

By 2025, achieve a 50% reduction in the rate of anaemia in women of reproductive age

WHY IT MATTERS



Address nutritional and non-

nutritional causes of anaemia and their determinants

RECOMMENDED ACTIONS



Anaemia increases the risk of adverse maternal

neonatal outcomes



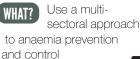
WHAT?

Include interventions with an effect on anaemia in national health, education, agriculture and development plans



causes fatigue and lethargy, and impairs physical capacity and work performance

MULTI-SECTORAL APPROACH





Ensure that development policies

and programmes beyond the health sector include nutrition and other major causes of anaemia relevant to the country context



Impairs the health

and quality of life for millions of women,

and the development and learning of their children





Provide hospital and health facilities-based capacity for anaemia prevention and treatment



HOW?

Support antenatal iron and folic acid supplementation (daily or intermittent) as part of routine antenatal care



Anaemia reduction can help drive progress against the other global nutrition targets

- stunting
- breastfeeding
- wasting
- low birth weight
- childhood overweight

COMMUNITY SUPPORT

WHAT?

Raise awareness of the value of iron supplementation in women of reproductive age



Support community mobilization and social marketing strategies



SCOPE OF THE PROBLEM

of non-pregnant

Anaemia affects half a billion women of reproductive age worldwide



of pregnant women aged 15-49 years were anaemic





