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942

### 1 Teachers and Health Staffs Experience in Delivering Weekly Iron-Folic Acid (WIFA) Supplementation at School in East Java and East Nusa Tenggara, Indonesia

Ikeu Ekayanti<sup>a</sup>, Annisa Utami Seminar<sup>b</sup>, Dodik Briawan<sup>a</sup>, Ali Khomsan<sup>a</sup>, Mira Dewi<sup>a</sup>, Mardewi<sup>c</sup>, Manoj Kumar Raut<sup>d</sup>, Abanti Zakaria<sup>e</sup>, Marion Leslie Roche<sup>e</sup>

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**Keywords:** Adolescent girls · Anemia · Iron and folic acid · Program evaluation

**Background/Aims:** Indonesia Ministry of Health has targeted an increased supply of WIFA Supplementation program to school going adolescent girls gradually from 10% in 2015 to 30% in 2019. This study aimed to evaluate the delivery of WIFA Supplementation at Primary Health Center (*Puskesmas*) and school level in 20 districts. **Methods:** Focused group discussions (FGDs) with teachers (n = 66) and public health center staffs (n = 83) and in-depth interviews (IDIs) with teachers (n = 11) and public health center staffs (n = 11) from 60 schools and 20 public health centers in 2 provinces were conducted. The study was conducted in 10 districts, each from East Java and East Nusa Tenggara provinces. The teachers and health staffs were chosen purposively to explore the implementation of WIFA delivery. All FGDs and IDIs were audio-recorded, transcribed verbatim, and analyzed for key themes relating to awareness using NVivo Pro 12. **Results:** The experience of health staffs and teachers involved in delivering IFA described the lack of a guidebook for delivering WIFAS in these districts. The lack of access to a guide for implementation was associated with not only limited knowledge and about anemia and WIFAS, but also lack of awareness of how to plan, monitor, and report the WIFAS intervention. **Conclusion:** Capacity building and awareness of detailed IFA delivery management is needed for both Primary Health Center staffs and teachers, with an expressed need for a guidebook.

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### Microplastic Intake via Shellfish Consumption and Its Potential Risks to Human Health

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**Keywords:** Microplastic intake · Shellfish · Dietary study

**Background/Aims:** Microplastic contamination in marine environment and seafood has raised global concern on the human health impact. The possibility of microplastic ingested by human

is very likely to occur via consumption of seafood that is eaten whole, such as shellfish. However, the risks of microplastic on human health are still under investigation. The aims of this study was to assess shellfish consumption of Semarang inhabitants and to determine their microplastic intake via shellfish consumption. **Methods:** Multistage random sampling method was used to determine the respondents from districts until neighborhood level. In total there were 500 respondents invited to participate in this study. The respondents were classified based on four age groups, i.e. children (0–9 years), adolescent (10–19 years), adults (20–59 years), and elderly people (60–>75 years). The daily intake of shellfish of Semarang inhabitants was obtained from FFQ and recall diet. The concentrations of microplastics were obtained from a microscopic technique following a series of alkaline digestion and filtration. To estimate the microplastic intake, the daily intake of shellfish was multiplied by the average concentration of microplastics found in shellfish collected from Semarang.

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### Determinants of Healthy Breakfast Quality in Elementary School Children in Rural and Urban Areas of Timor Island, East Nusa Tenggara Province

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**Keywords:** Healthy breakfast · Elementary school children (SD) · Income level · Eating habits · Education level

**Background/Aims:** Breakfast is a source of energy for school children for activities and learning at school. **Methods:** This study used the cross sectional study design with the aim to determine the factors associated with the formation of the quality of healthy breakfast of elementary school children in rural and urban areas of Timor Island, East Nusa Tenggara Province. The total number of samples was 700 students who were in grade 5 (five) elementary schools where each region (rural and urban) was 350 elementary school students. Data were analyzed in univariate, bivariate and multivariate. **Results:** About 16% of school children in the Kupang City Region and 24% of school children in Malaka District had unhealthy breakfast habits or no breakfast at all. More than 60% of school children in both areas have poor breakfast quality. Factors associated with healthy breakfast quality were education of parents (p < 0.05; OR = 3.45), type of work that takes longer duration outside the home (p < 0.05; OR = 1.05), level of family income (p < 0.05; OR = 3.40), and eating habits (p < 0.05; OR = 2.01). **Conclusion:** Factors associated with the quality of healthy breakfasts in rural and urban areas were education, type of work and income of parents and eating habits.

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