Healthcare Practitioner Use of Nutrition-Related Resources

Caroline Kennedy, Cassandra Snow, Emily Riddle, PhD, RD
Department of Human Ecology, SUNY Oneonta, Oneonta, NY, 13820

Abstract

Introduction: Healthcare practitioners should regularly use evidence-based resources to inform ethical health care practice decisions. In nutrition, lack of consistent use of evidence-based resources is likely to lead to differences in messaging among healthcare professionals and subsequent increases in public confusion and mistrust in nutritional science. The frequency with which registered dietitians (RDNs) and non-RDN practitioners use evidence-based resources when providing patient care is unknown. In addition, the confidence and trust RDNs and non-RDNs have in the nutrition-related resources they use is unknown.

Objectives: 1) To determine the confidence RDNs and non-RDNs have in their ability to find and use evidence-based resources, 2) to determine the level of trust RDNs and non-RDNs have in the sources of nutrition information they use, 3) to compare the nutrition-related resources RDNs and non-RDNs use when providing nutrition education to patients/clients.

Methods: An exploratory, online, cross-sectional study was conducted with a convenience sample of 91 practitioners. The 15-question survey was tested for face validity. Recruitment occurred via email and through local and state-wide professional organization list-serves. Differences in resources used, confidence, and trust between RDNs and non-RDNs were determined using Mann Whitney U tests (p<0.05) using SPSS.

Results: Fifty-one percent of respondents were RDNs and 46% of respondents were non-RDNs. RDNs felt significantly more confident than non-RDNs in their ability to find (p<0.01) and use (p<0.01) evidence-based information. There was no significant difference in the level of trust RDNs or non-RDNs had in the sources of nutrition information they use. More than 60% of RDNs and more than 70% of non-RDNs reported being unfamiliar with or never using multiple resources for evidence-based nutrition information.

Conclusion: The majority of RDNs and a third of non-RDNs felt a high level of confidence in their ability to find and provide evidence-based nutrition information. However, both RDNs and non-RDNs reported being unfamiliar with or never using multiple resources for evidence-based nutrition information. This study could be used to inform future education or continuing education of both RDNs and non-RDNs.

Limitations: The majority of RDNs and a third of non-RDNs felt a high level of confidence in their ability to find and provide evidence-based nutrition information. However, both RDNs and non-RDNs reported being unfamiliar with or never using multiple resources for evidence-based nutrition information.

Discussion: This is the first study to evaluate the confidence, trust, and use of evidence-based nutrition resources by RDNs and non-RDNs. RDNs seemed to have more confidence than non-RDNs in their ability to find and use evidence-based nutrition resources in order to provide nutrition care to patients. Despite reporting high confidence, the majority of RDNs were unfamiliar with or did not frequently use many resources for evidence-based nutrition information.

References