

Written evidence submitted by Professor Keith M Godfrey, Professor Judith Stephenson, Dr Danielle Schoenaker, Professor Nisreen Alwan, Dr Jennifer Hall and Professor Mary Barker on behalf of the UK Preconception Partnership (PHS0096)

In response to this call, we provide evidence and recommendations on **improving preconception health to prevent ill-health and reduce disparities across generations**.¹

1. Why this should be part of a Prevention inquiry

Prevention of health-related risk factors – with a focus on the preconception life-stage, supporting preparation for pregnancy and parenthood - is an important and currently neglected prevention opportunity. The time before pregnancy represents a special window to break the transgenerational transmission of behavioural and physiological risks such as physical inactivity, obesity and smoking that underlie ill-health. Supporting and enabling all potential parents to optimise their preconception health will contribute to prevention of ill-health and reduction of inequalities in:

- Maternal and infant mortality and morbidity
- Non-communicable diseases in parents and their children
- Overall ill-health and life chances of at least two generations

Government policies with clear actions to effectively improve population-level preconception health and care are, however, lacking.

2. Why it deserves attention now

The UK Preconception Partnership² has worked with the Government Office for Health Improvement and Disparities (OHID) to produce the first baseline national-level report card on women's preconception health.³ This identified numerous opportunities to improve and reduce inequalities in preconception health in England. Indicators – in the overall population and among socio-demographic subgroups – will be monitored annually from 2023 using a new 'Preconception Health profile' through the Government's public health surveillance dashboard (Fingertips⁴). Accountability and action are needed now to start tracking improvements and reducing inequalities in preconception health across the UK.

3. Why it would benefit from scrutiny

3.1 The Government's Women's Health Strategy for England⁵ recognised the need to address preconception health through its ambition that "women and their partners are supported to optimise their health and wellbeing prior to conception to improve pregnancy outcomes and to give their child the best start in life". This 10-year ambition is however not supported by adequate policies and specific actions on how it will be implemented and evaluated. The strategy also focuses on health care and misses an opportunity to address preconception health through public health strategies. Our report card and other activities are examples of such strategies.

¹ This response can be cited as: Godfrey KM et al., Improving preconception health to prevent ill-health and reduce disparities across generations - A response to the Health and Social Care Committee's Prevention Inquiry (2023). DOI: 10.5258/SOTON/PP0031, published under Creative Commons Attribution 4.0 International licence.

² <https://www.ukpreconceptionpartnership.co.uk/>

³ <https://www.gov.uk/government/publications/report-card-indicators-of-womens-preconception-health>

⁴ <https://fingertips.phe.org.uk/>

⁵ <https://www.gov.uk/government/publications/womens-health-strategy-for-england>

3.2 The Government has agreed to implement mandatory folic acid fortification⁶ as a long-awaited exemplary public health measure to prevent neural tube defects. The proposed level of fortification is too low and restricted to non-wholemeal wheat flour, however; it will prevent only 20% of neural tube defects, instead of 80% with appropriate fortification for all flour and rice as in nearly 90 other countries.

4. Why Government action is needed

Through preconception health and care there is enormous scope to prevent lifelong ill-health and break the transgenerational transmission of health disparities. Nine in 10 women enter pregnancy with at least one potentially modifiable risk factor for adverse pregnancy outcomes that impact both mother and child.^{7,8} Multiple preconception risk factors are particularly common among women from more disadvantaged socio-demographic backgrounds.

For example, national data from England indicate women from Black ethnic backgrounds are 1.5 times more likely to enter pregnancy with obesity compared with white women (34% vs 23%). Women living in the most deprived areas are nearly 2-times more likely to have a pre-existing mental health condition compared with women in the least deprived areas (11% vs 6%) and 3-times more likely to smoke around the time of conception (30% vs 10%).

Addressing these risk factors after women enter maternity care is 'too little too late'.

5. How Government policy in this area could be improved

Government should:

- Ensure that preconception health and care is embedded in every relevant policy, such as promoting mental health and prevention policies addressing obesity and weight management, alcohol and smoking
- Implement fully effective and safe folic acid fortification, adopting a starting level of 1mg folic acid per 100mg for all flour and rice
- Address the broader social and economic determinants of preconception health, for example ensuring that all potential parents have access to education, a secure food supply, safe and affordable housing, and environments to be physically active
- Adapt school curricula to teach adolescents about the significance of health and health behaviours in preparing for later parenthood
- Support standardisation and quality improvement of routinely collected data to improve comprehensive national surveillance of preconception health
- Develop a plan for surveillance data to inform implementation and evaluation of the Women's Health Strategy's ambition to support pregnancy preparation and improve preconception health.

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⁶ <https://www.gov.uk/government/news/folic-acid-added-to-flour-to-prevent-spinal-conditions-in-babies>

⁷ <https://www.gov.uk/government/publications/report-card-indicators-of-womens-preconception-health>

⁸ Schoenaker DA, et al. Women's Preconception Health in England: A Report Card Based on National Maternity Services Data 2018/19. https://papers.ssrn.com/sol3/papers.cfm?abstract_id=4163702