

Quality of nutritional care during pregnancy: folic acid and vitamin supplementation

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Backgrounds: Folic acid (FA) and vitamin D supplementation is recommended during pregnancy. Quality nutritional care during pregnancy should include the supplementation of these vitamins. Therefore, the aim of this study was to assess the quality of nutritional care regarding supplementation during pregnancy in primary health care units in six states of Mexico (Estado de México, Oaxaca, Yucatán, Chihuahua, Veracruz and Chiapas).

Methods: A mixed study was conducted. An indicator (formed by two sub-indicators) to assess the quality of nutritional care focused on FA and vitamin D supplementation in pregnancy was developed and validated. To assess the quality of care, a sample of 97 health units (HUs) was estimated considering the total number of HUs in the selected states. To ensure the representativeness of the following strata: rurality, care for the indigenous population, and size of the HU; at least one unit was assigned to each stratum by simple random sampling. A trained team performed a random sample of 30 pregnancy clinical records in each HU; the records and the nutritional control cards were reviewed to assess whether the recommendations of the indicator were met. The percentage of compliance with the indicator was estimated. It was considered that an evaluated record complied with the indicator if it complied with its two sub-indicators. A traffic light system was used to present the results: good quality was considered as green (compliance $\geq 90\%$); poor quality as yellow (compliance 71% - 89%) and bad quality as red (compliance $\leq 70\%$). In addition, semi-structured interviews were conducted with health professionals and an observation guide was applied in health units.

Results: A total of 95 HU were assessed. Of the 794 cases evaluated, only one met the two sub-indicators. A bad quality of nutritional care focused on supplementation during pregnancy was observed in the six states and in all HUs. It was identified that most HUs did not have a nutritionist and doctors and nurses recognized that they did not have the knowledge to give nutritional recommendations.

Conclusions: It is necessary to implement actions aimed at improving the capacities of health professionals regarding the quality of nutritional care.