

**SYMPOSIUM: IMPROVING ADOLESCENT IRON IDPA's
STATUS BEFORE CHILDBEARING - 742**

PRESENTATION AND PUBLICATION

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INTRODUCTION

During the Experimental Biology meetings, held in Washington, D.C. in April, 1999, Kathleen M. Kurz (International Center for Research on Women) and Rae Galloway (World Bank/Micronutrient Initiative) co-chaired a symposium entitled, "Improving Adolescent Iron Status before Childbearing." The symposium was sponsored by the American Society for Nutritional Sciences and was supported in part by an educational grant from Micronutrient Initiative. Research supported by the MotherCare Project/JSI was presented by five of the panelists, and their papers, collected here, were subsequently published as a supplement to *The Journal of Nutrition*.

The international health and nutrition community continues to struggle with the persistent failure of public health systems to address iron deficiency and the high prevalence of maternal anemia in many settings. Expanding the target population to include adolescent girls is one possible new approach. In countries with high levels of maternal mortality, it is common to find that girls are anemic well before they become pregnant. And delayed care-seeking during pregnancy means that the time for intervention is often too short to correct pre-existing anemia.

The symposium papers represent research into both biological and applied or operational questions. Looking at the functional impact of reducing anemia among adolescents, Kanani and Poojara ask whether there is an impact on physical growth? In S. Lynch's paper, questions raised include how long do the benefits of increased iron status last if supplementation or increased dietary iron intake cannot be sustained? Both Lynch and Zavaleta et al. look at the appropriate supplement dosage for the target population, and Creed-Kanashiro investigated the impact of increased dietary iron intake on overall iron status.

Operational questions addressed the types of service delivery channels that are feasible for reaching adolescents (Creed-Kanashiro, Zavaleta, and Kanani and Poojara). The study from Indonesia investigates an approach for reaching women in the year they are likely to conceive (Jus'at et al), as well as the issue of generating demand for dietary or supplemental iron (which must be purchased out of pocket).

K. Kurz and R. Galloway summarized the main findings of the papers (including the five bound here) presented at the symposium in their introduction to the supplement:

- Iron status early in pregnancy appears to have more profound effects on birth outcomes than women's status later in pregnancy, supporting the importance of intervention before childbearing begins.
- Iron supplementation appears to increase growth among adolescents.
- Adolescent girls can be reached with interventions through a number of channels. Examples include schools, community kitchens, and marriage registration systems.

- It is possible to increase the intake of dietary iron by adolescent girls.

Expanding the target population of iron deficiency and anemia prevention and control programs to include adolescent girls will be an important next step for programs addressing micronutrient deficiencies and other health issues for women. The clear biological rationale, together with optimistic results of operational research, indicate that intervening with adolescents has the potential to improve not only their own health and nutritional well-being, but also that of their future children.