

YOU CAN PREVENT IRON DEFICIENCY ANEMIA

By Eating Iron Rich Foods



All Iron Deficiency materials developed in partnership with:



- Arnold Schwarzenegger, Governor, State of California
- Secretary, Health & Human Services Agency
- Director of Health Services

This flip chart was made possible by the United States Department of Agriculture, Food Stamp Program, through the "California Nutrition Network for Healthy, Active Families." The USDA is an equal opportunity provider and employer.



**CALIFORNIA
BLACK INFANT
HEALTH PROGRAM**

carol h williams

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What is Iron Deficiency Anemia?

Iron Deficiency Anemia occurs when there's not enough iron in your blood. It is sometimes called "weak" or "thin" blood. There is not enough of a protein called "hemoglobin" or the number of red blood cells could be low. When this happens, the blood carries less oxygen. Oxygen is needed to help every part of your body work well.

How can I tell if I am or someone in my family is anemic?

Without enough iron, some people feel sick and others do not. Blood tests are the only way to know if you or someone in your family is anemic. Two of the most common screening tests are called "hemoglobin" and "hematocrit." Your healthcare provider can order these tests when needed.

Tip: The desire to chew unusual substances such as dirt, starch or ice, known as "pica," is a possible sign of Iron Deficiency Anemia.

Information for the Health Professional

Hemoglobin, the main component of red blood cells, accounts for 60–70% of the body's total iron. About 30% of the body's iron is stored in the liver, spleen and bone marrow. Iron is stored primarily as ferritin, but some is stored as hemosiderin. The remaining iron is found in the muscle as myoglobin and as part of intracellular enzymes. Iron is transported in blood by transferrin. The primary function of iron is to transport oxygen to all the tissues. Other functions include oxygen storage and release in the muscle and electron transport.

Iron Deficiency Anemia is the most common cause of anemia. Other less frequent causes of anemia include sickle cell disease, blood disorders, blood loss, vitamin B-12 deficiency (common for strict vegetarians), and nutritional deficiencies of folic acid and vitamin A.

What is Iron Deficiency Anemia?



Whom does Iron Deficiency Anemia Affect?

Iron Deficiency Anemia affects:

1. African-American women primarily between the ages of 12–50 and
2. Children aged 1–2 years.

If you are pregnant, you are more likely to develop Iron Deficiency Anemia. Your unborn baby relies on you for iron and other nutrients. That's why prenatal vitamins and iron are such an important part of a woman's care during early pregnancy. To make sure that you have enough iron for you and your baby, eat well-balanced meals and follow your doctor's or other healthcare professional's instructions for taking iron and adding iron to your diet. Also note, even if iron intake is sufficient, you may become anemic in pregnancy. Your unborn child uses some of the prenatal vitamins and iron normally available for your body.

Anemia happens a lot with children. Most children become anemic because they do not eat enough foods high in iron. In fact, about one out of every six low income children is anemic.

Information for the Health Professional

Iron Deficiency Anemia occurs when the diet does not include enough iron-rich foods and iron helpers, if there is blood loss, or if there is an increased need for iron in the blood, such as during adolescence, pregnancy and breastfeeding.

Healthy People 2010 Objectives:

Reduce iron deficiency among young children and females of childbearing age to:

- 5% Children 1 to 2 years of age
- 1% Children 3 to 4 years of age
- 7% Nonpregnant females 12 to 49 years of age

Iron stores are primarily built up in the fetus in the third trimester, thus premature infants and multiples are at highest risk of anemia. Therefore, all babies should receive breast milk or iron-fortified infant formulas.

Whom does Iron Deficiency Anemia affect?



How does Iron Deficiency Anemia affect my family and me?

Iron Deficiency Anemia can cause serious health problems for you and members of your family if it goes untreated. Children, for example, may not do well in school when they are anemic. Even prior to school age, children can be affected by anemia because it can cause immune system damage and may have effects on neurological and intellectual function. If you are pregnant and are anemic, your child could be born with low birth weight and could possibly suffer from a number of developmental delays.

What are the effects, signs and symptoms of Iron Deficiency Anemia?

These symptoms may occur:

- Look pale, feel tired and weak, act cranky
- Eat poorly
- Not grow well
- Get sick more easily, get infections, develop lead poisoning, and headaches
- Have trouble learning and do poorly in school or work
- *If you are pregnant, your baby could be born too small or too soon*

More rarely, these symptoms may occur:

- Sore tongue
- Brittle nails
- Blue Sclera (whites of eyes may look blue)

Usually there are no signs!

Information for the Health Professional

Hematocrit tests are an indirect measurement of iron; these tests count the number of red blood cells. Hemoglobin tests are considered more sensitive than hematocrit tests in the determination of Iron Deficiency Anemia. Other laboratory tests for Iron Deficiency Anemia include a complete blood count (CBC), serum ferritin, iron/iron-binding capacity (transferrin saturation), and erythrocyte protoporphyrin.

Chronic iron deficiency in childhood may have adverse effects on growth and development. Potential results of chronic iron deficiency include decreased ability to learn, impaired attention span and memory, and a higher risk for lead poisoning. Iron repletion therapy can reverse some of those effects, but some effects like decreased cognition can affect a child's performance for life.

How does Iron Deficiency Anemia affect my family and me?



Four steps to help prevent Iron Deficiency Anemia

Make regular visits to your healthcare provider who can provide tips on preventing Iron Deficiency Anemia.

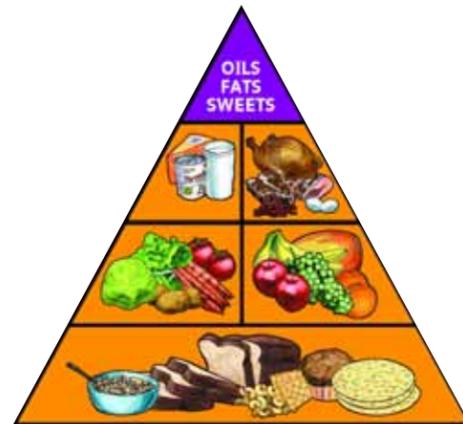
- #1.** Eat foods high in iron every day.
- #2.** Eat iron helpers. Meat and foods high in vitamin C help your body use iron better.
- #3.** Limit foods that block iron with meals. Drink enough milk, but not too much. Avoid coffee and tea with meals.
- #4.** Use iron pills or drops as instructed by your doctor or other healthcare provider. They do NOT take the place of healthy foods!

Note:

- If you have sickle cell trait or sickle cell disease talk with your doctor or other healthcare provider about it at every visit.
- If you require frequent blood transfusions, do not take iron pills or drops.

4 Steps to Help Prevent Iron Deficiency Anemia

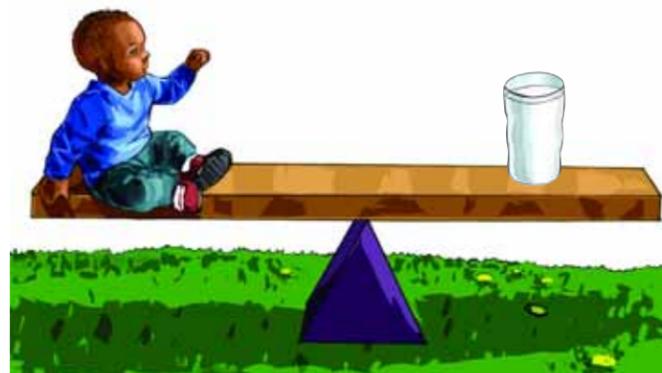
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2. Eat iron helpers with meals. Meat and foods high in vitamin C help your body use iron better.



3. Limit foods that block iron. Drink enough milk, but not too much. Avoid coffee and tea with meals.



4. Use iron pills or drops as instructed by your doctor or other healthcare professional. They do NOT take the place of healthy foods!



First Step:

Eat Foods high in iron every day.

Choose from these good sources of iron:

Meat, Poultry, Fish, Dry Beans, Eggs and Nuts Group:

- Beef or pork
- Poultry
- Fish or shell fish, such as clams and oysters
- Liver (no more than once a week)
- Beans, i.e., blackeye peas, red, navy, and pinto beans

Bread, Cereal, Rice and Pasta Group:

- Iron-fortified cereals (25% or more iron per serving—see labels or choose WIC cereals)
- Iron enriched noodles, rice, bread and tortillas

Vegetable Group:

- Dark green leafy vegetables (chard, collards, spinach)

Fruit Group:

- Raisins, prunes, dried apricots and prune juice

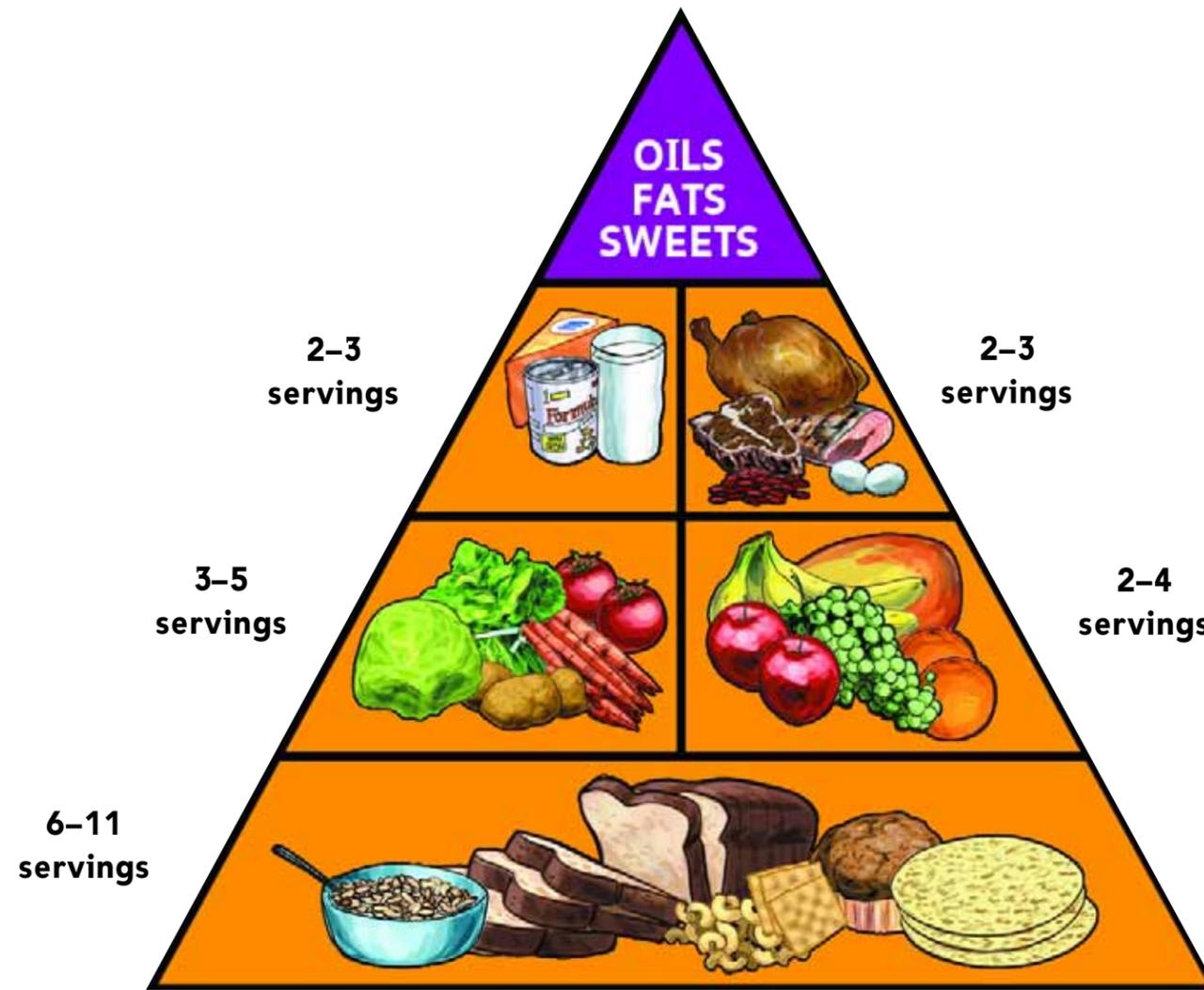
Information for the Health Professional

There are two forms of dietary iron, heme and non-heme iron. Heme iron (found in animal tissue) is more easily absorbed by the body. Thirty to sixty percent of iron found in meat, poultry and fish is in the heme form; the remaining iron in these foods is in the non-heme form. Other sources of non-heme iron include grains, eggs, fruits and vegetables.

Heme iron absorption is influenced only by the body's need for iron. Nonheme iron absorption can be influenced by three factors: **(1)** the body's need for iron, **(2)** conditions in the gut and **(3)** meal composition. Meal composition includes the presence of iron-enhancing substances (helpers) like meat and vitamin C as well as inhibiting factors (blockers) like coffee and tea.

Most imported rices are not enriched with iron and B vitamins. Encourage parents to buy enriched rice.

First Step:
Eat foods high in iron every day.



Second Step:

Eat iron helpers with meals. Meat and foods with Vitamin C help your body use iron better.

MEAT

Just eating a little meat with other foods can increase the iron your body gets. Meat is an “iron helper.” It helps your body use the iron from other foods. Small amounts of meat are good for your health. For example, try putting a small amount of meat into your cooked beans. Try to eat lean meats. Take off any skin and trim any extra fat. If you are vegetarian, eat beans, iron-enriched breads and cereals often.

VITAMIN C

Eat foods high in vitamin C when you are eating iron foods. Vitamin C foods are “iron helpers” too. They help your body use the iron from other foods. For example, drink a glass of orange juice with your breakfast cereal. You can add a vitamin C food when you cook foods high in iron. For example, cook your beans with tomatoes or chilies. Or even better, serve raw tomatoes or chilies with the beans. Some foods high in vitamin C are:

Vegetables:

tomato, broccoli, cauliflower, bell pepper, chili pepper, cabbage

Fruits:

orange, cantaloupe, mango, papaya, grapefruit, strawberry, kiwi

Juices:

orange, grapefruit, tomato, lemon, lime and all WIC juices

Information for the Health Professional

MEAT

Absorption of nonheme iron increases twofold to fourfold when meat, fish or poultry is eaten in the same meal. The mechanism by which meat aids in iron absorption has not been identified, but the amino acid cysteine appears to be the key component. Evidence suggests that this amino acid helps iron pass more readily through the intestinal wall and decreases the likelihood of iron excretion.

VITAMIN C

A number of studies have confirmed the ability of vitamin C (ascorbic acid) to enhance the absorption of nonheme iron. In fact, absorption is increased by as much as 85%. An acid environment promotes iron absorption. Ascorbic acid (vitamin C) as well as citric acid and certain amino acids aid in the absorption of nonheme iron by preventing the formation of insoluble compounds.

Second Step:

Eat iron helpers with meals.

Meat and foods with vitamin C help your body use iron better.

The Iron Helpers



Read the labels to see which foods are high in iron and vitamin C.

1. Iron is added to some foods because we need more iron from the foods we eat. Look for food labels that say “enriched” or “fortified” (with iron).

Examples of foods that may have added iron are:

- Bread
- Tortillas
- Rice
- Pasta
- Cereals

2. Vitamin C is added to some foods. Vitamin C helps us use the iron in the foods we eat. Look for labels that say “added vitamin C”. Juices are a good example of a vitamin C product to buy. Not all juices are high in vitamin C. Be sure to check the label. Also, check the label to be sure each serving has 50% or more of the vitamin C you need.

Please remember these two hints for good nutrition:

1. Buy “100%” juice. Avoid buying “fruit drinks” and other sweetened drinks that are high in sugar or corn syrup.
2. Limit your school-age child’s juice intake to no more than 6–8 oz. per day so he/she will be hungry for other foods.

Information for the Health Professional

Enriched – Nutrients are added to food to restore some of those lost during processing. For example, thiamin, riboflavin, niacin and iron are added back to refined cereals. Another example is adding vitamin C back to instant mashed potatoes.

Fortified – Nutrients are added to food in amounts exceeding those typically found in the food. For example, infant cereal is fortified with iron, some orange juice is fortified with calcium and margarine is fortified with vitamin A.

Read the labels for foods high in iron and vitamin C

Nutrition Facts			
Serving Size		1 cup (30g/1.1oz.)	
Servings per Container		About 17	
		Cereal with 1/2 cup Vitamins A & D Skim Milk	
Amount Per Serving	Cereal	Skim Milk	
Calories	110	150	
Fat Calories	0	0	
% Daily Value**			
Total Fat 0g*	0%	0%	
Saturated Fat 0g	0%	0%	
Cholesterol 0g	0%	0%	
Sodium 330mg	14%	16%	
Potassium 35mg	1%	7%	
Total Carbohydrate 26g	9%	11%	
Dietary Fiber 1g	4%	4%	
Sugars 2g			
Other Carbohydrate 23g			
Protein 2g			
Vitamin A	19%	20%	
Vitamin C	25%	25%	
Iron	45%	45%	
Calcium	0%	15%	
** Percent Daily Values are based on a 2,000 calorie diet. Your daily values may be higher or lower depending on your calorie needs:			
	Calories	2,000	2,500
Total Fat	Less than	65g	80g
Sat. Fat	Less than	20g	25g
Cholesterol	Less than	300mg	300mg
Sodium	Less than	2,400mg	2,400mg
Potassium		3,500mg	3,500mg
Total Carbohydrate		300g	375g
Dietary fiber	25g	30g	
Calories per gram: Fat 9 • Carbohydrate 4 • Protein 4			

Winning Meal Combinations

“Winning Meal Combinations” always include foods with iron as well as “iron helpers”. Remember the “iron helpers”? These are foods that help your body use iron better.

Here are some sample meals and snacks for your children over 1 year of age.

Let’s review the “Foods with Iron” and the “Iron Helpers”.

MEAL	FOODS WITH IRON	IRON HELPERS
Breakfast	WIC cereal and toast	melon and orange juice
Snack	muffin made with WIC cereal	grapefruit sections
Lunch	chicken*, rice, baked ribs* and fortified rice	broccoli
Snack	crackers	strawberries
Dinner	steak*, cornbread salad with tomatoes	collard greens, and red beans

*These foods are also iron helpers.

Winning Meal Combinations

Breakfast



WIC cereal, toast, melon,
orange juice

Snack



Muffin, grapefruit sections

Lunch



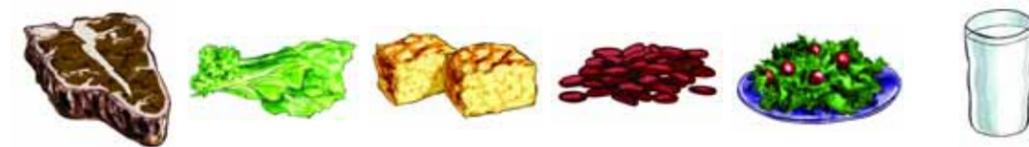
Chicken, rice,
broccoli, milk

Snack



Crackers, cheese,
strawberries

Dinner



Steak, collard greens,
cornbread, red beans,
salad with tomatoes, milk

Third Step: Avoid foods that block iron.

Be aware of iron blockers. Some foods block iron from getting into your body. Coffee and tea are good examples. Too much milk can also be an iron blocker.

- If you drink coffee or tea, drink moderate amounts between meals.
- Balance your milk and food intake to avoid Iron Deficiency Anemia.

Drink enough milk, but not too much. Milk and milk products like cheese, yogurt, cottage cheese and ice cream are low in iron. Too much milk can decrease iron absorption. (See chart for serving recommendations.)

Start teaching your child to use a cup at about 6 months. At around one year of age, your child should be able to drink from a cup and does not need a bottle. Many children who continue drinking from a bottle drink too much milk. When children drink too much milk, they are not hungry at mealtimes.

- Children under 2 years of age need only 2 cups of whole milk a day (16 ounces).
- Older children need only 2 to 3 cups of milk a day (16 to 24 ounces).

TIP: Drink the amount of milk recommended.

Information for the Health Professional

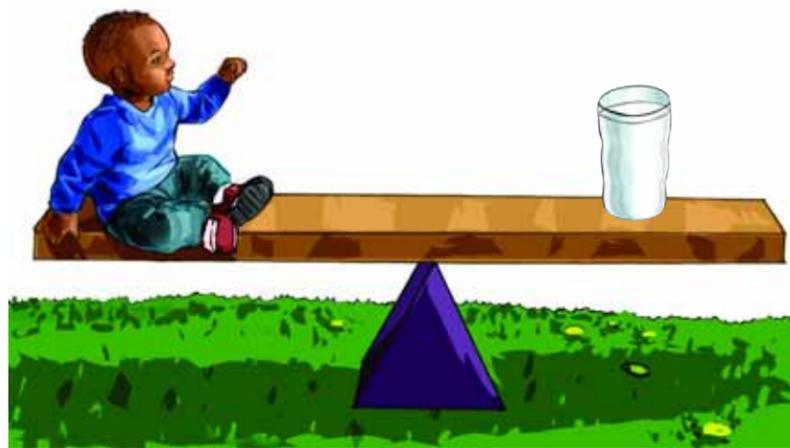
Iron Absorption Blockers – Several factors block nonheme iron absorption. Tannins and polyphenols, found in coffee and tea, reduce the solubility of iron. Phytates (commonly found in whole grains, bran and soy products) and oxalates (found in foods such as spinach, rhubarb and chocolate) form insoluble complexes with iron. Certain types of dietary fiber increase the speed at which food passes through the digestive tract, decreasing the amount of time available for iron absorption.

Recommended servings and size for milk and formula

AGE	TYPE OF FORMULA/MILK	SERVING SIZE	TOTAL AMT. RECOMMENDED
Birth–3 wks.	Breast milk or iron-fortified infant formula	varies 2–4 ounces	8–12 times per day 6–24 ounces (2–3 cups)
3 weeks–2 months	Breast milk or iron-fortified infant formula	varies 4–6 ounces	varies 24–32 ounces (3–4 cups)
2–3 months	Breast milk or iron-fortified infant formula	varies 5–7 ounces	varies 24–32 ounces (3–4 cups)
3–6 months	Breast milk or iron-fortified infant formula	varies 6–8 ounces	varies 24–32 ounces (3–4 cups)
6–9 months	Breast milk or iron-fortified infant formula	varies 7–8 ounces	varies 24–32 ounces (3–4 cups)

AGE	TYPE OF FORMULA/MILK	SERVING SIZE	TOTAL AMT. RECOMMENDED
9–12 months	Breast milk or iron-fortified infant formula	varies 4–6 ounces	varies 32 ounces (4 cups)
1–2 years	Breast milk or whole milk	varies 4 ounces	varies 16 ounces (2 cups)
2–10 years	Breast milk (wean naturally at 2–4 yrs.)	varies	varies
	low fat or non fat milk	4–6 ounces	16–24 ounces (2–3 cups)
11–24 years & Pregnancy	low fat or non fat milk	8 ounces	32 ounces (4 cups)

**Third Step:
Avoid foods that block iron.**



**Balance milk and food to avoid Iron Deficiency Anemia.
Drink enough milk, but not too much.**



Avoid drinking coffee and tea with meals.

Prevent Iron Deficiency Anemia as your child grows

Breastfeed your baby. The only acceptable alternative to breast milk is iron-fortified infant formula. Do not buy low-iron formulas. Give breast milk or iron-fortified infant formula for the first twelve months. Start teaching your baby to use a cup at about 6 months. Wean your child from the bottle at 1 year of age.

As your baby grows, introduce solid foods that are high in iron.

Foods high in iron to add after the baby is 6 months of age:

- Iron-fortified infant cereals.
- Strained spinach, peas, and other vegetables with iron.
- Strained or ground meats or mashed beans also add vitamin C fruits or vegetables daily.

At one year of age, give your child high-iron table foods.

- Remember to serve foods high in vitamin C at the same meal or snack.
- Try serving a little meat with other foods.
- Introduce whole milk, but not too much. Review chart entitled, "Recommended Servings and Size for Milk and Formula" on previous page.

Information for the Health Professional

The iron content of breast milk is about .8 mg/dl and does not appear to be influenced by the mother's iron status or length of gestation. Iron is more easily digested from breast milk than from any other food. About 50% is absorbed when fed to healthy infants six months old.

The iron content of iron-fortified formula is 12.6 mg/dl, but the infant absorbs about the same amount of iron as the breastfed infant. Research has also shown that the iron-fortified infant formulas are not likely to cause constipation. The iron content of low-iron formulas is about 1 mg/dl, but the iron is not easily absorbed and infants need additional iron for an adequate iron supply. Low-iron formulas are not recommended.

Iron-fortified infant cereal and other sources of iron should begin about 6 months of age for full-term infants. Pre-term infants may need iron supplementation earlier.

Prevent Iron Deficiency Anemia as your child grows.



Iron-fortified formula
is an alternative

Breastfeed your baby



Begin use of cup at
about 6 months



Wean from the bottle at about 1 year



Eat high iron foods

Fourth Step: Use iron supplements as told by your health care provider.

1. Take iron pills or drops according to your healthcare provider's advice. You should stop using iron supplements only if instructed by your healthcare provider.
2. If you are pregnant, you may develop constipation, nausea, and/or vomiting while taking iron supplements.
3. Talk to your healthcare provider about your discomforts. They may have tips about how to feel better.

Remember that too much iron can be poisonous! Be careful to give your child the correct amount of iron. Just 10 pills taken at one time can kill a small child!

See your healthcare provider regularly.

1. See your healthcare provider if you are planning to become pregnant in order to have a healthy baby.
2. It's important to see your healthcare provider as soon as you think you're pregnant. If there are any problems, they can be treated early to prevent harm to you and your baby.
3. Be sure to keep regular prenatal appointments.
4. Maintain your baby's well-child checkups.

Tip: Ask your healthcare provider if you or your child is anemic.

Information for the Health Professional

Refer pregnant women to their primary healthcare provider and registered dietitian if:

- Anemia has not improved within 1 month from the start of treatment.
- She has a history of sickle cell disease or other medical disorders causing anemia.
- She is unable or unwilling to take iron supplements due to discomforts.
- She has a poor dietary intake.
- She uses vegan food practices with limited food choices.

Fourth Step:
Use iron supplements as prescribed.



Preventing & Managing Constipation & Vomiting

Constipation, nausea and vomiting can be caused or made worse by taking iron supplements during pregnancy. It may be hard to tell if it is caused by the pregnancy or iron.

Preventing Constipation

When you're pregnant, you may become constipated from time to time. Here are some ideas to help:

- **Eat more foods with fiber**
Raw or dried fruits
Raw or cooked vegetables
Leafy greens
Nuts and seeds
Whole grain breads and cereals
Bran/oat bran
Brown rice
Corn
Beans and peas
- **Eat regular meals and snacks**
Chew your food very well.
- **Drink plenty of liquids**
Drink water and other fluids such as decaf teas, decaf coffee, milk, juice and soup.
Write down how much liquid you drink. Does it add up to two or three quarts? If not, drink some more.
- **Exercise every day**
Walk for half an hour
Swim
Do low impact aerobics
- **Ask your healthcare provider before you do any new exercise.**
- **Take time for your bowel movements**
Go to the bathroom when you need to go. Holding it can make your constipation worse.
Raise your feet on a stool or box when you have a bowel movement.
Don't strain.
- **Try a natural laxative**
It can help to eat prunes, figs or apricots. You can also drink juice.

Managing Vomiting

Many women have nausea or "morning sickness" in the first few months they are pregnant. It is caused by the changes in one's body because of pregnancy. Although it is common in the morning, it could last all day.

Here are a few ways you can help yourself feel better.

- **Do not drink coffee, alcohol or use cigarettes**
They can upset your stomach.
They can also harm your baby.
- **You may want to stay away from**
Stale odors
Strong cooking odors
Smoke
Cleaning fluids or paints
Perfumes or other smells
Crowded places
Places with no fresh air
Avoid foods that make your nausea worse such as high-fat, fried foods and dishes with strong spices.
- **Listen to what your body wants. Eat foods that:**
Taste good to you. Keep you from having nausea and vomiting.
- **Get plenty of fresh air**
Open windows, use fans. Take a brisk walk outdoors. Eat a little bit of food as you get up slowly in the morning. Put crackers, fruit or fruit juices near your bed. Take a few bites or sips before getting up.
- **Drink fluids at least one-half hour before or after mealtime**
Sip small amounts of liquid as often as you can.
Add water to juices like apple, grape, mango, fruit punch or lemon.
Make broth or noodle soups.

Preventing & Managing Constipation and Vomiting



Always remember the 4 steps to help prevent Iron Deficiency Anemia.

Summary:

Do you remember the four steps we discussed to help prevent Iron Deficiency Anemia? Name them if you can.

- #1. Eat foods high in iron every day.
- #2. Eat iron helpers with meals. Meat and foods high in vitamin C help your body use iron better.
- #3. Limit foods that block iron. Drink enough milk, but not too much. Avoid coffee and tea with meals.
- #4. Use iron drops or pills as directed by your healthcare provider. They do NOT take the place of healthy foods! The best way to stay healthy and prevent anemia is by making good food choices. Eat the right amounts of foods from the Food Guide Pyramid.

Caution:

Too much iron can be poisonous! Be careful to give the correct amount of iron. Too much iron can poison your child. Just 10 pills taken at one time can kill a small child.

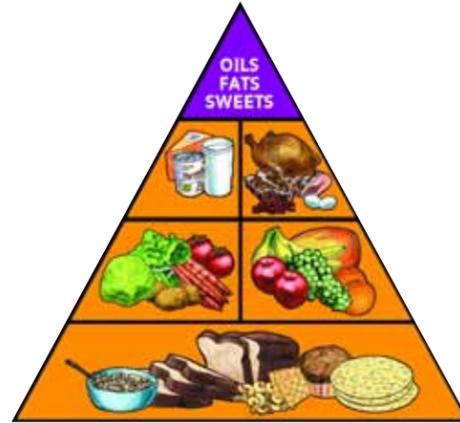
Keep iron away from your child. Lock all medicines or store them high and out of reach.

Note: Call “**POISON CONTROL**” if your child takes any of your iron pills or drops! (Have the number for Poison Control available for clients.)

Tip: The Food Stamp Program provides food for a good diet to people with low incomes. To find out more, call 1-800-952-5253.

Always remember the 4 steps to help prevent Iron Deficiency Anemia

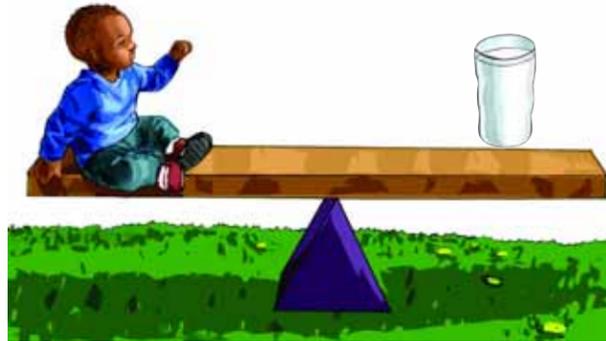
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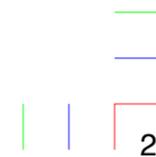
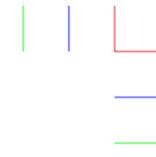
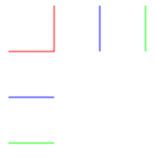


3. Limit foods that block iron. Drink enough milk, but not too much. Avoid coffee and tea with meals.



4. Use iron pills or drops as instructed by your doctor or other healthcare provider. They do NOT take the place of healthy foods!





"You Can Prevent Iron Deficiency Anemia"

was designed to help healthcare professionals in the state of California educate clients on ways to reduce Iron Deficiency Anemia. Recommendations for using the flipchart are the following:

1. Plan to use the flipchart with small groups of clients (1 to 3).
2. The flipchart was designed for more interactive learning between the client and the health professional. To use the flipchart correctly, read the written text on the top of each page to reinforce the graphic illustrations below. Having the text above the graphic illustrations allows key points to be emphasized easily.
3. Become familiar with the information in advance for easier explanation to the client.
4. If interested in optional reading, review the section entitled, "Information for the Health Professional." This is optional background information only to be used as needed by the health professional.
5. Showing clients actual food labels helps to reinforce the iron and vitamin C contents of foods discussed.
6. Be sure to go over the last page with the client, which reviews the basic principles discussed to prevent anemia. To check the client's knowledge, ask the client to explain the basic nutritional principles for preventing anemia before reviewing the last page.
7. The information in the flipchart will be better reinforced if a pamphlet on preventing anemia is also given and briefly reviewed.

We're Keeping Babies Healthy



All Iron Deficiency Anemia materials
developed in partnership with:
Great Beginnings for Black Babies



Arnold Schwarzenegger, Governor, State of California • Secretary, Health and Human Services Agency • Director of Health Services

This flipchart was made possible by the United States Department of Agriculture, Food Stamp Program, through the *California Nutrition Network for Healthy, Active Families*. The USDA is an equal opportunity provider and employer.

