

**Abstract of a major presentation at the
International Conference**

Forging Effective Strategies to Combat Iron Deficiency

**Atlanta, GA USA
7-9 May 2001**

**Organized and sponsored by:
ILSI Center for Health Promotion
Centers for Disease Control and Prevention
Emory University
Micronutrient Initiative**

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Policy and Sustainability Issues

Dr. Guy Nantel

Senior Officer, Food and Nutrition Division, Food and Agriculture Organization of the United Nations
Rome, Italy

Iron deficiency is the most widespread of micronutrient deficiencies, but in spite of long-term efforts devoted to its alleviation, the situation has not improved greatly. On the technical side of the problem, there is a good understanding of what needs to be done, but this does not mean that it is easy to implement, or that it is a simple matter. The three strategic approaches that are pursued and promoted worldwide are iron supplementation, fortification of staple foods with iron, and food-based approaches. Each of these has its advantages as well as major limitations.

Supplementation is particularly favoured for pregnancy, infants and young children, whereas food fortification is a powerful strategy to address the problem more broadly and in a public health context of prevention. Supplementation has undesirable side effects and compliance is problematic, while fortification, especially when seen in the context of developing countries, has significant costs attached in terms of supply and logistics. A food-based approach without the use of fortified foods is potentially the most accessible solution for developing countries, but to be successful, it needs to be supported by solid educational programmes and dietary diversification initiatives. Thus, these three technical approaches, because of their inherent limitations, need to be integrated in order to complement one another for effective programmes.

In a developing country context, however, the situation for implementation is quite complex. First, iron deficiency never really occurs on its own, and there are several micronutrient deficiencies present simultaneously. In turn, those deficiencies are brought about by food insecurity and a host of other conditions typically seen in poor populations, including parasitic infections and inadequate health, sanitation, access to drinking water, and so forth. Thus, many issues, many “sources,” of the problems need to be addressed simultaneously in order to be able to make a significant and lasting difference. Malnutrition, in a developing country context, may be better understood as an outcome of some basic and fundamental needs that have not been met. The implication is that multisectoral strategies are needed, and they must be tailored to the specificities of localities, and they need to address food security, health needs, sanitation, drinking water, care, education, etc. To imagine developing such a strategy appears almost impossible because of its complexity. A new way of approaching the problem is needed.

In looking at lessons learned, we have come to understand that the most successful interventions are those that are community-based and participatory. Looking at the need to contend with the complexity of our problem, it becomes plausible to consider addressing malnutrition by bringing communities, households, and individuals to a level of understanding of their problems such that they are able to devise solutions based on

their own priorities and with their resources, by developing self-reliance and capacity for self-help. The communities can then decide when and how to use the technical solutions for the alleviation of iron deficiency, within the context of all their other problems that lead to malnutrition. Thailand has been particularly successful in this respect and could constitute a key model.