



IRON AND FOLIC ACID SUPPLEMENTATION (IFAS)

Dialogue guide for health care providers.

IFAS Iron & Folic Acid Supplements
Huimarisha afya ya mama na
ujauzito wake.

**IRON AND FOLIC ACID
SUPPLEMENTATION:
Huimarisha afya yako na
ujauzito wako.**



**“Iron and Folic Acid
Supplements (IFAS)
keep you
and your unborn
baby healthy.”**

How to use the counselling guide.

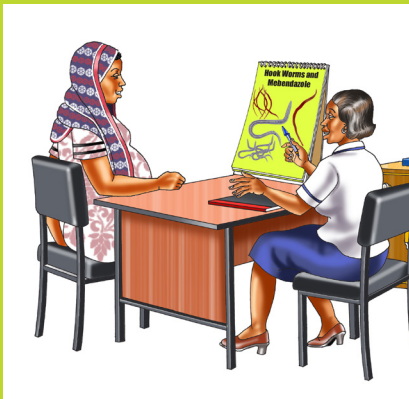
- This flip chart is designed to help healthcare providers communicate effectively on Iron and Folic Acid supplementation to the pregnant mothers
- The counselling cards can be used both for individual or group counselling
- You can select the appropriate card to use in a given counselling session. All cards may not be necessary for each client session
- The side of the card with illustrations or pictures is intended to be viewed by clients, while the other side with text is to be viewed by the health worker
- Individual counselling of mothers on Iron and Folic Acid Supplementation is very critical for improving compliance
- Maintain eye contact with the client during counselling
- Build on what the client knows
- Use the key messages in the cards to reinforce or correct the clients responses as needed
- Review with the client the key points discussed to ensure the client has understood the messages correctly
- Counselling will vary depending on whether it is the client's first visit or return visit. The algorithm will guide you on the counselling issues that will apply for either (refer to the algorithm chart)

Purpose of Iron and Folic Acid Supplementation during pregnancy

To reduce maternal anaemia, low birth weight and neural tube defects in pregnancy and improve overall pregnancy outcomes.

**During pregnancy you need to eat more food,
a balanced and varied diet.**





Nutrition demands during pregnancy

Key message: During pregnancy you need to eat more food, a balanced and varied diet.

Probing questions for health worker

- Ask the client to describe what they see in the picture
- Build on the client response and explain that during pregnancy all women need more food, a balanced and varied diet, and micronutrient supplements
- Ask for examples of the food combinations that the mother takes. Build on the response and explain by giving examples of the locally available and affordable foods that can enrich their diet
- Reinforce the key actions for the mother to take as explained in the key actions

Key actions

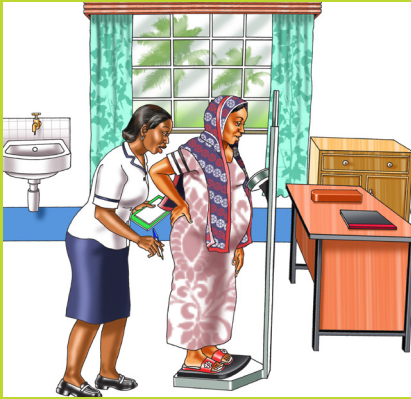
- Eat at least 3 main meals a day that consist of a balanced diet and include small meals or healthy snacks every 4 hours during the day to provide energy and nutrition for you and your growing baby
- Eat a diversified diet, to ensure variety in the food choices using the locally available foods and take plenty of fluids and water
- Increase your daily consumption of bright coloured fruits and dark green leafy vegetables to improve your intake of micronutrients
- Increase your intake of animal products like meat, milk, eggs as they are excellent sources of proteins, fats and micronutrients
- Consume iodized salt because you require sufficient iodine for brain development of the child in the womb
- Encourage daily consumption of fruits, vegetables, legumes, and whole grain cereals to promote healthy weight gain. A mother should gain at least one kilogram per month in the 2nd and 3rd trimesters of pregnancy
- Reducing your workload and rest more during pregnancy to conserve energy

Follow up question for client :

Ask the client if she has any questions related to increased nutritional demands in pregnancy.

Malnutrition during pregnancy endangers the health and life of the mother and child





Consequences of malnutrition during pregnancy

Key message: Malnutrition during pregnancy endangers the health and life of the mother and child

Probing questions for health worker

- Ask the client to describe what they see in the picture
- Build on the client response and explain how maternal malnutrition leads to increased risk of maternal complications and death
- Explain the consequences of maternal malnutrition for both the mother and infant

Consequences of malnutrition during pregnancy

- Increased infection
- Anaemia
- Lethargy and weakness, lower productivity

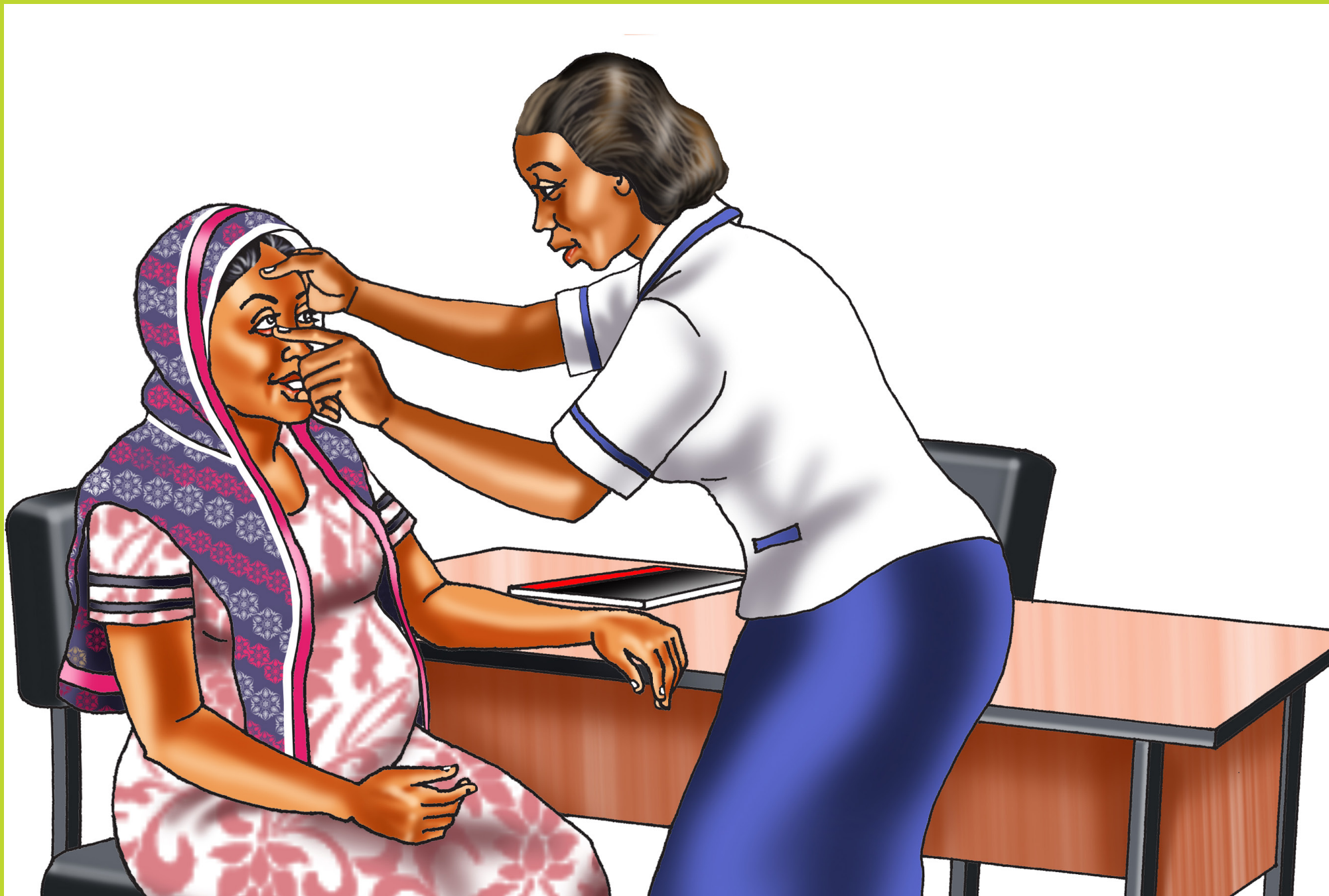
Consequences of malnutrition for fetal and infant health

- Increased risk of infection
- Intrauterine growth retardation, low birth weight, prematurity
- Birth defects that maybe as a result of severe physical stunting and mental growth
- Increased risk of fetal, neonatal, and infant death

Follow up question for client

Ask the client if she has any questions on the consequences of maternal malnutrition.

Anaemia can lead to increased maternal and neonatal deaths





Causes, symptoms and effects of anaemia during pregnancy

Key message: Anaemia can lead to increased maternal and neonatal deaths

Probing questions for health worker

- Ask the client to describe what they see in the picture
- Build on the client response and explain that anaemia in pregnancy is severe, it can lead to low birth weight which is a primary cause of neonatal deaths and still births
- Explain the common causes, symptoms and effects of anaemia as elaborated below

Causes, symptoms and effects of anaemia

a) The common causes of anaemia may include;

- Inadequate intake of iron-rich foods eg. Red meat, Liver
- Infections e.g. malaria, hookworm infestation, HIV, diarrhoea and other infections

b) The common symptoms of anaemia include;

- Weakness, Shortness of breath, dizziness, headaches, fatigue, paleness of eyelids, palms

c) The effects of anaemia include;

- Low birth weight which is a primary cause of neonatal deaths and still births, increased complications during delivery and maternal deaths

Follow up question for client

- Ask the client if she has any questions related to causes, symptoms and effects of anaemia
- Ask if she has experienced any of the symptoms
- Clarify that it is important to go for ANC every month for regular check up, including hemoglobin testing

IFAS supplements ensure a healthy pregnancy and healthy baby





Benefits of combined Iron and Folic Acid Supplementation (IFAS)

Key message: IFAS supplements ensure a healthy pregnancy and healthy baby

Probing questions for health worker

- Ask the client to describe what they see in the picture
- If it is her first visit ask if she has ever taken IFAS
- If it is a return visit ask if she is currently taking the combined IFAS
- Build on the client response and explain that iron and folic acid requirements during pregnancy are difficult to meet with most diets; therefore she needs IFAS regardless of her hb status. This is because the body consumes more than usual during pregnancy and the growing foetus draws on maternal iron stores

Follow up question for client

**Ask if she has any questions on the benefits of combined IFAS.
Use the next card to discuss the dose and frequency to be taken.**

Benefits of combined IFAS

- Less tablets are consumed compared to the separate iron and folic acid
- It improves compliance compared to the separate tablets
- In some cases the tablets are sugar coated and therefore taste better

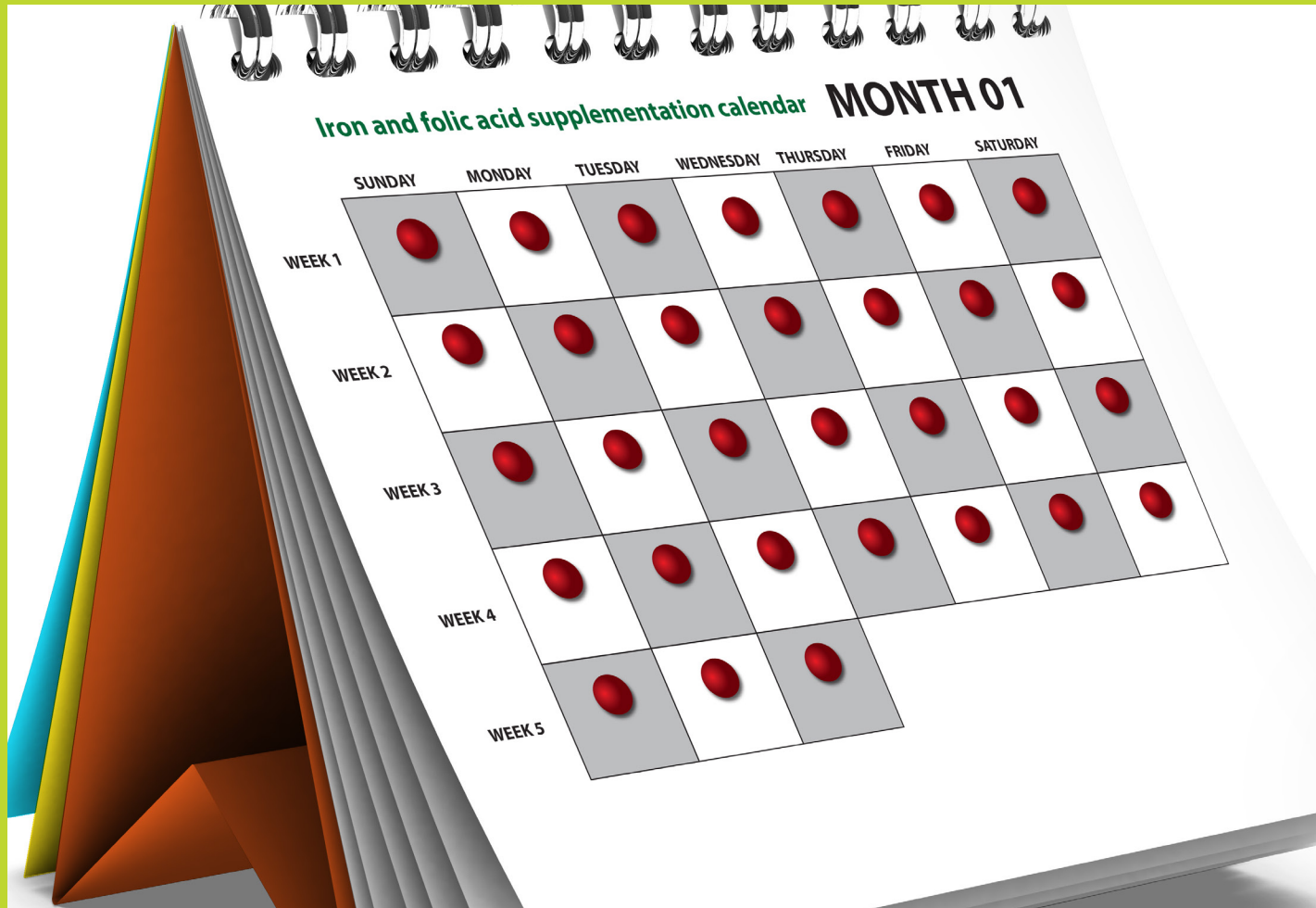
Benefits of iron

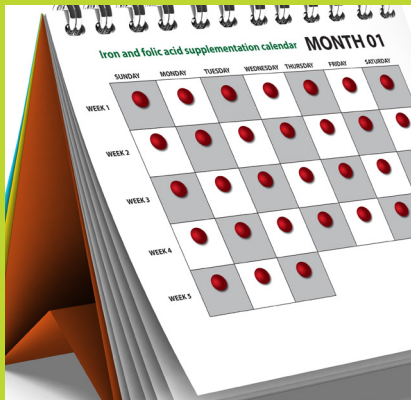
- Reducing anaemia,
- Reduces risks of low birth weight,
- Sustains strength during pregnancy and
- Ensures enough blood stores in the body during and after delivery

Benefits of Folic acid

- Folic acid is beneficial in the period before getting pregnant and within 28 days after conception
- If taken before conception it helps to reduce the incidence of neural tube defects
- It helps in absorption of iron
- It reduces folic acid anaemia

Combined IFAS is taken daily and correctly for the whole duration of pregnancy starting as early as possible in pregnancy.





Dose, frequency and duration of IFA supplementation

Key message: Combined IFAS is taken daily and correctly for the whole duration of pregnancy starting as early as possible in pregnancy.

Probing questions for health worker

- Ask the client to describe what they see in the picture
- If this is her first visit provide all the information in this card
- If this is her return visit, ask about how she has been taking the IFAS
- Build on the client response and explain that Combined IFAS is a single tablet which contains both 60mg Iron (ferrous fumarate) and 400mg Folic Acid which is taken daily during pregnancy
- Explain that all pregnant women are given IFAS regardless of their hb levels
- Explain that it is important to take the complete dose daily during pregnancy to improve overall pregnancy outcomes as explained in the table below

Key action on dose and frequency of combined IFAS

Supplementation composition	60mg Iron (ferrous fumarate), this is equivalent to 200mg ferrous Sulphate 400 (0.4 mg) Folic Acid
Frequency	Only one combined IFAS tablet daily
Duration	From Conception to delivery
Target group	All pregnant women
Administration	It should be taken with meals

Follow up question for client

Ask if she has any questions on the dose and frequency. Use the next card to discuss the side effects and their management.

Take IFA supplements with meals to reduce chances of experiencing nausea.





Side effects of IFAS and their management

Key message: Take IFA supplements with meals to reduce chances of experiencing nausea.

Probing questions for health worker

- If it is her first visit, provide all the information on this card
- If it is a return visit, ask if she has ever experienced side effects and how she has managed them
- Build on the client response and explain that side effects may occur when taking IFAS
- Explain that side effects are not harmful and supplementations should continue. Explain the possible side effects and recommended action as given in the table below

Common side effects and their management

Possible side effects	Recommended action to be taken
Effects on gastrointestinal tract: Epigastria pain, nausea, diarrhoea or constipation	<ul style="list-style-type: none">• Avoid taking high dose Vitamin C supplements together with IFA tablet• Eat plenty of fruits and vegetables• Take IFAS with meals
Faeces may turn black due to unabsorbed iron	This is not harmful and IFA supplementation should continue

Follow up question for client

Ask if she has any questions on side effects. Use the next card to advice the client on food sources rich in iron and folic supplementation.

Eat daily consumption of fruits, vegetables, legumes, and whole grain cereals to promote healthy weight gain.





Food sources of iron and folic acid

Key message: Eat daily consumption of fruits, vegetables, legumes, whole grain cereals and meats to promote healthy weight gain.

Probing questions for health worker

- Ask the client to describe what they see in the picture
- Build on the client response and explain that having daily consumption of fruits, vegetables, legumes, and whole grain cereals will promote healthy weight gain and prevent anaemia
- Identify and discuss with the client foods rich in iron that are accessible, affordable and seasonally available to the client

Key actions

- Take foods rich in iron and folic acid as shown in the table below
- Avoid taking tea or coffee with meals as it inhibits iron absorption and it can interfere with the body's use of the foods
- Take vitamin C rich fruits and vegetables such as tomato, guava, mango, pineapple, orange and other citrus fruits because they promote absorption of iron

	Good sources	Moderate sources
Iron	Red meat, liver, fish, poultry	Legumes, peanuts, cereals and dried fruits, dark green leafy vegetables, plantains.
Folate	Liver, green leafy vegetables, fish, legumes, avocado, sunflower seeds, egg yolk.	Groundnuts, corn, green peas, oranges, grapefruit, pineapples, banana, sweet melon.

Follow up question for client

Ask if she has any questions on food sources. Use the next card to advice the client on malaria control to prevent anaemia.

Every pregnant woman should sleep under an insecticide-treated mosquito net every night





Malaria may cause anaemia during pregnancy

Key message: Every pregnant woman should sleep under an insecticide-treated mosquito net every night.

Probing questions for health worker

- Ask the client to describe what they see in the picture
- Build on the client response and explain that malaria prevention and control is important for prevention of anaemia in pregnancy
- Explain that there is a strong link between malaria in pregnancy and anaemia
- Explain that pregnant women especially in malaria endemic areas must receive IPT doses during pregnancy even if they have no physical signs and hb is normal
- Confirm in the mother- child booklet if she has received IPT and LLINs and take appropriate action

Key messages for pregnant women in malaria endemic areas

- At least two doses of intermittent preventive treatment (IPTp-SP) will be given to all women during pregnancy starting as early as possible in the second trimester
- All pregnant mothers need to sleep under an insecticide-treated mosquito net every night

Follow up question for client

Ask if she has any questions on malaria and advice the client to always seek early treatment. Use the next card to advice the client on deworming.

Chronic worm infestation may cause anaemia





Helminth Control for prevention of anaemia in pregnancy

Key message: Chronic worm infestation can make you malnourished, anaemic and vulnerable to disease.

Probing questions for health worker

- Ask the client to describe what they see in the picture
- If it is a return visit ask if she has been dewormed
- Build on the client response and explain that chronic worm infestation can make the pregnant mother malnourished, anaemic and vulnerable to disease
- Explain the key actions to take

Key actions

- You will receive 500mg of Mebendazole which is given once in the 2nd trimester to prevent hookworm infestation. De-wormers are provided free of charge at the health facility
- Chronic worm infestation can make you malnourished, anaemic and vulnerable to disease
- The infestation occurs mainly through physical contact with soil contaminated by human faeces. Ensure that you maintain good personal and environmental hygiene practices

Follow up question for client

Ask if she has any questions on deworming. Advise the client to always seek early treatment for infections.



As a pregnant mother, you have the responsibility to take action in ensuring your health and the health of the unborn baby.



What is your responsibility as a pregnant mother?

As a pregnant mother, you have the responsibility to take action in ensuring your health and the health of the unborn baby.

Probing questions

- Ask the client to explain the key actions she needs to take to achieve a healthy pregnancy
- Build on the client response and reinforce the key actions below

Key actions

- Visit the nearest ANC clinic as soon as you know you are pregnant
- Attend ANC clinic every month
- Take combined IFAS daily during pregnancy
- Consume a balanced diet with iron rich foods
- Consume a variety of locally available foods
- Take your intermittent preventive treatment IPTp –SP dose as recommended
- Sleep under a long lasting insecticide treated net every night
- Deworm regularly
- Join a mother to mother support group