## ORIGINAL RESEARCH

## Adherence To Iron Deficiency Interventions Among Pregnant Women Attending Antenatal Clinics in Ubungo Municipality, Dar Es Salaam, Tanzania.

Glory Benjamin 1, Hussein Mwanga 1, Ezra J. Mrema1, Nchang'wa Nhumba 2 and Wakoli Albert 3

<sup>1</sup>School of Public Health and Social Sciences, Muhimbili University of Health and Allied Sciences, P.O Box 65001, Dar es Salaam, Tanzania.

<sup>2</sup>President's Office, Regional Administration and Local Government: Ubungo Municipal Council.

3University of Eastern Africa, Baraton; P.O Box 2500, 30100 Eldoret, Kenya.

<sup>1</sup>Corresponding Author Email: bennieglory@gmail.com

## Abstract:

Iron deficiency anaemia among pregnant women remains a public health concern despite the iron deficiency interventions put in place. This study investigated the level of adherence to the interventions and the associated factors among pregnant women attending antenatal clinics in Ubungo Municipality. This cross-sectional study used a systematic random sampling technique to obtain 503 participants from the surveyed clinics. Interviews were conducted by using interviewer-administered questionnaires. Data were analysed using Stata version 17. The study employed binary and multivariable logistic regression analysis to determine factors associated with adherence to iron deficiency interventions. In this study, 72% of participants were non-adherent to the interventions. In multivariable regression analysis, participants who forgot to take their iron tables on most days (AOR = 2.35; 95% CI: 1.23-4.48) and those who reported that not enough time was spent on education and counselling during antenatal clinic visits (AOR= 3.87; 95% CI:1.08-13.84) were more likely to be non-adherent to iron deficiency interventions. The majority of pregnant women in Ubungo Municipality were non-adherent to iron deficiency interventions. Non-adherence was associated with a tendency to forget to take iron tablets and a lack of enough time to provide health education and counselling. Improving the quality of health education and counselling could increase adherence to iron deficiency interventions.

**Keywords:** Iron; Adherence; Anaemia; Tablets; Foods.