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Anaemia in Pregnancy: Factors Associated with Maternal Anaemia in the Dadaab Refugee Camps, Kenya (2001-2002)

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Conference Abstract

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ABSTRACT

Objectives: 1) Describe the socioeconomic and health status of this population of pregnant women;
2) Determine the anaemia prevalence using a series of diagnostic markers (haemoglobin, sTFR, and ZPP);
3) Explore the relationship between a variety of socio-demographic, nutritional, and disease-related factors, and anaemia.

Methods: This paper was developed using data collected during a longitudinal cohort study conducted between 2001-2002, which investigated the effectiveness of a new antenatal micronutrient supplement. A preliminary literature review identified known biological and socioeconomic risk factors associated with anaemia. Chi², students t-test, correlation, and logistic regression analyses explored the strength of association between exposure variables and anaemia.

Results: The prevalence of maternal anaemia in this population was 75% at 16-24 weeks gestation. Iron deficiency was similarly widespread; 65% and 45% of women exceeded the threshold for deficiency as defined by ZPP and sTFR indicators respectively. Malaria,

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schistosomiasis, and hookworm infections were not significantly associated with anaemia in this population. MUAC and BMI were strongly correlated with anaemia, as was Somali ethnicity, iron deficiency (sTFR), and living in a rural context pre-displacement.

Conclusions: The prevalence of anaemia and iron deficiency among pregnant women in Dadaab constituted a severe public health problem, as defined by the World Health Organisation. Since this study, a strategy for the control and reduction of anaemia has been developed by UNHCR and implemented in the Dadaab camps and elsewhere. However, data published more recently suggests that maternal anaemia remains a persistent problem (74%, 2005; 69%, 2008) that requires further attention and a continued response.

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