurance Corporation.

8                   *Sec. 17. Establishment and Accreditation of Folic Acid Laboratory Services.* –

9     The DOH shall ensure that free-standing and hospital-based laboratories are offering

10   affordable and accurate analytical and biochemical folic acid tests. These

11   laboratories must be strategically located to be easily accessible to the public.

12 Sec. 18. *Non-Compliance with Folic Acid Fortification.* – The following shall be  
13 considered non-compliance with the fortification process:

- 14        a) If the food fortification levels do not comply with the DOH requirements  
15                  and WHO guidelines, except when the deviation from the fortification  
16                  levels are justified and are properly declared in the labeling; or  
17        b) If the process of fortification does not conform with the DOH and other  
18                  government standards.

19 Sec. 19. *Incentives and Disincentives.* – All women who have taken folic acid  
20 tablets before, during, and after conception up to delivery shall be given appropriate  
21 incentives as identified by the National Coalition on Folic Acid.

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

## **ARTICLE V**

### **FINAL PROVISIONS**

30 Sec. 20. *International Commitments.* – Nothing in this Act is intended to  
31 violate provisions of Treaties and International Agenda to which the Philippines is a  
32 party.

1           Sec. 21. *Implementing Rules and Regulations.* – Within one hundred eighty  
2 (180) days from effectivity of this Act, the DOH shall issue the implementing rules  
3 and regulations to this Act.

4           Sec. 22. *Repealing Clause.* – All general and special laws, decrees, executive  
5 orders, proclamations and administrative regulations, or any parts thereof, which are  
6 inconsistent with this Act are hereby repealed or modified accordingly.

7           Sec. 23. *Separability.* – If, for any reason or reasons, any part of provisions of  
8 this Act shall be declared or held to be unconstitutional or invalid, other provision or  
9 provisions hereof which are not affected thereby shall continue to be in full force and  
10 effect.

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

Approved,