GOVERNMENT OF INDIA MINISTRY OF HEALTH AND FAMILY WELFARE DEPARTMENT OF HEALTH AND FAMILY WELFARE

RAJYA SABHA ASMITTED UNSTARRED QUESTION NO. 775 TO BE ANSWERED ON 13.12.2022

WEEKLY IRON FOLIC ACID SUPPLEMENTATION

775. DR. PRASHANTA NANDA

Will the Minister of **HEALTH & FAMILY WELFARE** be pleased to state:

- (a) whether it is a fact that Government has introduced allopathic Weekly Iron and Folic Acid Supplementation (WIFS) in place of the Ayurvedic iron tablets under National Health Mission
- (b) If so, the reasons therefor;
- (c) whether any committee of Government has recommended to introduce allopathic medicines in place of Ayurvedic medicines; and
- (d) if so, the details thereof?

ANSWER THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (DR. BHARATI PRAVIN PAWAR)

(a) to (d): Ministry of Health and Family Welfare implements Weekly Iron and Folic Acid Supplementation (WIFS) programme to meet the challenge of the high prevalence and incidence of anaemia in adolescent girls and boys.

Under WIFS programme weekly supervised IFA tablets to the in-school adolescent boys and girls and out-of-school adolescent girls along with biannual albendazole tablets for helminthic control are provided for prevention of iron and folic acid deficiency anaemia. The programme is implemented across the country in both rural and urban areas, covering government, government aided, municipal schools and Anganwadi Centres. Screening of targeted adolescent population for moderate/ severe anaemia and referral of these cases to an appropriate health facility; information & counselling for prevention of nutritional anaemia are also included in the programme.

In 2018, the Government of India has launched the Anaemia Mukt Bharat (AMB) strategy under POSHAN Abhiyaan with the target for reducing anaemia in women, children and adolescents in life cycle approach. The strategy aims to cover children 6-59 months, children 5-9 years, adolescents 10-19 years, women of reproductive age (15-49 years), pregnant

women and lactating women through newer interventions implemented via robust institutional mechanisms. The details of the steps taken by the Government to address the problem of anaemia are:

- i. Prophylactic Iron and Folic Acid Supplementation in all six target age groups-
- ii. Intensified year-round Behaviour Change Communication (BCC) Campaign for: (a) improving compliance to Iron Folic Acid supplementation and deworming, (b) enhancing appropriate infant and young child feeding practices, (c) encouraging increase in intake of iron-rich food through diet diversity/quantity/frequency and/or fortified foods with focus on harnessing locally available resources, and (d) ensuring delayed cord clamping after delivery (by 3 minutes) in health facilities
- iii. Testing and treatment of anaemia, using digital methods and point of care treatment, with special focus on pregnant women and school-going adolescents
- iv. Addressing non-nutritional causes of anaemia in endemic pockets with special focus on malaria, hemoglobinopathies and fluorosis
- v. Providing incentives to the ANM for identification and follow-up of pregnant women with severe anaemia in high priority districts (HPDs)
- vi. Management of severe anaemia in pregnant women is done by administration of IV Iron Sucrose/Blood transfusion
- vii. Awareness by ASHAs through community mobilization activities and IEC and BCC activities.
- viii. Convergence and coordination with other line departments and ministries for strengthening implementation
- ix. National Centre of Excellence and Advanced Research on Anaemia Control (NCEAR-A) at AIIMS, Delhi in capacity building of health care providers
- x. Development of AMB Training Toolkit for capacity building of health care providers in anaemia management and AMB e-Training Modules are developed to facilitate training of the health care providers through virtual platform.
