Republic of the Philippines
Department of Education
Region VI-Western Visayas
DIVISION OF AKLAN
Kalibo, Aklan

January 3, 2018

To: **Chief Education Supervisors**
Education Program Supervisors/ Coordinators
Public Schools District Supervisors
Principals/ Head Teacher In-Charge of the District
Senior/Education Program Specialists
Heads of Public Secondary and Integrated Schools

Dear Sirs/Mesdames:

Please find attached letter Gerardo V. Bayugo, MD,MPH,CESO III, Undersecretary of Health Office for Technical Services re: Weekly Iron Folic Acid (WIFA) Supplementation for Female Adolescent Learners in Public High Schools.

For your information, guidance and compliance.

Very truly yours,

Dr. ERNESTO F. SERVILLION, Jr., MNSA, CESO VI
Assistant Schools Division Superintendent
Officer – In – Charge
Office of the Schools Division Superintendent

DIVISION LETTER
No. 002, s. 2018

PMC/bam

"May katawhuryan ag kalipayan sa amon mga escuelahan."

Republic of the Philippines
Department of Health
OFFICE OF THE SECRETARY

June 6, 2017

DEPARTMENT MEMORANDUM
No. 2017- 0290

FOR : **ALL UNDERSECRETARIES, ASSISTANT SECRETARIES, OFFICE FOR HEALTH OPERATIONS, OFFICE FOR FIELD IMPLEMENTATION MANAGEMENT, OFFICE DIRECTORS OF BUREAUS, REGIONAL HEALTH OFFICES, NATIONAL NUTRITION COUNCIL, AND CONCERNED TECHNICAL STAFF**

SUBJECT: **Guidelines on the Weekly Iron Folic Acid (WIFA) Supplementation for Female Adolescent Learners in Public High Schools.**

I. RATIONALE

The 2013 National Nutrition Survey (NNS) conducted by the Food and Nutrition Research Institute (FNRI) reveal that 1 out 10 adolescents aged 15–19 years old suffer from anemia. Learners, especially female adolescents, are vulnerable to anemia because of their menstruation, rapid growth, increased iron requirement and high prevalence of parasitic infection resulting to loss of iron in the blood.

The Department of Health's Administrative Order (AO) No. 2010-0010 entitled "Revised Policy on Micronutrient Supplementation to Support Achievement of 2015 MDG Targets to Reduce Under-Five and Maternal Deaths and Address Micronutrient Needs of Other Population Groups" issued in 2010 has identified iron and folic acid supplementation for women of reproductive age, including adolescents, as one of the interventions to address IDA and folate deficiency among women. Likewise, one of the guiding principles of the same AO provides for the Micronutrient Supplementation provision to take place in the health and non-health sector settings, particularly in schools, workplaces, malls, and the like.

Considering also that most adolescents are in school and do not usually go to the health center to access health services, the Department of Health (DOH) partnered with the Department of Education (DepEd) to implement a school-based Weekly Iron Folic Acid (WIFA) Supplementation for grades 7 – 10 female learners. Prevention of iron deficiency anemia among female learners will improve their school performance and reduce absenteeism due to ill health thus, contributing to the reduction of about 200-500 million school days lost due to absenteeism.

WIFA will be a component of the Menstrual Health Management Project of DepEd to address knowledge gaps and support learners many of whom do not have the means for self-care and do not get the support they need when they face problems related to menstruation, including anemia. Such problems, if not addressed, hinders the female learners' ability to carry on with everyday activities and may also establish a foundation for life-long disempowerment.

II. OBJECTIVE

To provide guidelines on the Weekly Iron Folic Acid (WIFA) supplementation among female adolescents enrolled in grades 7 to 10 in public high schools and those adolescents enrolled in the Alternative Learning System of DepEd.

III. SCOPE AND COVERAGE

The Weekly Iron Folic Acid (WIFA) supplementation is a nationwide routine activity in all public high schools targeting Grades 7 to 10 female adolescent learners and those in the Alternative Learning System (ALS).

IV. DEFINITION OF TERMS

Iron	Iron is an essential trace mineral that is needed for hemoglobin formation. Hemoglobin is part of the red blood cells and gives blood its red color.
Folate	Folate is a water-soluble B vitamin. Folate is the form found in foods while folic acid is a synthetic compound of folate and is the form available as supplement. Folic acid helps the body make healthy new cells, helps form red blood cells and helps produce DNA, the building block of the human body, which carries genetic information.
Folate Deficiency	Folate deficiency is usually linked or coupled with iron deficiency anemia. Folate deficiency is also a known factor to cause certain neural tube defects
Iron Deficiency Anemia	It is a disorder resulting from the decrease in the number of red blood cells due to lack of iron and/or folate. It is the most common nutritional deficiency in the world and occurs if the amount of iron and/or folate absorbed is too little to meet the body's needs.
Micronutrient	A dietary element essential only in small quantities.
Micronutrient Supplement	Vitamins and minerals in concentrated form alone or in combinations taken to supplement the intake from the normal diet.

Micronutrient Supplementation	A short to medium term intervention intended to prevent and/or correct high levels of micronutrient deficiencies by providing large doses of micronutrients immediately until more sustainable food-based approaches (e.g. food fortification and diet diversification) are put in place and become effective.
Full Stomach	Having just recently eaten to the point of being full
Gastric discomfort	Any kind of discomfort in the stomach or other organs in the upper abdomen
Alternative Learning System	A parallel learning system that provides a practical option to the existing formal instruction. When one does not have or cannot access formal education in schools, ALS is an alternate or substitute. ALS includes both the non-formal and informal sources of knowledge and skills.

V. GENERAL GUIDELINES

1. WIFA Supplementation is a collaborative activity between the Department of Health and the Department of Education. It shall be a nationwide routine activity to be done simultaneously for all Grades 7-10 female learners in public high schools and in the Alternative Learning System (ALS).
2. The DOH shall provide the required iron and folic acid (IFA) tablets to cover all eligible female learners in all public high schools nationwide.
3. The DepEd shall implement the WIFA supplementation in all public high schools and in the ALS.
4. All public high schools and ALS shall secure consent from parents/guardians for WIFA Supplementation. Only learners with consent shall be administered with IFA. Learners with no consent will still be included in the masterlist but will not be provided with IFA tablets.
5. All records and reports generated by DepEd for this activity shall be shared with concerned local health offices and DOH regional and central offices.

VI. SPECIFIC GUIDELINES

1. Target Population

All Grades 7 to 10 female adolescent learners in public high schools and in the ALS shall be the recipients of the intermittent WIFA supplementation every July to September (first round) and January to March (2nd round) of each school year.

2. Drug, Dose and Schedule of Administration

2.1. Iron Folic Acid (IFA) Tablet Preparation

Iron folic acid (IFA) tablets contains 60 mg elemental iron and 400 ug folic acid with film coating

2.2. Iron folic acid (IFA) tablet administration

2.2.1. Prior to administration of IFA supplement:
- Female learners shall be screened by the school nurse/classroom adviser if they have been dewormed within the last six months
  - If yes, give the IFA tablet
  - If not, deworm first then administer the IFA tablet after 2-3 days
- If the learner was given consent only for WIFA supplementation but not for deworming, the parents of the female learner shall be encouraged by the nurse/classroom teacher to likewise give consent for deworming as the benefits of WIFA supplementation will be maximized only if the learner has been dewormed first.

2.2.2. Intermittent WIFA supplementation based on the World Health Organization (WHO) recommendation shall be given as follows:

# of Implementation Rounds	Schedule	Dose per Learner
I	July to September	1 tablet per week
II	January to March	1 tablet per week

Note: The IFA tablet shall be administered on a full stomach to avoid gastric discomfort.

2.2.3. The school nurse/classroom teacher shall administer IFA tablet every Monday or the next school day if Monday is declared as holiday or no school day and shall observe that the learner swallowed the tablet.

2.2.4. If the learner is absent on the day of WIFA scheduled administration, the IFA for the week shall be given on the day the learner returns to school.

2.2.5. If the learner is absent for the whole week, the IFA tablet for the previous week shall be given on the day she returns and the current week's IFA tablet 1-2 days after.

2.2.6. If the learner is currently taking multiple vitamin, WIFA can still be administered.

2.2.7. In case the learner has been previously diagnosed with anemia and receiving therapeutic doses of iron, IFA shall **NO** longer be given. Once the therapeutic treatment has been completed, WIFA supplementation shall be started to prevent recurrence of anemia following the WIFA recommended schedule.

2.2.8. In case the learner has been screened positive for glucose-6-phosphate dehydrogenase (G-6-PD), the learner shall be given the IFA tablet as it is not a contraindication for iron supplementation.

2.2.9. For ALS, administration of iron folic acid shall be as per agreed schedule between the ALS coordinator and the learners.

2.3. Expected Drug Reaction

2.3.1. Iron folic acid tablet has only minor side effects such as gastric discomfort, constipation and blackening of stool.

2.3.2. These side effects, if experienced by the learner, may be reported to the classroom teacher and/or the school nurse for management and provision of appropriate counseling.

2.3.3. If the learner's symptoms persist, the school nurse may refer the learner to the Rural Health Unit or Barangay Health Center for further evaluation and management.

2.4. Drug Storage

2.4.1. Iron folic acid tablets are sensitive to heat and shall be stored in a cool dry place at all times

2.4.2. Once opened, the iron tablets should not be removed from the High Density Polyethylene (HDPE) bottle to preserve its potency

2.4.3. If possible, opened bottles should be used immediately.

3. *Recording and Reporting Forms (Annex A)*

Form 1: Recording Form– This form shall be accomplished by the class adviser, lists all female learners provided and not provided with WIFA and other relevant information about them per class. This form shall be retained to the class teacher as reference.

Form 2a: Grade Level Report – This form shall be accomplished by the grade level coordinators, is a consolidation the classroom level reports submitted by the class advisers and to be submitted to the WIFA Supplementation point person. The 1st round report shall be submitted every 2nd week of October while the 2nd round report will be submitted every second week of April. Filled up Forms shall be retained to the classroom teacher as guide for the 2nd round.

Form 2b: School Level Report- This form shall be accomplished by the school WIFA Supplementation point person, is the consolidation report of the Form 2a signed by the principal and submitted to the district point person for consolidation within two (2) weeks after the Form 2a Grade Level Reports are submitted.

Form 3: District Level Report- This form shall be accomplished by the district point person, to be signed by the district supervisor and to be submitted to the division point person one week after the due date for School

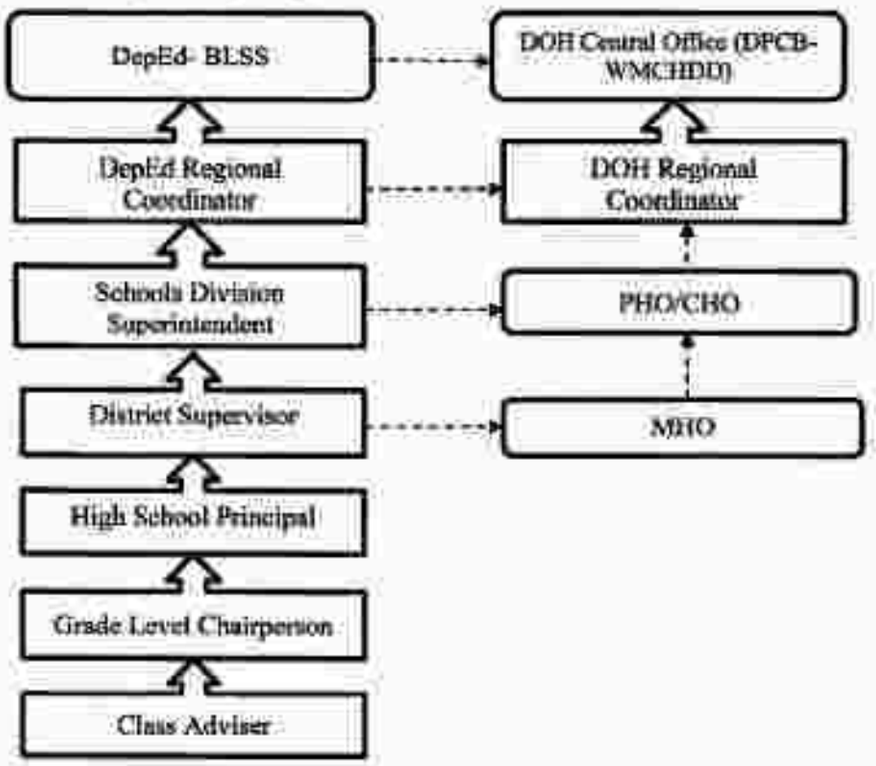
Level Report submission. Once approved, a copy shall be furnished to the Municipal Health Office.

Form 4: Division Level Report-This form shall be accomplished by the division point person, to be signed by the schools division superintendent and to be submitted to the regional point person one week after the due date for District Level Report submission. Once approved, a copy shall be furnished to the Provincial/City Health Office.

Form 5: Regional Level Report-This form shall be accomplished by the regional point person, to be signed by the regional director and to be submitted to the national point person one week after the due date for Division Level Report submission. Once approved a copy shall also be furnished to the Regional DOH Office for submission to DOH-CO.

Form 6: National Level Report - This form shall be accomplished by the national point person, to be signed by the Director of the Bureau of Learner Support Services (BLSS) and to be submitted to the Office of the Undersecretary. Once approved a copy shall also be furnished to the Women, Men and Children's Health Development Division of DOH-CO before the end of December and June for the first and second round, respectively.

Flow of recording and reporting



VII. IMPLEMENTING MECHANISM

A. Department of Health

1. Central Office (DOH-CO):

a. Formulates guidelines and procedures on the implementation of WIFA supplementation and disseminate to Regional Offices, LGUs and other stakeholders
b. Prepares a Memorandum of Agreement in consultation with DepEd
c. Issues a Department Memorandum on the implementation of WIFA supplementation
d. Prepares a Communication plan and prototype materials for WIFA supplementation advocacy and promotion in schools
e. Procures, allocates and distributes in a timely manner all required iron with folic acid tablets to be distributed among Grades 7-10 and ALS female students

2. Regional Office (DOH-RO)

a. The Regional Nutritionist assisted by the Regional Adolescent Health Development Program Coordinator supervised by the Office of the Regional Director and the Concerned Cluster Head shall be the focal points for the WIFA Supplementation implementation.
b. Reproduces and disseminates guidelines and procedures on the implementation of WIFA Supplementation
c. Reproduces and disseminates communication plan and prototype of IEC materials
d. Coordinates with DepEd regional counterpart during the pre during and post WIFA supplementation project implementation
e. Monitors the implementation of WIFA supplementation and submit reports to DOH-Central Office using the prescribed forms and following the reporting schedules

3. Rural Health Units/ Barangay Health Centers

a. Provides WIFA to Grades 7 to 10 in private high schools, out-of-school adolescents and women 10-49 years old not covered by the WIFA supplementation in public high schools
b. Assists the school health personnel in information dissemination among parents on the benefits of WIFA Supplementation
c. Manages referred cases of persistent minor drug reactions like constipation, gastric discomfort and blackening of stool.

B. Department of Education (CO)

1. Bureau of Learner Support Services-School Health Division (BLSS-SHD)

a. Develops policies and issue memoranda/orders on the concern;
b. Prepares annual targets and documents to support request for commodities from the Department of Health
c. Collaborates with the DOH and other local and international institutions/organizations on the development of Operational Guide for WIFA supplementation for Adolescent Girls in schools, capacity building for the implementation of the Operational Guide, complimentary school-based nutrition intervention, behavior change communication activities, recording reporting and evaluation of the supplementation program.
d. Coordinates with the DOH on the delivery of WIFA tablets for distribution to targeted schools
e. Consolidates and submits reports to DOH
f. Monitors and provides technical assistance to ROs and SDOs in the implementation of this policy.

2. Regional Offices (ROs)

a. Determines annual targets of the region and prepare sub-allotment to SDOs or conduct the actual procurement of iron with folic acid tablets for SY 2017-2018 only
b. Conducts regional orientation, to schools, division / SDOs on the activity
c. Consolidates submitted reports from the SDOs and submit to BLSS-SHD and DOH-regional counterpart; and
d. Monitors and provide technical assistance to SDOs/Schools on the implementation of the activity.

3. School Division Offices (SDOs)

a. Determines annual targets of the division and submit the data to the RO;
b. Distributes the iron with folic acid tablets to the schools
c. Conducts information dissemination to school heads PTCA and students; and
d. Consolidates reports of school/district offices and submit to DepED Regional Office
e. Monitors and provides technical assistance to schools to ensure successful implementation of WIFA supplementation.
f. Designates WIFA focal/point person (WIFA coordinator).

4. Schools

a. The School Head shall develop a protocol on the following:

- Assignment of a WIFA Supplementation point person

- Preparation of the master list of female students in Grades 7-10 and ALS to be given weekly iron and folic acid supplements
- Orientation and coordination with PTA and other stakeholders on the WIFA supplementation
- Administration of IFA tablets every Monday of the week through a school nurse or a teacher

- Storage, inventory and distribution of iron with folic acid tablets.
- Collect parent consent together with immunization and deworming

b. Prepares and submit reports on the number of female students who received supplementation, observations, issues encountered, and recommendations.

VIII. EFFECTIVITY

This policy shall take effect immediately.

By Authority of the Secretary of Health:

GERARDO V. BAYUGO, MD, MPH, CESO III
Undersecretary of Health
Office for Technical Services

Annex X

Recording Form 1 - List of Female Learners per Classroom

School-based Weekly Iron/Folic Acid (WIFA) Supplementation

Region:_____ Division:_____ District:_____ Reporting Month:_____

School ID:_____ Name of School:_____ Address:_____ Date:_____

Grade Level:_____ Section/Classroom:_____ Number of Female Learners:_____ School Year:_____

No.	Name of Female Learner	Consent*		1st Round								2nd Round												Reason why WIFA is not given (Please indicate code)	Remarks
				July				August				September				January				February				March			
		Y	N	W1 (Date)	W2 (Date)	W3 (Date)	W4 (Date)	W1 (Date)	W2 (Date)	W3 (Date)	W4 (Date)	W1 (Date)	W2 (Date)	W3 (Date)	W4 (Date)	W1 (Date)	W2 (Date)	W3 (Date)	W4 (Date)	W1 (Date)	W2 (Date)	W3 (Date)	W4 (Date)	W1 (Date)	W2 (Date)	W3 (Date)	W4 (Date)		
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25																											
	Total																										

*Consent Given

**Codes for reasons why WIFA is not given:
1. not absent
2. on therapeutic treatment for anemia
3. with persistent mild reaction like gastric discomfort

Administered by:

_____ _____
Class Adviser Date

Noted by:

_____ _____
Grade Level Teacher Date

Reporting Form: Za-Grade Level

School-based Weekly IronFolic Acid (WIFA) Supplementation

Round 1(/):____ Round 2(/):____ Reporting Month:_____

Grade Level: 7(/):____ 8(/):____ 9(/):____ 10(/):____ ALSI(/):____ School Year:_____

Region:_____ Division:_____ District:_____ Date:_____

School ID:_____ Name of School:_____ Address:_____ Total No. of Sections/Classrooms:____

Name of Sections/Classroom	Enrollment			Given WIFA Supplements		Not given WIFA Supplements		Total No. of WIFA is not give (based in codes)			Remarks
	Total No. of Enrolled Learners	Total No. of Female Learners	Total No. of Female Learners with Consent	Number	%	Number	%	1	2	3	
Total											

Submitted by:

_____ _____
School Principal Date

Noted by:

_____ _____
District Supervisor Date

Validated by:

_____ _____
School Nurse Date

Reporting Form 2b-School Level

School-based Weekly IronFolic Acid (WIFA) Supplementation

Round 1(/):_____ **Round 2(/):_____** **Reporting Month:_____**

Region:_____ **Division:_____** **District:_____** **Date:_____**

School ID:____ **Name of School:_____** **Address:_____**

Grade Level	Total No. of Sections/ Classrooms	Enrollment			Given WIFA Supplements		Not given WIFA Supplements		Total No. of WIFA is not give (based in codes)			Remarks
		Total No. of Enrolled Learners	Total No. of Female Learners	Total No. of Female Learners with Consent	Number	%	Number	%	1	2	3	
Total												

Submitted by:

_____ _____
School Principal Date

Noted by:

_____ _____
District Supervisor Date

Validated by:

_____ _____
School Nurse Date

Reporting Form 3-District Level

School-based Weekly IronFolic Acid (WIFA) Supplementation

Grade Level: Round 1(/):____ Round 2(/):____ Reporting Month:_____

7(/):____ 8(/):____ 9(/):____ 10(/):____ ALS(/):____ School Year:_____

Region:_____ Division:_____ District:_____ Date:_____

School ID:__ Name of School:_____ Address:_____ Total No. of Schools:____

School ID	Name of School	Enrollment			Given WIFA Supplements		Not given WIFA Supplements		Total No. of WIFA is not give (coded in codes)			Remarks
		Total No. of Enrolled Learners	Total No. of Female Learners	Total No. of Female Learners with Consent	Number	%	Number	%	1	2	3	
Total												

Submitted by:

_____ _____
Date

Approved by:

_____ _____
School Division Supervisor/ Superintendent Date

Validated by:

_____ _____
Division Nurse In-Charge Date

Reporting Form 4-Division Level

School-based Weekly IronFolic Acid (WIFA) Supplementation

Round 1(/):____ Round 2(/):____ Reporting Month:_____

Grade Level: 7(/):____ 8(/):____ 9(/):____ 10(/):____ ALS(/):____ School Year:_____

Region:_____ Division:_____ Date:_____ Total No. of Districts:____

Name of District	Total No. of Schools	Enrollment			Given WIFA Supplements		Not given WIFA Supplements		Total No. of WIFA is not give (based in codes)			Remarks
		Total No. of Enrolled Learners	Total No. of Female Learners	Total No. of Female Learners with Consent	Number	%	Number	%	1	2	3	
Total												

Submitted by:

_____ _____
Date

Approved by:

_____ _____
School Division Supervisor/ Date

Validated by:

_____ _____
Division Nurse In-Charge Date

Reporting Form 5-Regional Level

School-based Weekly IronFolic Acid (WIFA) Supplementation

Round 1(/):_____ Round 2(/):_____ Reporting Month:_____

Grade Level 7(/):_____ 8(/):_____ 9(/):_____ 10(/):_____ ALS(/):_____

Region:_____ School Year:_____ Date:_____ Total No. of Divisions:_____

Name of Division	Total No. of Districts	Total No. of Schools	Enrollment			Given WIFA Supplements		Not given WIFA Supplements		Total No. of WIFA is not give (based in codes)			Remarks
			Total No. of Enrolled Learners	Total No. of Female Learners	Total No. of Female Learners with Consent	Number	%	Number	%	1	2	3	
Total													

Prepared by:

_____ _____
WIFA Focal Person Date

Approved by:

_____ _____
Director (BLSSD) Date

Noted by:

_____ _____
HSD Date