Iron deficiency anemia is the most widespread nutritional problem among women with severe consequences for their reproductive roles. Iron supplementation is a major strategy to reduce iron deficiency anemia in pregnancy. However, issues of adherence remain unresolved. According to the National Policy in Kenya, pregnant women should be supplemented with 60mg/day for Iron and 400 µg of folic acid daily. In Kenya, however, adherence to the intake of the supplements has been very low with only 2.5% of pregnant women taking iron supplements > 90 days of the recommended 180 days. The concept of how best to assist women to adhere to a daily regimen of supplement consumption is not fully understood.

The study examined the current situation on adherence to iron-folate supplementation by pregnant women. Two hundred pregnant women attending antenatal clinic were selected through systematic random sampling to participate in the study. Quantitative and qualitative data was collected on adherence rate and factors hindering and those associated with adherence to iron and folate supplements. Results showed that adherence rate was 24.5% (n=49; 95% CI: 18.5-30.5). Significant associations were found between adherence to iron and folate supplements and pregnancy trimester (p=0.01), history of low hemoglobin level in current pregnancy (p=0.00), knowledge on anemia (p=0.00) and number of antenatal clinic visits (p=0.00). The qualitative data showed that women lacked knowledge on anemia and were ignorant on need to take the supplements. Adherence rate to iron/folate supplements was low with lack of information influencing adherence and sensitization of women recommended.