General Circular No: 02-08/2007(1)  
FHB/SH/Gen/2013
Office of the Director of Health services,  
Ministry of Health,  
“Suwasiripaya”,  
385,Baddegama Wimalawansa theru Mw,  
Colombo 10  
2013-03-25

All Provincial Directors of Health Services,  
All Regional Directors of Health Services,  
All Directors of Special Programmes,  
Director / Medical Supplies Division,  
Director /National Institute of Health Sciences,  
All Directors, Medical Superintendents and Medical Officers In-Charge of Hospitals,  
Medical Officer/Maternal and Child Health,  
Chief Medical Officer of Health / Colombo Municipal Council,  
All Medical Officers of Health,  
All School Medical Officers,

**Weekly Iron Folate Supplementation (WIFS)**  
**For School Children – Year 2013 onwards**

This has further to General Circular no 02/08/2007 dated 19/01/2007 on “Iron Folate supplementation of adolescent school children in Grade 7 and 10”.

At the National Coordinating Committee for School Health, a decision has been taken to expand this activity to provide **weekly Iron Folate supplementation (WIFS) to all the school children from Grade 1 to Grade 13 from Year 2013**. The objective of this initiative is to improve iron stores in the body of school children.

Before starting WIFS, one tablet of Mebendazole (500mg) should be given. After that weekly Iron Folate supplementation (WIFS) has to be given as below, for 6 months(24 weeks) per annum to the school children from grade 1-13.

Table-1

<table>
<thead>
<tr>
<th>Type of pill</th>
<th>Strength</th>
<th>No: of pills(per week)</th>
<th>Duration (in weeks)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Iron</td>
<td>FeSO₄ 200mg</td>
<td>1</td>
<td>24</td>
</tr>
<tr>
<td>Folic Acid</td>
<td>1 mg</td>
<td>2</td>
<td>24</td>
</tr>
<tr>
<td>Vitamin C</td>
<td>100 mg</td>
<td>1</td>
<td>24</td>
</tr>
</tbody>
</table>

*When Ferrous Sulphate is not available Ferrous Fumarate 100mg or Iron Folate one tablet can be given. Although Vit C is not available WIFS can be given without Vit C.*

In whole of Uva, Sabaragamuwa and Central provinces where prevalence of worm infestation is high(Categorized as high risk)and for the areas with high prevalence of worm infestation which are in Moderate risk provinces a second dose of Mebendazole (500mg) should be given at the end of the 6 month cycle of WIFS.

(Please refer to the Gen Circular No:02-172/2012 Guidelines on De-worming Children and Pregnant women in Community Setting 2013-2016. Please note that the target group of school children which is mentioned as grade 1-10 in above circular should be corrected as grade 1-13 )

Micronutrient supplies will be issued to MOH offices by the Regional Medical Supplies Division. From year 2013 onwards, the Regional Directors of Health Services has to submit the annual estimate for the district to Medical Supplies Division (MSD). **All the drugs will be purchased by the FHB budget.**

Kindly take necessary actions to implement this programme in your RDHS areas through Field Health Staff and School Staff. Circular instructions to School Staff will be issued from the Ministry of Education.
Please ensure that following steps are taken to implement supplementation programme in all grades from Grade 1 up to Grade 13 from Year 2013.

- The Medical Officer of Health (MOOH) / Supervising Public Health Inspector (SPHI) should attend the principals meetings at the Zonal Educational Directors and discuss the WIFS programme with school principals in the area.

- Instructions to class teachers are annexed and this circular should be provided to all school principles. And request them to make all teachers aware about this programme.

- Parents and students should be made aware by class teachers. In addition PHI has to educate students and teachers.

- The Medical Officer/ Maternal and Child Health (MO/MCH) should ensure that Iron, Folate, Vitamin C and Mebendazole are supplied to the MOH offices from Regional Medical Supplies Division (RMSD).

- It is preferable that Public Health Inspector (PHI) to train at least one teacher from each school, about the method of administration of WIFS at the initiation of this programme.

- MOOH/PHI should provide the drugs to school principals once a month for a period of 6 months.

- All children in above grades should be given 1 tablet of Mebendazole (500mg) at the beginning of the programme.

- Following Mebendazole stat dose, children in the above grades should be given tablets of Iron, Folate and Vitamin C once a week, on the same day of the week, for a period of 6 months

- Only in Uva, Sabaragamuwa, Central province and high risk areas in other provinces a second dose of Mebendazole (500mg) should be given after six months of first dose. (at the end of the WIFS).

- All children should be instructed to have breakfast before taking tablets and to take tablets with water.

- If a child is absent on this day of WIFS, please ensure that the supplements are given on another day during the week.

- During school holidays the tablets should be given to the child with instructions for consumption and storage.

- Nutrition education programmes should be conducted for school children and parents parallel to the WIFS programme.

- Public Health Midwife (PHM) can provide WIFS for non school going adolescents during home visits.

- Programme should be monitored closely and inform Regional Director of Health Services (RDHS) or Director/ Maternal and Child Health (D/MCH) for any shortcomings.

Kindly contact School and Adolescent Health Unit, Family Health Bureau on 011-2692746 for any clarifications

Dr. P. G. Maheepala
Director General of Health Services

Cc: Secretary/Ministry of Health
Secretary / Ministry of Education
Provincial Health Secretaries,
Additional Secretary / Ministry of Education
D/Education Health and Nutrition, Ministry of Education
Deputy Director General /Public Health Services II
Deputy Director General / Public Health Services I
Director / Non Communicable Diseases
Director / Medical Research Institute
Director/ Nutrition coordination Unit
D / Health Education and Publicity
Chief Epidemiologist/Epidemiology Unit
Medical Officer /Maternal and Child Health – To coordinate the programme
Weekly Iron folate supplementation (WIFS) for school children

Guideline for teachers from Grade 1 to Grade 13
The students must be educated on the benefits of WIFS by class teacher / PHI

- Increase in Ferritin levels
- Optimize the physical growth and mental development
- Will reduce the incidence of diseases
- Will facilitate the learning process

Tablets of Iron/FeSO₄ (200 mg), Folic acid (2mg) Vit C (100mg) should be given to all children from Grade 1 up to Grade 13 once a week. A specific day must be allocated for this activity (e.g.: Monday or any day which is convenient) When the names of the children are called to mark the class register, The WIFS should be given to the children, to be swallowed under supervision.

Please try to distribute the tablets around 9.00am with marking of attendance.

- All children in above grades should be given 1 tablet of Mebendazole (500mg) at the beginning of the programme by the area PHI.
- Following Mebendazole stat dose, children in the above grades should be given tablets of Iron, Folate and Vitamin C once a week, on the same day of the week, for a period of 6 months annually.
- Only Uva, Sabaragamuwa, Central province and high risk areas in other provinces a second dose of Mebendazole (500mg) should be given after six months of first dose. (at the end of the WIFS).
- If a child is absent on the day WIFS given, it can be given on any day during that week.
- Ask to take the micronutrients after the breakfast with water.
- Class Monitor should maintain a data collection format, under the guidance of class teacher (Table-2) PHI should collect these formats at the end of WIFS programme.
- The class monitor should assist in making a tick (✓) in the check list; when tablets are swallowed.
- If a child is absent, mark “ab” on the treatment list, if present for treatment mark a (✓) If there are any complaints, write in the specified column in the treatment list. If the absent child received the tablets in another day of the same week mark a tick across the “ab” mark.
- The remaining tablets should be kept tightly closed.
- If the class teacher is absent, the monitor of the class should remind and assist the teacher who comes for the roll-call.
- Children can get side effects such as nausea, vomiting, headache, dark coloured stools, constipation, abdominal pain, etc. Need not to be alarmed, they would disappear in a day or two. Occurrence of abdominal pain can be avoided by taking the tablets after meals.
- A PHI will visit the school once a month. Discuss any problems with school authorities.
- Please make arrangements to distribute the vitamins during the school holidays.

<table>
<thead>
<tr>
<th>Risk category</th>
<th>Provinces</th>
</tr>
</thead>
<tbody>
<tr>
<td>High Risk</td>
<td>Uva, Sabaragamuwa, Central</td>
</tr>
<tr>
<td>Moderate Risk</td>
<td>All the other provinces</td>
</tr>
</tbody>
</table>
Table-2

Special Programme for Iron folate supplementation (WIFS) for School Children – Year 2013

Assessment form for distribution of Mebendazole, Iron, Folate & Vitamin C tablets

Name of the School: .................................................................
Grade: ..............................................................
Name of the Class teacher: ....................................................
Month in which treatment started: ...........................................
Mark a tick (√) once the tablets are swallowed.

<table>
<thead>
<tr>
<th>S. No</th>
<th>Name of student</th>
<th>Mebendazole</th>
<th>1st Month</th>
<th>2nd Month</th>
<th>3rd Month</th>
<th>4th Month</th>
<th>5th Month</th>
<th>6th Month</th>
<th>Extra Mebendazole</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>E.g. – Sunil Perera</td>
<td></td>
<td>√</td>
<td>√</td>
<td>ab</td>
<td>√</td>
<td>√</td>
<td>√</td>
<td>√</td>
</tr>
<tr>
<td>Complications</td>
<td></td>
<td>N</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

1. 
2. 
3. 
4. 
5. 
6. 
7. 
8. 

Abdominal Pain: AP
Vomiting and Nausea: V/N
Constipation: C