# Pre-Pregnancy Daily Folic Acid Use in San Bernardino County

March 2023

## Why is Pre-pregnancy Daily Folic Acid Use Important?

Pre-pregnancy daily folic acid use is defined as taking a multivitamin, prenatal vitamin, or folic acid vitamin every day of the week during the month before pregnancy.

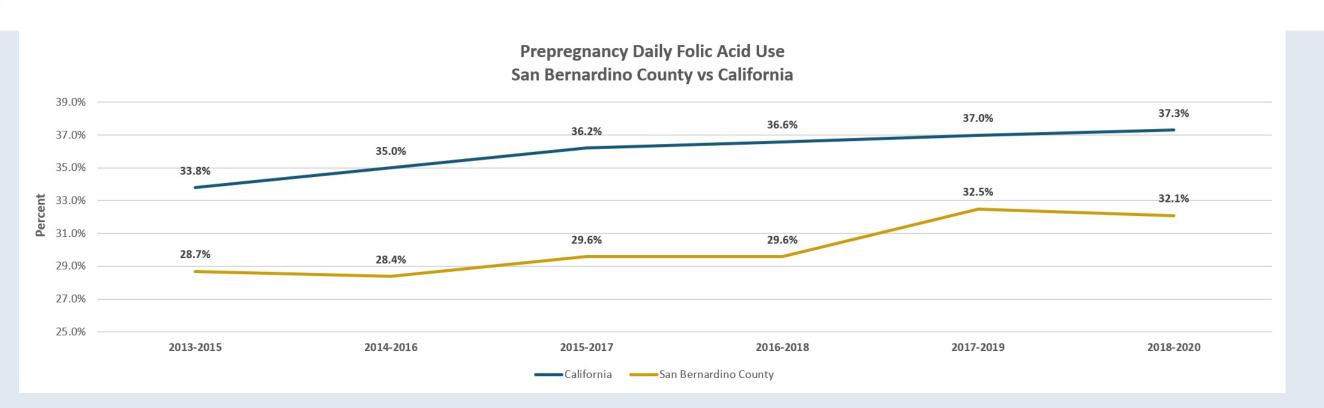
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According to the California Department of Public Health, "Daily folic acid consumption before pregnancy is very important for the prevention of neural tube defects, which are serious defects of the brain, spine or spinal cord; examples include spina bifida and anencephaly. Folic acid is a B-vitamin that is necessary for healthy cell growth. Early in pregnancy, folic acid helps form the neural tube, which later develops into the spine and brain. Studies have shown that up to 70% of all neural tube birth defects can be prevented when people capable of becoming pregnant consume 400 micrograms of folic acid prior to conception. Most daily vitamins sold in the United States have the recommended daily amount of folic acid needed for the prevention of neural tube defects." <sup>1</sup>

**Pre-pregnancy Daily Folic Acid Use (2018-2020)** 

32.1%
San Bernardino County

37.3%
California



# Pre-Pregnancy Daily Folic Acid Use by Race/Ethnicity

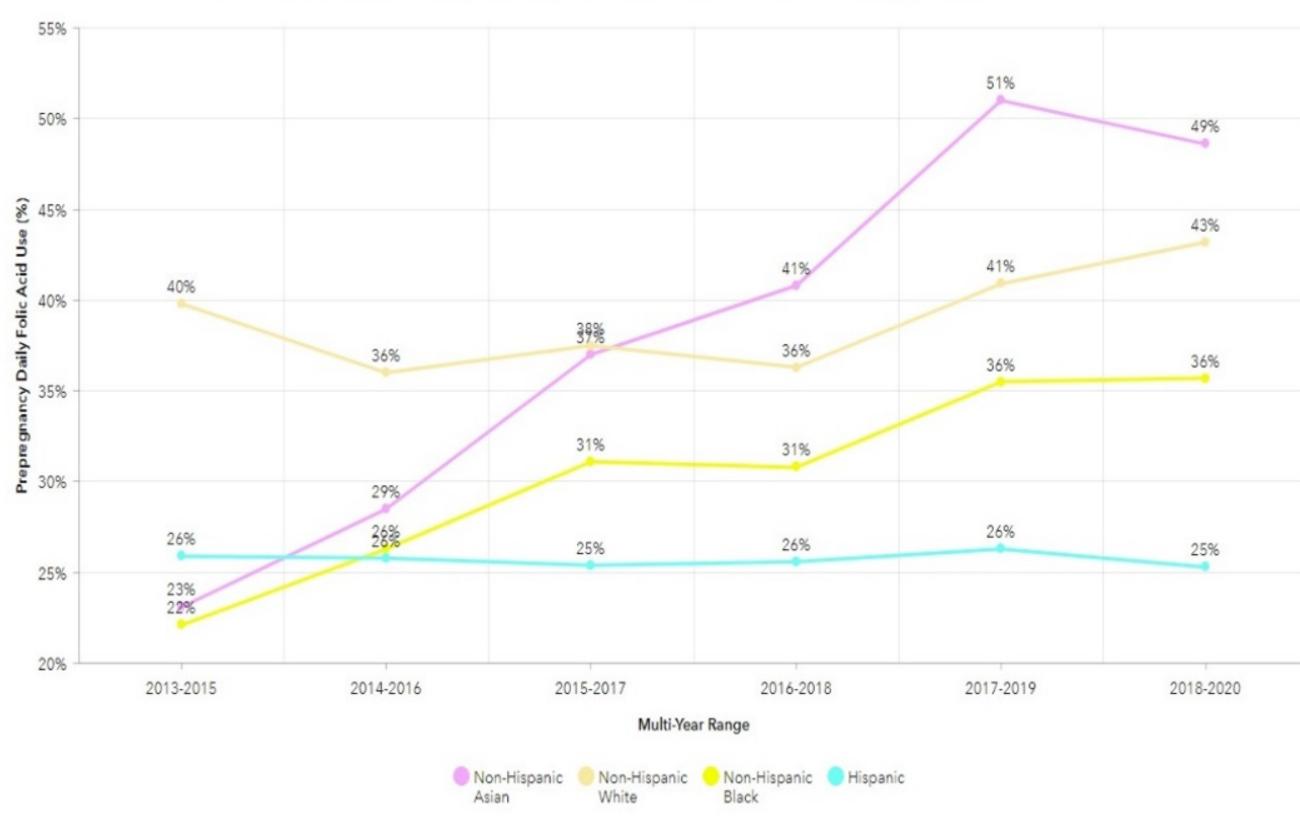
Estimated Percentage of mothers /parents giving birth that took pre-pregnancy daily folic acid by Race/Ethnicity (2018-2020)

25% Hispanic

36% Non-Hispanic Black

43%
Non-Hispanic White

49% Non-Hispanic Asian Prepregnancy Daily Folic Acid Use by Race/Ethnicity
San Bernardino County Resident Mothers / Parents Giving Birth, 2013-2020



## In San Bernardino County:

- Between 2015 and 2020, the estimated percentage of pre-pregnancy daily folic acid use was lowest amongst Hispanic mothers/parents giving birth, with a range between 25-26%.
- Between 2018 and 2020, pre-pregnancy daily folic acid use varied by race/ethnicity, with an estimated 49% of Non-Hispanic Asian mothers taking prepregnancy daily folic acid, compared to 43% of Non-Hispanic White mothers, 36% of Non-Hispanic Black mothers, and 25% of Hispanic mothers.
- Between 2013 and 2020, pre-pregnancy daily folic acid use increased an estimated 113% amongst Non-Hispanic Asian mothers/parents giving birth, 64% amongst Non-Hispanic Black mothers/parents giving birth, and 8% amongst Non-Hispanic White mothers/parents giving birth, while decreasing nearly 4% amongst Hispanic mothers/parents giving birth.1

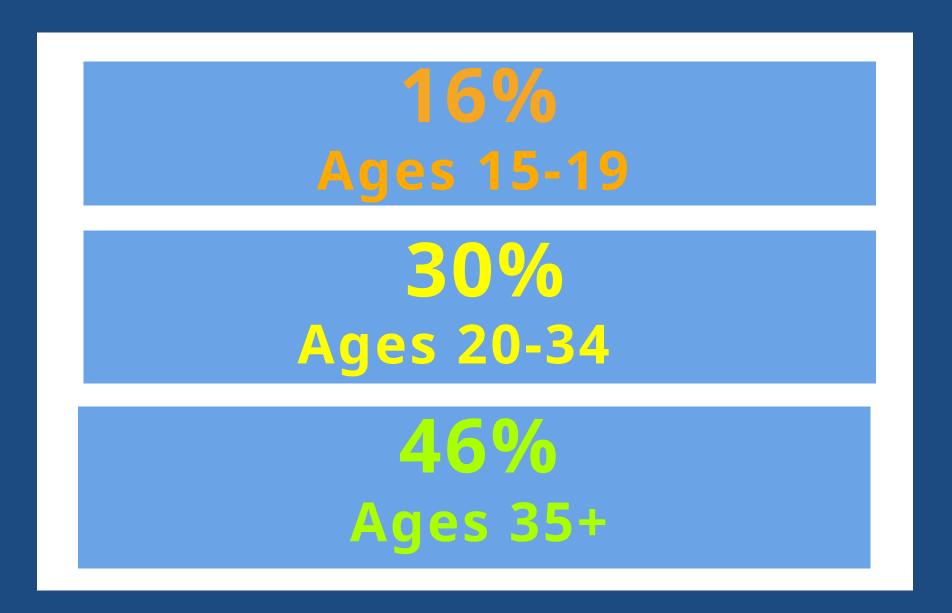


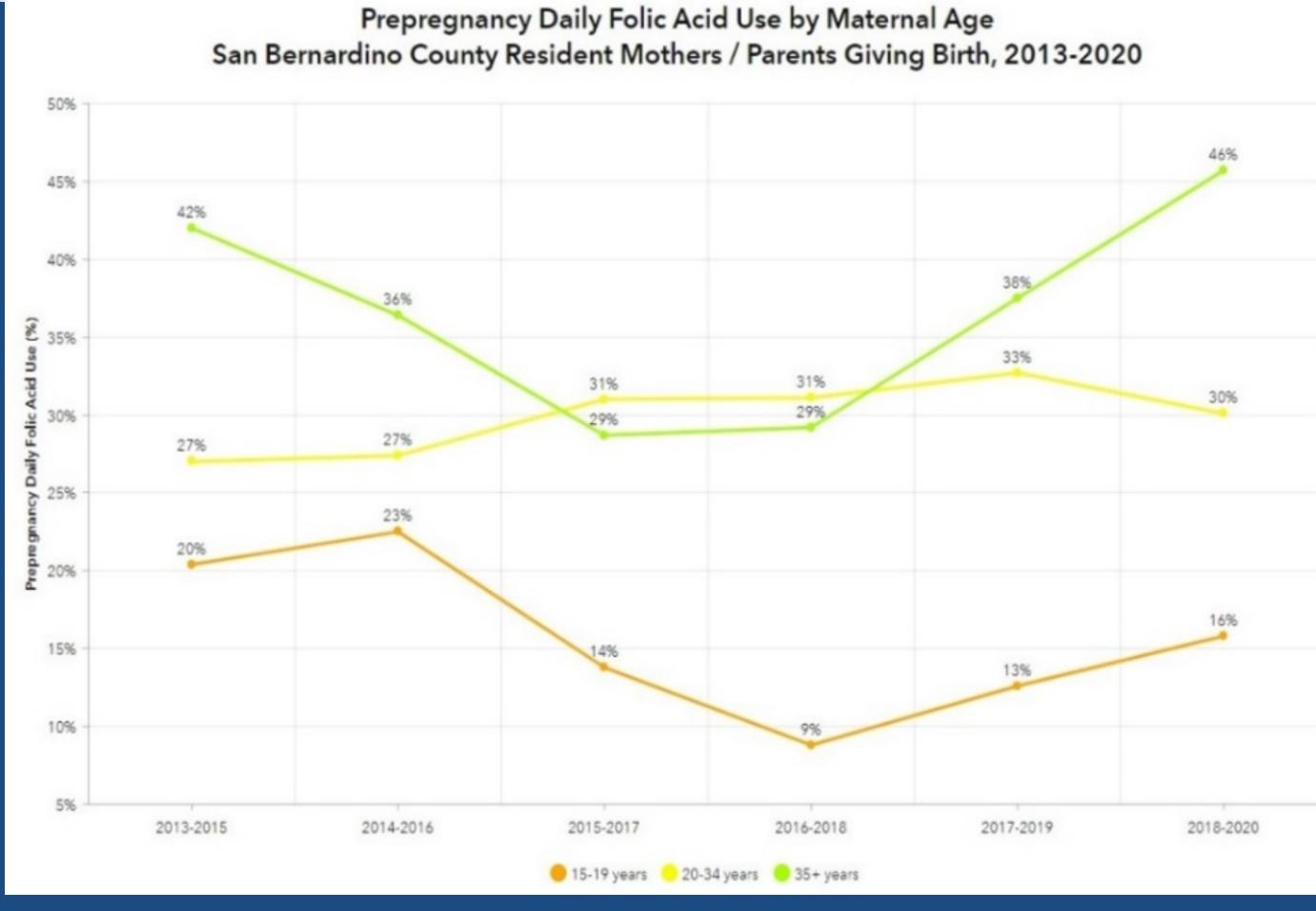
To learn more about San Bernardino County Maternal, Child & Adolescent Health Services, scan the QR code with your mobile device.



# Pre-Pregnancy Daily Folic Acid Use by Maternal Age

Estimated percentage of mothers/parents giving birth that took pre-pregnancy daily folic acid by Age (2018-2020)





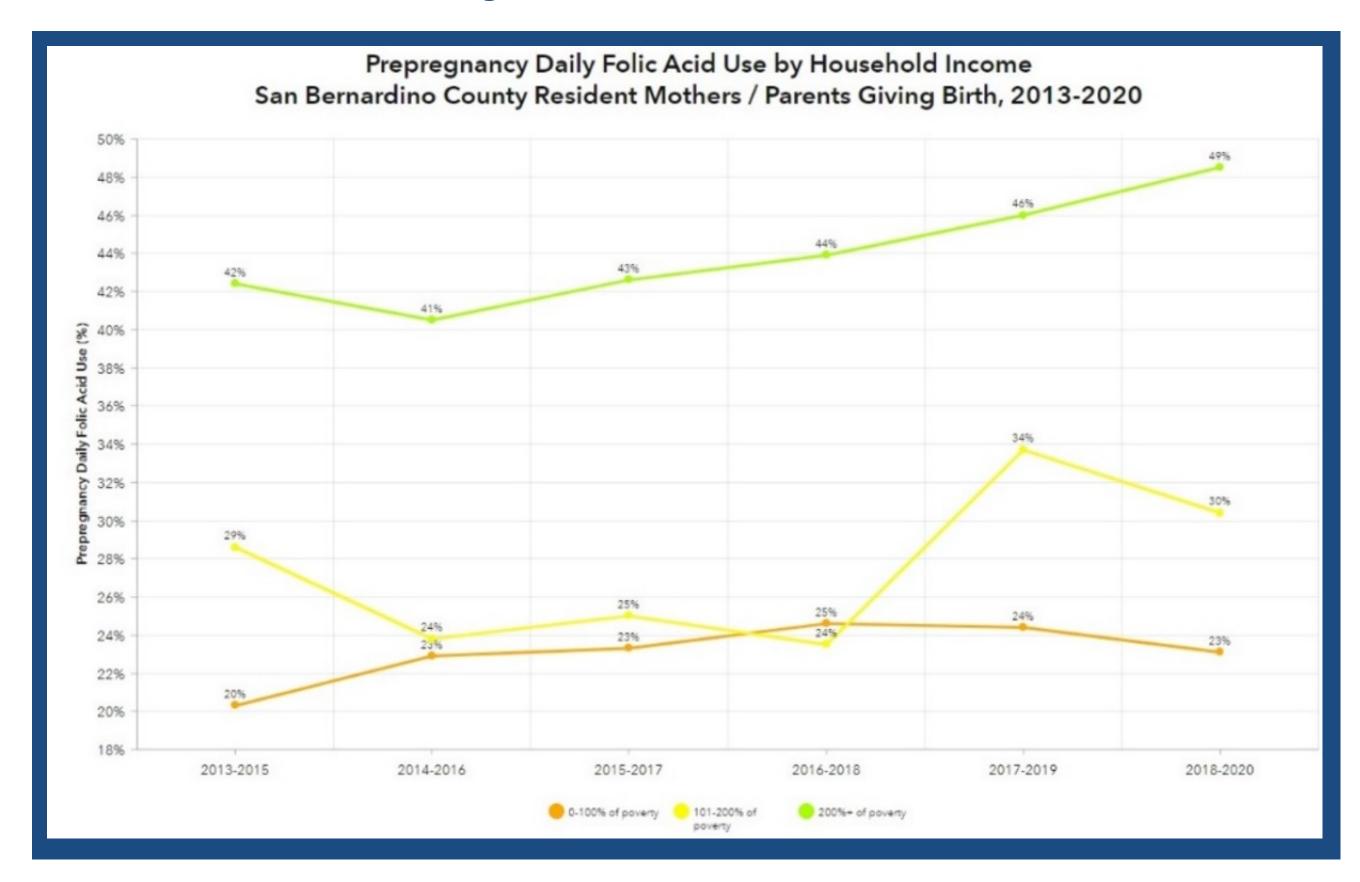
#### In San Bernardino County:

- Between 2013 and 2020, teenage mothers/parents giving birth between ages 15-19 have the lowest estimated percentage of pre-pregnancy daily folic acid use.
- Between 2013 and 2020, Pre-pregnancy daily folic acid use decreased an estimated 20% amongst teenage mothers/parents giving birth, while
  increasing 11% amongst mothers/parents giving birth between ages 20-34 years of age, and increasing 10% amongst mothers/parents giving birth
  ages 35 and older.1

# Pre-Pregnancy Daily Folic Acid Use by Household Income

Estimated Percentage of mothers /parents giving birth that took pre-pregnancy daily folic by Household Income (2018-2020)

23% 0-100% of Poverty 30% 101-200% of Poverty 49% 200%+ of Poverty



### In San Bernardino County:

- Between 2018-2020, mothers/parents giving birth living in poverty with a household income between 0-100% of the Federal Poverty Guideline (FPG) have the lowest estimated percentage of pre-pregnancy daily folic acid use.
- The estimated percentage of mothers/parents giving birth with a household income between 0-100% of the FPG that took pre-pregnancy daily folic acid has remained nearly unchanged since 2013, increasing only 15%, while this percentage has increased only 3% for mothers/parents giving birth with a household income between 101-200% of the FPG, and 17% for mothers/parents giving birth with a household income of 200%+ FPG (2013-2015 to 2018-2020).1



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