

## Problem Analysis for Iron Deficiency Anemia (IDA)

### Target Indicator: Young children in Sonoma County have high rates of Iron Deficiency Anemia

Consequences: brain damage, poor growth, delayed psychomotor development, poor immune system, behavior problems, reduced attention span, decreased physical strength, coordination and endurance, increased susceptibility to lead poisoning

#### Individual Factors Associated with IDA

##### **Low preconception iron stores**

- Closely spaced pregnancies
- Multiparous women
- Obesity contributes
- Teens
- Women with heavy periods, IUDs

##### **Untreated IDA in pregnancy**

##### **Early cord clamping** (w/in 10-15 seconds of delivery)

##### **Preterm birth and low birth weight**

##### **Fetal hypoxia (lack of oxygen) increases iron demand** – e.g. maternal hyperglycemia

##### **Infant feeding practices**

- Delayed introduction of iron-rich solids
- Combo feeding (breastmilk + formula) leading to ↓ iron absorbed from breastmilk
- Misunderstanding about milk (*milk has iron like formula, milk is a whole food*)

#### Family/Institutional

##### **Cultural**

- View of food & weight in Latin culture:
- Traditional diet replaced by junk foods
- Norms regarding breastfeeding

##### **Parenting**

- Food as a reward or to placate fussy child
- Delayed weaning from bottle to cup
- Teen nutrition is not priority/rapid growth

##### **Lack of knowledge about healthy foods**

- Combining foods to increase iron absorption
- Use of iron skillet
- Reading labels
- Misconceptions about milk being iron-rich
- Selecting healthy foods on limited budget

##### **Economic barriers to iron rich foods**

- High cost of housing allows little for food
- Easy access to cheap fast foods
- Lack of transportation to grocery stores
- Working long hours unable to prepare healthy meals
- Families share housing limiting access to kitchen

##### **Health care providers don't prioritize IDA prevention or provide education**

- Competing demands on provider time
- Insurance doesn't cover education/screening
- No link IDA to pre-conception & prenatal care
- Lack of lactation support

##### **Lack of medical home and relationship with providers**

##### **Fear of deportation/immigration**

- Failure to access food programs (food stamps, WIC)

##### **Ineffective treatment of IDA**

- Cost & transportation to pharmacy
- Chaotic lifestyle disrupts routine of vitamin taking

#### Societal/Policy Factors

**Land use** – community gardens

##### **Food marketing for profit not health**

**Health care policy** – e.g. lack of comprehensive coverage for women between pregnancies

**Schools policies & practices** don't prioritize healthy eating

##### **Institutionalized discrimination**

**Unhealthy practices in the workplace** – e.g. lack of healthy foods choices in the worksite