Friday 19 May, 2023

Esteemed Member States of the World Health Assembly:

As organizations committed to ending the devastating global crisis of micronutrient malnutrition, we urge your support for the resolution "Accelerating efforts for preventing micronutrient deficiencies and their consequences, including spina bifida and other neural tube defects, through safe and effective food fortification," which will come before the 76th WHA for consideration this year.

Colloquially referred to as "hidden hunger," deficiencies in essential vitamins and minerals, specifically folate, iron, vitamin A, and zinc, affect 50% of all preschool aged children and 67% of all women of reproductive age (WRA) worldwide, according to a recent study published in The Lancet Global Health. These deficiencies cause devastating birth defects, blindness, fragile immune systems, and death during childbirth. Iodine deficiency, still prevalent in many countries, impairs brain development in children, undermining their ability to learn and their eventual earning potential and productivity. Altogether, these preventable deficiencies are among the greatest global threats to human potential.

We already know how to tackle this problem. Large scale food fortification (LSFF) adds essential vitamins and minerals to widely consumed items, such as wheat and maize flours, rice, cooking oil, and salt in accordance with national consumption patterns and deficiencies. Fortifying foods and condiments that are consumed by nearly everyone is an inexpensive and incredibly effective way to improve nutrition across entire populations, making it a critically important tool to combat hidden hunger. Just one dollar invested in fortification brings 27 dollars on average in economic return through improved health and productivity, while sparing countless families the pain of disease, intellectual disability, miscarriage, termination of a wanted pregnancy, still birth, or the death of an infant or child.

The unacceptably high prevalence of folic acid-preventable spina bifida and anencephaly is a striking example of preventable death and morbidity for which LSFF is part of the solution. These neural tube birth defects are among the top contributors to child morbidity without a cure and most affected pregnancies result in miscarriages, terminations, stillbirths, or under-five mortality. Children born with spina bifida require immediate specialized medical intervention as well as lifelong access to multidisciplinary care to reach their full potential while living with lifelong paralysis, incontinence, and other co-morbidities. Access to essential healthcare and support services is not the reality for most people with spina bifida and their families, especially in low-income countries, resulting in further preventable infant and child mortality and morbidity.

There are 30 years of unequivocal scientific evidence on the protective effect of folic acid to prevent neural tube birth defects. A 2019 systemic review and meta-analysis found that food fortification with folic acid reduces the prevalence of such birth defects by 41% on average, reaching women during a critical period as the neural tube of an embryo forms around the 28th day after conception, before most women know that they are



pregnant.^{iv} Despite this evidence, fortification of cereal grains with folic acid and other micronutrients is mandatory in only 69 countries,^v and many of these programs and policies are under resourced and insufficiently enforced, preventing less than 25% of the estimated cases of spina bifida and anencephaly worldwide.^{vi}

A staggering 3 billion people worldwide cannot afford a healthy, nutritious diet, one that is diverse, supplies the vitamins and minerals that all humans need to be healthy and productive, and contributes to preventing non-communicable disease. But micronutrient deficiency is not exclusive to those who cannot afford a healthy, nutritious diet. Higher income often brings with it unhealthy food consumption, including sweets, packaged snacks, fast food, and other ultra-processed food that is nutritionally poor. Crucially, for some micronutrients, such as folate and iodine, adequate consumption without fortified foods is extremely difficult, even with a healthy, diverse diet.

Fortification of staple foods has proven to be the most successful policy in reducing the prevalence of congenital malformations such as spina bifida, anencephaly, and other neural tube defects, as well as iodine deficiency disorders such as congenital hypothyroidism. Fortification with micronutrients such as iron, zinc, and vitamin A, strengthens immunity to disease and significantly increases energy and productivity, among other effects.

Food fortification programs have a proven global record of success over the past 30 years. 147 countries mandate or allow salt iodization, virtually eliminating iodine deficiency and goiter in much of the world, ibut awareness and compliance with iodization programs are declining and iodine deficiency is rising again as a result. 92 countries have implemented cereal grain fortification programs and over 30 fortify oil, margarine, and ghee, reducing the prevalence of folate, iron, vitamin A, vitamin D, and zinc deficiencies, especially where these programs are mandatory and well implemented and enforced.

Still a large unfinished agenda on food fortification remains; doubling down to improve the reach and quality of food fortification programs has huge potential to combat hidden hunger. Micronutrient deficiency is a crisis that affects all communities globally, be they low-income or high-income. Still 84 countries could benefit from establishing mandatory fortification programs, and most existing programs can be strengthened to reach more people with more nutritious food. Still As a global community we must rise to this challenge and quickly. In an increasingly volatile and fragile world, we cannot afford for the next generation to grow up without access to the nutrients they need to develop and thrive.

In recognition of the enormous amount of preventable suffering and disease currently caused by micronutrient deficiency and the existence of a proven cost-effective solution that has yet to be fully deployed, the undersigned organizations urge your support to ensure that the resolution "Accelerating efforts for preventing micronutrient deficiencies and their consequences, including spina bifida and other neural tube defects, through safe and effective food fortification" is passed by the 76th World Health Assembly this year:























Spina Bifida Prevention











































































































































Access to Nutrition Initiative | American Association of Neurological Surgeons | The American Society of Pediatric Neurosurgeons | Asian Australasian Society of Neurological Surgeons | Association of Future African Neurosurgeons | Associação Spina Bifida e Hidrocefalia de Portugal | Bioanalyt | Center for Spina Bifida Prevention at Emory University | Central Uganda Spina Bifida & Hydrocephalus Network | Child Help | Child Help SBH, Malawi | Children's Hospital Capital Institute of Pediatrics | Chilean Corporation for Children with Spina Bifida | Chilean Society of Genetics | CDH International | Continental Association of African Neurosurgical Societies | Costa Rican Institute for Research and Teaching in Nutrition and Health, a public institution under the Costa Rican Ministry of Health | The European Association of Neurosurgical Societies | Federación Latinoamericana de Sociedades de Neurocirugía | Food Fortification Initiative | The Foundation for International Education in Neurological Surgery | Global Alliance for Improved Nutrition | Global Alliance for the Prevention of Spina Bifida F | The Global Alliance for Surgical, Obstetric, Trauma and Anaesthesia Care | Global Fortification Data Exchange | Global Organization of Health Education | Guangzhou Women and Children's Medical Center | Harvard Medical School Program in Global Surgery and Social Change | Helen Keller Intl | Indian Society for Paediatric Neurosurgery | International Clearinghouse for Birth Defects Surveillance and Research | International Federation for Spina Bifida and Hydrocephalus | International Rescue Committee | The International Society for Pediatric Neurosurgery | International Zinc Nutrition Consultative Group | Iodine Global Network | Latin American Association for Pediatric Neurosurgery | March of Dimes | Micronutrient Data Innovation Alliance | Micronutrient Forum | MiracleFeet | MotherBabylodine | National Program on Prevention of Congenital Defects, Paraguay | Neurosurgical Society of Australasia | Neurokids | The Neurosurgery Outreach Foundation | Nutrition International | Omni-Net Ukraine | PATH | P Cubed CC | Pediatric Section of the American Association of Neurological Surgeons/Congress of Neurological Surgeons | Purple Point Neurodiagnostics | Reach Another Foundation | RESULTS Canada | Rotary Club of Coppell | Rotary Club of North Atlanta | St Jude Children's Research Hospital | Sanku - Project Healthy Children | SDG2 Advocacy Hub | Scaling Up Nutrition Movement | Sight and Life | Société Internationale D'Oncologie Pédiatrique (SIOP) | Spina Bifida Association | Standing Together for Nutrition | Stronger Foundations for Nutrition | TechnoServe | Thyroid Federation International | UNICEF | University of Alabama at Birmingham Department of Neurosurgery | Universidad de la Sabana, Colombia | Upstate Brain and Spine Center | Vitamin Angels | World Federation of Neurosurgical Societies | World Food Programme | World Vision International |

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- ^{xi} Global Fortification Data Exchange. FortificationData.org. https://fortificationdata.org/interactive-map-fortification-legislation/
- xiii Food Fortification Initiative. Resources: Global Progress. https://www.ffinetwork.org/globalprogress xiii Stevens, G, Beal T, Mbuya MNN, Luo H, Neufeld, L. "Micronutrient deficiencies among preschool-aged children and women of reproductive age worldwide: a pooled analysis of individual-level data from population-representative surveys." Lancet Global Health 2022; 10: e1590-99.
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