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Weekly Iron and Folic Acid Supplementation (WIFS) Programme

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ABSTRACT:

The Weekly Iron and Folic Acid Supplementation (WIFS) programme is a public health initiative aimed at addressing iron deficiency anemia, especially among adolescents and women of reproductive age. This paper provides an overview of the programme's objectives, implementation strategies, target groups, and its impact on public health. Key challenges and recommendations for improving its effectiveness are also discussed.

Introduction:

Iron deficiency anemia (IDA) remains a significant global health challenge, affecting an estimated 1.6 billion people, with adolescents and women being the most vulnerable groups. The WIFS programme was initiated as a cost-effective intervention to combat this issue. This paper explores the framework and outcomes of the programme and its importance in achieving better health and development outcomes.

Objectives of the WIFS Programme:

1. **Reduce anemia prevalence:** Target populations include adolescent boys and girls, pregnant women, and women of reproductive age.
2. **Enhance awareness:** Promote the importance of micronutrient supplementation in combating anemia.
3. **Improve nutritional health:** Foster better dietary practices through complementary nutrition education.

Target Groups:

1. Adolescents aged 10–19 years in school and out-of-school settings.
2. Women of reproductive age (15–49 years).
3. Special focus on marginalized and underprivileged populations.

Programme Framework:

1. **Supplementation Schedule:**
 - Weekly distribution of Iron and Folic Acid (IFA) tablets containing 100 mg elemental iron and 0.5 mg folic acid.
 - Administration under supervision to ensure compliance.
2. **Deworming Measures:**
 - Biannual deworming to address helminth infections that exacerbate anemia.
3. **Nutrition Education:**
 - Dissemination of information about dietary iron sources, cooking methods to enhance bioavailability, and anemia prevention strategies.
4. **Implementation Channels:**
 - Schools, anganwadi centers, and community health workers.

Impact of WIFS:

1. **Reduction in Anemia Rates:** Studies have shown significant declines in anemia prevalence in programme-implementing regions.
2. **Improved Cognitive and Physical Development:** Regular supplementation boosts energy levels and concentration in adolescents.
3. **Enhanced Awareness:** WIFS fosters community-level understanding of anemia and its implications.

Challenges in Implementation:

1. **Compliance Issues:** Reluctance to consume IFA tablets due to side effects like nausea.
2. **Supply Chain Gaps:** Inconsistent availability of IFA tablets in some regions.
3. **Cultural Barriers:** Misconceptions and lack of awareness about the importance of supplementation.
4. **Monitoring and Evaluation:** Limited mechanisms to track progress and ensure adherence.

Recommendations for Improvement:

1. **Strengthen Supply Chains:** Ensure uninterrupted availability of high-quality IFA tablets.
2. **Community Engagement:** Conduct awareness campaigns to address myths and encourage participation.
3. **Innovative Delivery Mechanisms:** Leverage mobile technology for reminders and compliance tracking.
4. **Enhanced Monitoring Systems:** Use digital platforms to monitor programme outcomes in real time.

Conclusion:

The WIFS programme is a vital initiative in combating iron deficiency anemia, especially in resource-constrained settings. While its impact has been noteworthy, addressing the challenges in implementation can further enhance its effectiveness. A multi-sectoral approach involving education, health, and community participation is essential for the programme's long-term success.

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