Operational Guidelines for Weekly IFA Supplementation Programme for the Community Based Intervention

Guidelines for Anganwadi Workers Guidelines for ICDS Supervisor/CDPO Guidelines for District ICDS Officer

GUIDELINES FOR ANGANWADI WORKER

Goals:

To institute a community based Weekly IFA Supplementation (WIFS) programme forcontrol of anaemia among out-of-school adolescent girls in a given ICDS area.

Objectives:

- Ensure that all adolescent girls (including married girls) in age group 10-19 years are given a tablet of IFA once a week and six monthly dose of Albendazole (400mg) tablet for de-worming.
- **T**o inform adolescent girls of the correct dietary practices for increasing iron intake.
- To inform adolescents girls of the significance of preventing worm infestation and encourage adoption of correct hygiene practices, including use of footwear to prevent worm infestation.

Strategy:

- Administration of weekly iron-folic acid supplements (WIFS). (IFA tablet containing 100mg elemental iron and 500 microgram Folic acid) for 52 weeks in a year, on a fixed day preferably Monday.
- Screening of target groups for moderate/severe anaemia and referring these cases to an appropriate health facility for management of anaemia.
- Biannual Albendazole (400mg), six months apart, for control of worm infestation.
- Information and counseling for improving dietary intake and for taking actions for prevention of intestinal worm infestation.

GUIDELINES FOR AWW / ASHA /ANM

Distribution of IFA through ICDS platforms: Role of AWW / ASHA /ANM

- The platform of Kishori Samooh will be utilized for mobilizing adolescent girls in the districts implementing SABLA scheme. In other districts AWW with the help of ASHA will mobilize adolescent girls at the AWC on a fixed day (preferably a Monday) at a fixed time preferably after the noon meal.
- One IFA tablet will be provided to each girl by AWW and she will ensure direct consumption of IFA tablet by adolescent girls. AWW will advise the girls that IFA tablets are not taken on an empty stomach and to the extent possible ensure that the girls have eaten a meal prior to taking the IFA tablet.
- AWW will screen adolescent girls for presence of moderate/severe anaemia by examining the nail bed and tongue pallor.
- Adolescent girls with moderate/severe anaemia will be referred to a nearby health facility.
- In case a girl complains of uneasiness /any side effects, the AWW will refer her to the ANM.
- Each girl will be guided to maintain individual compliance cards by the AWW. The AWW will be trained on maintenance of the Individual Compliance Card.
- Two fixed months- August and February in year will be allocated for administering Albendazole to all adolescent girls on 'WIFS Day".
- 4 ANM will undertake quarterly Nutrition and Health Education session on "Anaemia in adolescent and benefits of IFA supplements" in convergence with SABLA /ICDS and

- will record date and attendance in monthly format. ANM will also receive copy of consolidated monthly report from AWW as per Annexure 7A.
- AWW, ICDS helper and ASHA will also be supplied IFA tablets for weekly consumption; these frontline workers will be encouraged to consume the supplement in the presence of the girls.
- AWW will encourage all adolescent girls to be tested for anaemia at appropriate health facility.

Estimation of IFA and Albendazole
Estimating IFA tablet Supply = (Number of adolescent girls registered with ICDS x 52 tablets) + (52 tablets/ year for each AWW + 52 tablets/ year for ASHA)
An additional 20% is to be added for ensuring adequate stock supply
Estimating De-worming tablet supply = (Number of adolescent girls registered with ICDS x 2 tablets of Albendazole) + 10% as buffer stock
Name and address of Anganwadi Centre:
Total Number of Adolescent Girls:
Total IFA tablets required :

Monitoring by AWWs

- ♣ The AWW will be responsible for maintenance of Individual Compliance Card/ Kishori Card. Annex 1
- 4 At the Anganwadi Center (AWC) level: the Anganwadi Worker (AWW) will compile the monthly data of IFA consumption by adolescent girls for their Anganwadi Center as per Annexure 7A and will forward it to Sector Supervisor. A copy of the monthly report will be shared with ANM. The monitoring report for the WIFS programme will be integrated with the ICDS monthly progress reports.
- ♣ AWW will maintain a supply-compliance register

Total Albendazole tablets required :.....

Guidelines for ICDS supervisor/CDPO

Key functions

- Consolidate requirements from ICDS projects for block supply and share with district level.
- ♣ Set up distribution system for AWC & ensure uninterrupted supply & storage of IFA and de-worming tablets to AWC.
- Consolidate monitoring data received from AWC and share with district on monthly basis.
- **♣** Conduct quarterly meeting to review the programme.
- Ensure display of IEC material in schools and AWC.

Monitoring:

The supervisor will compile the information from all the AWCs (received in Annexure 7A) in the monthly reporting (Annexure 7B) format and submit it to the CDPO.

Guidelines for District ICDS Officer

Key functions:

- Ensure uninterrupted supply of IFA and Albendazole tablets to the AWCs on an annual basis
- Stock request process: The supply request for the district will be submitted by the District ICDS Officer to the District Health Officer annually.
- The District Health Department will send the request to State HFW Department who will supply the IFA and Albendazole tablets as per the requirements of the districts. The District Health Officer will co-ordinate and forward annual supplies to District ICDS Officer.
- At the district level, the ICDS Department will be in-charge of forwarding the annual supply stock to the CDPO. CDPO will help ensure uninterrupted supply of IFA and Albendazole tablets to AWC.

Monitoring:

District ICDS Officer will be responsible for monitoring the programme and compiling the monthly data using the district level reporting formats which will then be shared with District RCH/Health Officer (Annexure 5). The District ICDS will forward the report of their districts to District RCH /Health Officer with a copy to the State Director ICDS, Department of Women and Child Development.

District WIFS Advisory Committee

At the district level, the **District WIFS Advisory Committee** will be formed with participation from Health, Education and Women and Child Development Departments. The function of the committee will be to monitor the progress of the programme and resolve programmatic issues. The Committee would need to meet every quarter with the participation of Health, Women and Child Development and Education block officials. Yearly meeting with nodal teachers could be organized to further streamline the implementation of project. Committee would monitor the following:

- Status of implementation of the programme and timeliness of the submission of monthly reports
- Facilitate convergence and ensure use of community based platform like VHNDs for community mobilization and awareness
- Training
- Timely and adequate supply and distribution of IFA and Albendazole tablets
- ♣ Provision and use of IEC and use of counseling materials

NOTE: The state must ensure that the Emergency response system is activated during the time that dewormingtablets are being given

Annexure -I Individual Compliance Card

me					Village	/ City			Sch	ool		A	ge	Date of	starting
	Deworming							Weekly Iron Folic Acid Tablets							
ass /	Date of 1st Dose	Date of 2nd dose	Jan	Feb		Mar	April	May	June	July	August	Sept	Oct	Nov.	Dec
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			1 5 2	1	2	1 2 3 4	1 5 2	1 (3) (2) (3) (4)	1 5 2	1 2 3	1 2 3 4	1 5 2	1 5 2	1 2 3 4	1 5

Annex 7A; 7B and Annex 5 will be added here