UNICEF’s Guidance for Maternal Anemia in the West and Central Africa

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Anaemia Action Alliance Webinar
“Evidence to practice – aligning anaemia reduction efforts in Africa”
Where are we with anemia reduction in WCAR?

Maternal anemia: **Off-track** to achieve WHA target
(reducing by half the number of NPW affected by anemia by 2025)

+ 20% from 45 million in 2012 to 54 million in 2019

- To reverse this trend...
  - **Understanding limited Progress:** Reasons for stagnation need to be explored.
  - **Contextual Factors:** Etiological factors of anemia vary by context.
  - **Assessing Program Coverage:** Evaluate intervention coverage aligned with contextual drivers.
  - **Program Review:** Utilize insights to improve program design and delivery.
The situation of anemia among women in WCAR

Anemia is highly prevalent in the region

Disparities start to appear when degrees of anemia is mapped

*applying the previous hemoglobin cutoff point
The situation: Prevalence vs Caseload

**Ghana Example**

- This analysis is essential to inform the **decision to focus on areas** of high prevalence or caseloads.
- As WHA target is on the numbers, paying attention to **caseloads** is needed.
### Etiological factors and drivers of anemia

#### Summary of evidence of factors contributing to anemia among WRA in West Africa

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<tr>
<th>Micronutrient deficiencies</th>
<th>Nutritional deficiencies</th>
<th>Infections</th>
<th>Hemoglobinopathies</th>
<th>Contaminants</th>
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<td>Hemoglobin genetic disorders</td>
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<td>Hemoglobinopathies</td>
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<td>Sickle cell disease</td>
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<td>Exposure to contaminants</td>
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#### Population observed

- **PW** – pregnant women
- **NPW** – non pregnant women

There are major evidence gaps on the full scope of context specific anemia etiological factors.
Who should be targeted for anemia service delivery?

Hemoglobin concentration (g/dl) distribution by pregnancy status

Highest anemia burden population group:
- Non-pregnant adult women > adolescent girls > pregnant women

Non-pregnant women should be the primary target, followed by adolescents.

We require...
- Package of context specific interventions beyond IFA supplementation
- Leverage other platforms than just health system
Are we converging on the hotspot of anemia? (1/2)

1 Where we see anemia

b) Moderate and severe anemia

2 Where interventions are on-going

Composite coverage score
Are we converting on the hotspot of anemia? (2/2)

Leveraging multi-system approaches to address maternal anemia

Integrate analysis of Anemia and related services in Burkina Faso

Food system

Health system

WASH system

Environmental system

ANC 4+  IFA (90+) coverage  % sleeping under insecticide treated bednets

Improved water coverage  Improved toilet coverage

⚠️ reveals missed opportunities to achieve optimal coverage of anemia prevention and control interventions
**Guidance for maternal anemia in WCAR**

**Available online:**
Regional operational guide on maternal anemia | UNICEF West and Central Africa

**Actions to accelerate the attainment of global goals on anemia**

**Prioritization:** Options to enhance geographical targeting of programme delivery and national targeting of high-risk populations in the context of resource constraints.

**Evidence Generation:** Additional evidence is required to characterize etiological factors, informing context-specific program design, implementation, and monitoring.

**Potential of Key Systems:** Existing opportunities (food, health, wash and environmental system) should be leveraged to enhance accountability for nutrition and increase program coverage.

**Target Expansion:** The anemia control and prevention program needs to expand beyond targeting pregnant women to include and reach non-pregnant women through a systematic approach.
Thank you!