



VitaGrant Campaign Reaches Out to the Mexican Hispanic Population in Florida

Contributed by Elizabeth Jensen, Project Manager, VitaGrant, March of Dimes, Florida Chapter

Inside this issue:

<i>Another Step for Women's Health in Florida</i>	2
<i>FFAC Reaches Out to Professionals Across the State</i>	2
<i>Get Ready for National Folic Acid Awareness Week—January 8-14, 2007</i>	3
<i>Research Update</i>	4
<i>Study Shows Fewer Women of Childbearing Age Take Supplements</i>	5
<i>Around the State</i>	5
<i>Current & Upcoming Events</i>	6

Winter 2006 brings the March of Dimes Florida Chapter through the second year of the three year Florida VitaGrant project. The \$2 million project, initiated in January of 2005, was awarded from the Florida Attorney General's Office as a result of a settlement with multiple vitamin manufacturers. The grant is a partnership between the March of Dimes Florida Chapter, the Florida Department of Health, the Florida Folic Acid Coalition and the Florida Birth Defects Surveillance Center to promote the use of folic acid in women of reproductive age throughout Florida. Through the grant, participating sites receive free multivitamins, folic acid education and preconception education materials to distribute to underserved or unserved women of childbearing age.

Florida Birth Defect Registry data, as well as other data sources, have established that the highest risk group for neural tube defect affected pregnancies is among the Mexican Hispanic population. The VitaGrant project has sought to partner with sites serving this population in an effort to educate and promote folic acid use among this vulner-

able population. Numerous sites, including Migrant Health Centers, Community Health Centers and Redlands Christian Migrant Association (RCMA) sites are partnering with the March of Dimes VitaGrant project to disseminate information and multivitamins.

One such site is the RCMA site in Indian River County. This site primarily serves women from the migrant community. The mission of RCMA is to create and foster opportunities for the children of migrant and other low-income rural families to maximize the choices in their lives. RCMA provides child care and early education for children of these families throughout Florida. The organization serves more than 6,200 children in over 75 different centers and is built on the principles of incorporating the family into child development, health care and educational activities. Most of the women served are of childbearing age, the population served through the VitaGrant project. According to the site director, Isabel Dopsen, most of the women served have low literacy levels, are poor, and are unaware of the impor-

ance of folic acid, especially with regard to supporting healthy pregnancies. Ms. Dopsen reports that the added resources provided through VitaGrant have made a difference to the women served at the site. "I feel good about what we are doing and that we are helping them a lot. The women have been asking when they can get more vitamins. We are at least able to introduce the vitamins, what they are, and the benefits they have to offer. They love receiving the vitamins since they can't afford to buy them on their own."

For more information about the VitaGrant project, or to become a distribution site for the vitamins, contact the VitaGrant Project Manager, Elizabeth Jensen, at ejensen@marchofdimes.com or at 850-245-4465.



A family receives multivitamins from VitaGrant and RCMA.

Folic acid can help prevent birth defects of the brain and spine and other defects as well.

Another Step for Women's Health in Florida

Contributed by Gail Rampersaud, MS, RD, LDN, Assistant in Nutrition Research and Education, FSHN/University of Florida

The Office of Women's Health at the Florida Department of Health hosted a Women's Health Strategic Planning Meeting November 2-3, 2006, at the International Plaza Resort and Spa in Orlando. The goal of the Women's Health Program is to improve the health status of women across Florida by addressing women's health across the life span, addressing racial and ethnic health disparities, and recognizing that health for women is not limited to physical health. The meeting brought together health experts from a variety of backgrounds and experiences to begin drafting a plan for improving the health of all women in Florida. Gail Rampersaud, MS, RD of the University of Florida's Food Science and Human Nutrition

Department participated in the planning meeting on behalf of the Florida Folic Acid Coalition.

The meeting was opened by Nancy Humbert, Deputy Secretary for Women's Health, followed by presentations on the status of women's health in Florida and a panel discussion on key women's health issues. Participants were then divided into workgroups to strategize and prioritize goals and objectives for critical women's health issues including reproductive health, chronic disease, HIV/AIDS, injury and violence prevention, and mental health/substance abuse. The meeting heralded the release of the "Status of Women's Health in Florida-Data Report" developed by members of the In-

teragency Committee on Women's Health Data Subcommittee. The report is a comprehensive assessment of the health of women in Florida, including health indicators, healthy behavior, reproductive health, and racial/ethnic disparities. This report was used to help guide the women's health strategic plan to create a data-driven plan that is unique to the needs of all women in Florida.

For more information about the Office of Women's Health, contact Tiffany Simpkins, MSHA, Coordinator, Women's Health Program, Florida Department of Health, (850) 245-4425; Tiffany_Simpkins@doh.state.fl.us.

The goal of the Women's Health Program is to improve the health status of women across Florida by addressing women's health across the life span, addressing racial and ethnic health disparities, and recognizing that health for women is not limited to physical health.

FFAC Reaches Out to Professionals Across the State

Contributed by Ron Lutz, MSN, ARNP

Educating health care professionals about folic acid, reducing risks for certain birth defects, and staying updated with the emerging research on the benefits of folic acid in reducing risks for certain chronic diseases remain important goals of the Florida Folic Acid Coalition (FFAC). The FFAC exhibited at the **Florida State Association of Occupational Health Nurses (FSAOHN) 46th Annual Conference** in Orlando on October 26-27, 2006. The conference was attended by approximately 125 nurses from around the state of Florida. Several FFAC partners contributed to the success of the exhibit. Educational literature and promotional items were provided by the March

of Dimes Florida Chapter, Florida Department of Health, Florida Department of Citrus, Florida Peanut Producers Association, and Elsevier Publishing. The Florida Department of Citrus provided complimentary Florida orange juice for booth visitors.

The conference provided an opportunity for the FFAC to introduce to occupational health nursing professionals the "**Folic Acid Education Program for Worksite Health/Wellness Promotion**" program currently in development at the University of Florida. The educational program and resource kit will include materials to educate occupational health nurses

and the employees they serve about the health benefits of folic acid across the lifespan. Initial plans for the program include the following materials:

Educator's Guide

- Importance of health/wellness promotion in the workplace
- Information on NTDs and folic acid
- Scripted interactive lesson plans, activities, and camera-ready handouts
- Strategies for working with diverse audiences and cultural/ethnic groups

Educational DVD

- CD-ROM with PowerPoint® presentations and color handouts (PDF for-

mat)

- Videos for health care providers and consumers
- Educational messages for information kiosks, email, and workplace dining facilities



Vicki Elie, President of FSAOHN, addresses conference attendees at the Disney Coronado Springs Resort, Lake Buena Vista, FL, October 27, 2006.

All women of childbearing age should take
400 micrograms of folic acid every day.

National Folic Acid Awareness Week 2007: Folic Acid Now!

Contributed by Ron Lutz, MSN, ARNP



Folic Acid Now!
Do It for Yourself.
Do If for the Ones You Love.

The National Folic Acid Awareness Week campaign "FOLIC ACID NOW!", was created to educate about the many lifelong benefits associated with folic acid consumption.

Folic Acid Now! This is the call to action by the National Council on Folic Acid (NCFA) for the Fourth Annual National Folic Acid Awareness Week planned for January 8-14, 2007. National Folic Acid Awareness Week is sponsored by the March of Dimes and National Alliance for Hispanic Health. Adriane Griffen, Chair, National Council on Folic Acid, encourages everyone to participate. "National Folic Acid Awareness Week is January 8-14, 2007 and we are already getting ready! To order free materials, send "E-Cards" and to use education tools from the NCFA, go to www.folicacidinfo.org. Wear the stickers, tell the women you know and work with, and take your multivitamin! More information on National Folic Acid Awareness Week will be posted on the NCFA Web site in the next few weeks, so be sure to check www.folicacidinfo.org often."

Resources Are Available

To help organizations deliver the message about the importance of folic acid in reducing risks for certain birth defects and to promote health across the lifespan, the NCFA has made a variety of educational materials available at no charge. The resources available on the NCFA Web site at www.folicacidinfo.org/campaign/ include:

- **Toolkit with:**
 - Suggested activities
 - Outreach activities
- **Publications including:**

- English and Spanish brochures, bookmarks, and stickers (new this year).

Remember that folic acid:

- Helps reduce the risk of birth defects known as neural tube defects, including spina bifida and anencephaly;
- May help reduce the risk for other birth defects such as heart defects, cleft lip, cleft palate, and limb defects;
- May help reduce the risk of cardiovascular disease, some cancers, and cognitive disorders such as Alzheimer's disease, dementia, and depression; and
- Promotes health across the lifespan.

With the wide assortment of educational and promotional resources provided by NCFA, Florida Department of Health, and March of Dimes (MOD), National Folic Acid Awareness Week offers a great opportunity to promote the health benefits of folic acid in your community.

Here are some ideas you can implement:

1) Plan an information table. Offer educational materials and promotional items like magnets. Decorate with folic acid posters. Many of these items are available in English and Spanish at no charge or a minimal charge from the following organizations:

- National Council on Folic Acid Web site www.folicacidinfo.org/campaign/ (materials available at no charge).

- Centers for Disease Control and Prevention (CDC) Web site <http://www2.cdc.gov/ncbddd/faorder/orderform.htm> (materials available at no charge).

- March of Dimes local chapter office or visit the MOD Web site <http://www.marchofdimes.com/> (may be a charge for some items).

- Florida Department of Health Web site for educational materials <http://www.doh.state.fl.us/environment/newsroom/brochures/index.html> (materials available at no charge).

2) Display ways to meet the daily requirement of 400 micrograms of folic acid by exhibiting bottles of multivitamins with folic acid and enriched grain and cereal products. This amount of folic acid should be consumed in addition to a healthy diet that includes folate-rich food sources such as orange juice, dark green leafy vegetables, dried beans, strawberries, and peanuts.

3) Plan a "Folic Acid Breakfast" for staff by offering enriched grain products like bagels, English muffins or cereal. Include foods high in natural folate like orange juice and strawberries. For a small office or clinic, plan the breakfast as a "potluck" focusing on the folate content of the food items served. Display a bottle of multivitamins.

Research Update

Contributed by Cristin Cuozzo, BS, Graduate Student and Gail Rampersaud, MS, RD, LDN, Assistant in Nutrition Research and Education, FSHN/University of Florida

The following summaries offer the results of recent research studies or nutrition and health policies regarding recommendations on folic acid.

A study was conducted to assess the independent effect of regular periconceptional multivitamin use on the risk of preeclampsia. Study subjects included 1,835 pregnant women aged 14 to 44 years enrolled in the Pregnancy Exposures and Preeclampsia Prevention Study (Pittsburgh, Pennsylvania, 1997-2001). Women were classified as multivitamin users or nonusers. About 47% of women reported regular periconceptional multivitamin use. After adjusting for race/ethnicity, marital status, parity, pre-pregnancy physical activity, and income, regular use of multivitamins was associated with a 45% reduction in preeclampsia risk compared with nonuse. Prepregnancy overweight affected this result. Lean multivitamin users had a 71% reduction in preeclampsia risk compared with lean nonusers, but there was no significant relationship between multivitamin use and preeclampsia among overweight women. These results suggest that regular use of a multivitamin supplement during the periconceptional period may help reduce the risk of preeclampsia, especially in lean women. [Bodnar LM, et al. *Periconceptional multivitamin use reduces the risk of preeclampsia. American Journal of Epidemiology.* 2006;164:470-477.]

A retrospective cohort study was conducted to assess the survival rate of infants with neural tube defects (NTDs) (spina bifida and encephalocele) in the presence of folic acid fortification. Study participants included 2,841 infants with spina bifida and 638 infants with encephalocele who were born between 1995 and 2001. Forty-one cases of concurrent spina bifida and encephalocele were included in the cohorts. For both the spina bifida and encephalocele cohorts, survival rates were estimated with Kaplan-Meier estimation across the 3 folic acid fortification periods (prefortification, optional fortification, and mandatory fortification). Estimated first year survival rates for infants with spina bifida were 90.3%, 90.5%, and 92.1%, respectively, and survival rates for infants with encephalocele were 75.7%, 79.5%, and 79.1%, respectively for the three periods. For infants with spina bifida, being born during the period of mandatory folic acid fortification was associated with a 32% reduction in hazard, whereas the optional fortification period of birth was not associated with increased survival rate. Results for encephalocele revealed that birth in neither the optional nor the mandatory folic acid fortification period was associated significantly with increased survival rate. It was concluded that folic acid may play a role in reducing the severity of some NTDs, in addition to its role in preventing the occurrence of NTDs. [Bol KA, et al. *Survival of infants with neural tube defects in the*

presence of folic acid fortification. Pediatrics. 2006;117(3):803-813.]

A systematic review and meta-analysis were conducted to evaluate the protective effect of folic acid-fortified multivitamin supplements on congenital abnormalities. Forty-one studies were included in the analysis. Results showed that use of multivitamin supplements reduced the odds of NTDs by 33-48%, cardiovascular defects by 22-39%, and limb defects by 43-52%. Case control studies, but not cohort or randomized controlled trials, report a significant reduced odds of 24% for cleft palate, 37% for cleft lip with or without cleft palate, 52% for urinary tract anomalies and 63% for congenital hydrocephalus. No effects were shown for Down syndrome, pyloric stenosis, undescended testis, or hypospadias. Results suggest that folic acid containing multivitamins may reduce the risk for congenital abnormalities other than NTDs. [Goh YI, et al. *Prenatal multivitamin supplementation and rates of congenital anomalies: A meta-analysis. J Obstet Gynaecol Can.* 2006;28(8):680-689.]

Research has documented that Hispanic women in the U.S. have lower levels of knowledge and awareness about folic acid than do non-Hispanic women. A study was conducted to compare the effectiveness of paid and unpaid media to increase folic acid awareness, knowledge, and consumption

among Hispanic women. A CDC-developed public service announcement (PSA) campaign conducted in 2000 was compared between high and low exposure markets, and a paid media campaign in Miami and San Antonio in 2002 was compared against markets without the campaign. Minimal and non-significant differences in knowledge and folic acid use were found between the higher and lower PSA exposure markets. For the paid media campaign, women in the intervention markets had significantly higher rates of general (71% vs. 54%) and specific (26% vs. 14%) awareness about folic acid than women in the comparison markets. Folic acid use increased in the paid media intervention market, although not significantly. Results indicate that paid media efforts led to significant increases in folic acid general awareness and specific knowledge. The study also suggests that although many women have heard of folic acid, significantly fewer know about its importance for women of childbearing age. Efforts to close this knowledge gap should continue. [Flores AL, et al. *Broadcasting behavior change: a comparison of the effectiveness of paid and unpaid media to increase folic acid awareness, knowledge, and consumption among Hispanic women of childbearing age. Health Promotion Practice.* 2006; epub ahead of print.]

Fifty percent (50%) of all pregnancies and 80%-95% of teen pregnancies in the U.S. are unplanned!

Study Shows Fewer Women of Childbearing Age Take Supplements

Contributed by Cristin Cuozzo, BS, Graduate Student, FFAC, FSHN/University of Florida

In November 2006, Tanya G.K. Bentley and colleagues published a study in the *American Journal of Public Health* on changes in folate intake by age, gender, and race/ethnicity after folic acid fortification. Some of the results uncovered by the study are very surprising and unexpected, and may help health care professionals better target their interventions to promote use of supplements among women of childbearing age.

The study was conducted to determine the impact of the 1998 US Food and Drug Administration (FDA) folic acid fortification policy by estimating folate intake. Total folate intake levels were analyzed according to gender, age, and race/ethnicity, using data from the National Health

and Nutrition Examination Surveys (NHANES). The study used data from NHANES III (1988-1994) to represent prefortification folate intake levels and the 1999-2000 data release of the current NHANES for postfortification data.

Results showed that mean daily food and total folate intake increased by approximately 100 µg/day after fortification for all women of reproductive age. The proportion of women aged 15-44 years who consume more than 400 µg/day of folate has increased to between 26% and 38% since fortification, but **has not reached the FDA's 50% target** for any racial/ethnic group.

Increases in mean folate intake were larger for Whites than for Blacks and Mexican

Americans. Median intake for all Whites increased by more than 100 µg/day after fortification. Among Blacks and Mexican Americans, the median intake among persons aged 65 years or older either increased by less than 100 µg/day (Black men and women), or decreased (Mexican American men and women) following fortification. More Whites took supplements containing folic acid than did Blacks and Mexican Americans, more people older than 44 years took supplements than did younger people, and **more than half of the subgroups showed postfortification decreases in the proportion of people taking supplements.**

The most surprising and unexpected result from this analysis was that **for all women of childbearing age,**

fewer people are now taking supplements containing folic acid than were taking them prior to fortification.

The researchers concluded that targeted interventions to promote use of supplements among women of childbearing age may be needed to increase intake, move closer to the FDA's goal, and reduce the risk of birth defects including neural tube defects. The information presented in this article should give health care professionals the impetus to assess the reasons why supplement intake has declined and to develop programs that encourage intake among patients, especially women of childbearing age. It is our responsibility to ensure that everyone receives this important message!

[Bentley TGK, et al. Population-level changes in folate intake by age, gender, and race/ethnicity after folic acid fortification. *American Journal of Public Health*. 2006; 96(11):1-8.]

Around the State

Compiled by Cristin Cuozzo, BS, Graduate Student, FFAC, FSHN/University of Florida

Broward County

On October 9, 2006, VitaGrant provided training to the staff at Kids in Distress in Fort Lauderdale. Sample materials were distributed to staff.

VitaGrant attended *The First Wealth is Health* health fair at the Dorothy M. Wallace COPE Center on October 27, 2006. All of the girls at the school were teenagers who are currently pregnant or who have recently given birth. The group was very receptive and 100 bottles of multivitamins were given out to the non-pregnant girls.

Dixie County

VitaGrant attended a community event called *Down Home Days* on November 11, 2006. More than 200 multivitamin starter kits were distributed to the community by the Dixie County Health Department.

Duval County

On August 31, 2006, VitaGrant participated in the Edward Waters College Health Fair in Jacksonville.

Marion County

On October 25, 2006, a folic acid presentation was given to 24 female inmates at the Marion County Jail by the March of Dimes and VitaGrant.

Miami-Dade County

VitaGrant attended a health fair at Florida Memorial University in Miami Gardens on September 28, 2006, and about 100 bottles of multivitamins were distributed to college-aged minority women.

Orange County

The *Fourth Annual Caribbean Health Fair* was held on September 30, 2006. There were over 1,000 participants, many of Hispanic or Haitian Creole descent. VitaGrant distributed over 150 bottles of multivitamins and countless numbers of folic acid educational materials to women of childbearing age. The event

was a great success!

On October 14, 2006, VitaGrant participated in *Save our Babies* and distributed 100 multivitamin starter kits.

Pinellas County

On October 4, 2006, VitaGrant gave a presentation at a student meeting at the University of South Florida. The presentation was entitled, "Hey Ladies! Why you need a multivitamin!" Fifty-four female college students attended.

[Submitted by SaraMarie Sargent and Kendall Sanders, VitaGrant Outreach Coordinators]

Up to 70% of neural tube defects could be prevented if all women of childbearing age took folic acid.

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Florida Folic Acid Coalition

Mission:

to decrease the incidence of folic acid preventable birth defects and to reduce chronic disease risk in Floridians.

Vision:

as a result of the Coalition's efforts, this simple primary prevention strategy will result in fewer pregnancies affected by folic acid preventable birth defects. More Floridians will experience the indirect health benefits of taking a daily multivitamin to enhance health throughout their lifespan.

VISIT US ON THE WEB!
WWW.FOLICACIDNOW.NET

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Current & Upcoming Events

Folic Acid Events in Florida

January 8 - 14, 2007: National Folic Acid Awareness Week

Sponsored by the March of Dimes and National Alliance for Hispanic Health. Visit www.FolicAcidInfo.org for more information. Folic Acid Awareness Week is promoted in Florida by the FFAC and its partners. Visit www.FolicAcidNow.net for information on folic acid and additional resources.

January 1 - 31, 2007: National Birth Defects Prevention Month, March of Dimes

Visit the National Birth Defects Prevention Network to download contents from the 2007 Birth Defects Prevention Month packet. Visit <http://www.nbdpn.org/current/resources/bdpm2007.html>.



SaraMarie Sargent of VitaGrant distributes multivitamins at *The Fourth Annual Caribbean Health Fair* in Orange County.



VitaGrant multivitamin recipients.