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**Forging Effective Strategies to Combat Iron Deficiency**

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**Reaching Women of Child Bearing Age: Overcoming the Barriers**

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Iron supplementation programs have not proven to be an easy approach for combating iron deficiency anemia. One key obstacle is the low compliance of iron tablet consumption. Results from different studies showed that consumer knowledge about anemia is low, but when consumers are informed, the compliance rate for taking iron tablets increases. Unfortunately, part of the consumer ignorance is caused by health providers' limitations, including lack of knowledge about anemia and iron tablets and insufficient communication and counseling skills. Improving both knowledge and communication skills were effective in improving program content and counseling strategies. The IEC (information, education and communication) programs using multimedia have a positive effective on modifying consumer behavior in some cases but not so in others. Developing a good IEC strategy and design requires a certain level of knowledge and skill sets, which may not be fully available at different institutions in developing countries. Furthermore, in some countries, geographic location, variations in language, and population size can make IEC programs very expensive the cost of IEC program very high.

The second obstacle is the availability and accessibility of low-cost iron. Usually, iron tablets are provided by health facilities/providers, which means that those who not seeking health/medical services at these facilities will not have access to iron tablets. Furthermore, logistical problems (storage capacity, timely supplies) do not guarantee availability of iron tablets in these facilities. The logistic issues can be addressed by a clear and simple supply and distribution strategy. To ensure the availability and accessibility of low-cost iron tablets beyond government-sponsored health facilities, the government needs to collaborate with the pharmaceutical industry to assure production of low-cost iron tablets. Iron tables would then be available from the companies directly or through other private channels, including drug stores and traditional birth attendants.

Expansion of the target groups to include female workers, women to be married and school girls requires inter-programmatic and inter-sectoral commitments and coordination. Additionally, further work is needed to involve private companies in combating iron deficiency anemia among female workers.