



Dietetics Around the World

The Newsletter for the International Confederation of Dietetic Associations

TENTH ISSUE - APRIL 1999

XIIIth International Congress of Dietetics

Edinburgh, Scotland
Global Health, Changing
Perspectives, Challenging
Our Role
ICDA planners call for abstracts

XIIIth International Congress of Dietetics
Global Health, Changing
Perspectives, Challenging Our Role
July 23-27, 2000

ICDA's XIIIth International Congress of Dietetics promises to be the highlight of the professional calendar in 2000. A stimulating scientific program is being planned, along with social events that offer the best of Scottish hospitality.

Consider delivering a short talk or a poster presentation outlining your area of work or research. The scientific committee would welcome abstracts on:

- the challenge of ethical issues in clinical dietetics, health promotion, food administration, industry, and media relations
- the impact of audit, research, and evaluation on dietetics practice and roles

Abstracts must be received by Sept. 30, 1999.

An announcement with program details and instructions for preparing abstracts are available from the Congress Secretariat, c/o Meeting Makers, Jordanhill Campus, 76 Southbrae Drive, Glasgow, G13 1PP, United Kingdom; phone 44 141 434 1500; fax 44 141 434 1519; e-mail dietetics@meetingmakers.co.uk.

Next newsletter deadline is July 2, 1999

The next issue of *Dietetics Around the World* will be published in October 1999. Deadline to submit articles is July 2. Member organizations are invited to send, fax, or e-mail articles on research, regulatory issues, international collaborations, nutrition education projects, nutrition standards, management issues, new technologies, nutrition action plans, resources, and meeting announcements to: Pam Michael, The American Dietetic Association, 216 W. Jackson Blvd., Chicago, IL 60606-6995, USA; fax 1 312 899 0008; e-mail pmichae@eatright.org.

From Australia

Dietitians have a voice in food regulation

Sue Cassidy

*Professional Services Dietitian,
Dietitians Association of Australia*

The Australian New Zealand Food Authority (ANZFA) was established as a result of a 1995 treaty to develop a joint food standard for all Australian states and territories and New Zealand. The effectiveness of that arrangement is undergoing a review. Australian dietitians are contributing to the discussion of this and other food regulation issues.

Labeling of foods produced by gene technology

Australian and New Zealand health ministers have taken a conservative approach to this issue, requiring labeling of genetically modified food even where the food is substantially equivalent. ANZFA is drafting an amendment to the Food Standards Code that takes into account the need to label if the manufacturer knows the food contains genetically modified material or is uncertain about the food's contents. If uncertain, the manufacturer must indicate that the food may contain genetically modified material. If a product is known to be free of genetically modified material, it may be so labeled.

Australian and New Zealand health ministers asked ANZFA to develop a definition of the term "genetically modified food," recognizing that many food ingredients such as sugars and oils can be made from genetically modified plants but are not themselves genetically modified. Further information on this topic is available on the ANZFA Web site: www.anzfa.gov.au.

Folate/neural tube defect health claims pilot

In November 1998, as part of a pilot project, the use of a folate/neural tube defect health claim on foods approved by ANZFA became legal. A range of processed and fresh foods are allowed to carry this claim. To qualify for approval, foods must contain at least 40 micrograms of folate per serving. Foods that are not primary foods must not contain more than 14g fat, 5g saturated fat, 500 mg sodium, or 10g in total of added sugars or honey per serving. The pilot is a first for Australia, where health claims have not been permitted on food labels or in advertising. A committee has been formed to manage compliance and enforcement issues. A monitoring and evaluation strategy focusing on sociocultural factors, changes in the food supply, and management processes also is planned. Various promotional and educational campaigns will support the project.

Survey results published

- The Australian Market Basket Survey monitors pesticide residues and contaminants in table-ready foods and estimates the public's dietary exposure to these chemicals. The survey is undertaken by the ANZFA in cooperation with state and territorial health authorities. Food is sampled during the year and across Australia to account for seasonal and regional variations.

The 1996 Market Basket Survey found that levels of pesticide residues and contaminants in the Australian food supply were well within the safety standards set by Australian and international health authorities.

For more information contact the publisher, Information Australia, 75 Flinders Lane, Melbourne Vic 3000; phone 613 9654 2800; fax 613 9650 5261; e-mail subs@infoaust.com.

- The final report from the 1995 National Nutrition Survey provides detailed information on the consumption of foods and beverages by Australians aged two years or more, based on intake during the day before the interview.

Findings indicate that Australians are moving towards a balanced and varied diet that includes most of the major food groups. The report recommends that Australians eat more fruit, vegetables, breads, cereals, fish, and milk products and fewer pastries, sticky buns, sweet biscuits, and fatty fast foods. The demographic breakdowns tell some interesting stories. A summary of the report is available at www.abs.gov.au.

From Denmark

Feeding the elderly: one municipality's experience

Betty Dfssing Nielsen

Leading Administrative Dietitian

Silkeborg Municipality

The responsibility for feeding the approximately 100,000 elderly people in Denmark who are no longer self-reliant lies with the municipalities. Half of the elderly live in nursing homes, and half live at home. Denmark offers self-contained homes for the elderly, elder centers with cafés where pensioners can purchase food, and Meals on Wheels. Each municipality determines how much of the community meal service it will subsidize, so costs to the individual differ among municipalities.

Silkeborg's approach

The purpose of the community meal service in the municipality of Silkeborg is to prevent illness among the elderly by ensuring that citizens living in nursing homes and in their own homes receive nutritious, balanced meals and adequate liquid. In relation to illness, diet is part of the treatment, and the work is multidisciplinary in nature.

At our nursing homes, we prepare, serve, and clear away breakfast, lunch, dinner, and coffee in the morning and afternoon. We sell hot dinners from the cafés in the nursing centers, and we prepare and serve meals for meetings. Meals in a nursing home cost the individual 1,925DKK per month in Silkeborg, and the monthly pension is 7,900 DKK. (6.48 kroner per U.S. dollar as of 3/25/99.)

For many elderly, mealtime is the highlight of the day. Eating in bright, cheery rooms and being served by kind, caring staff are as important to the well-being of the elderly as the food. Silkeborg's nursing facilities celebrate holidays and include

relatives to maintain shared traditions.

The Silkeborg community meal service has developed several quality targets.

- The service should meet the official Danish recommendations for food in institutions on at least 90% of the days.
- Menu planning should be based on the needs of the users.
- The food should be tasty, tender, appealing-looking, and served at the appropriate temperature.
- At least 90% of the consumers should be satisfied.
- 90% of the users living at home should receive their food within one-half hour of the promised delivery time.

A yearly survey questionnaire will be distributed to a representative sample of clients, and meals will be sample tested for one week every three months to see if they meet official recommendations for institutions.

Excerpted from a workshop that will be presented at the European Federation of the Associations of Dietitians forum in Delphi, Greece in June.

From India

Highlights from the XXXIst National Conference

Dr. Varsha

Country Representative

Indian Dietetic Association

The Andhra Pradesh Chapter of the Indian Dietetic Association hosted more than 400 dietitians from India and Sri Lanka at the XXXIst Annual National Conference, held Dec. 16-17, 1998.

A featured speaker on opening day was Dr. Kalyan Bagchi, director, Nutrition Syndicate, New Delhi, who delivered the A.K. Bose Memorial Lecture on the nutritional implications of socioeconomic transitions in India. Also on the day's agenda were sessions on palm oil and cancer, palm oil in experimental atherosclerosis, and the use of palm oil to meet the nutritional needs of the Indian population. Young scientists competed for various awards.

The second day featured lectures on the effects of beta-carotene, iron, and iodine-fortified biscuit on micronutrient status; growth, cognitive function, and morbidity in primary school children; global undernutrition; and the psychological aspects of obesity. Papers were presented for the A.K. Bose Memorial and Kellogg awards.

Dr. B.S. Narasinga Rao, former director of the National Institute of Nutrition, Hyderabad, received the first Kellogg Oration Gold Medal for his work in the area of anemia.

Industry partnership

Following up on last year's conference theme of integrating clinical, community, and commercial nutrition, the Indian Dietetic Association and Kellogg of India launched a nationwide public service initiative to increase awareness of iron deficiency anemia. Commenting on the partnership, Dr. Molly Joshi, president of the Indian Dietetic Association, said, "IDA is formulating guidelines such that, within the Code of Ethics, the association and its members will collaborate with nutraceuticals to provide sufficient information to enable the community to make informed decisions; to support nutritional products; and to monitor related communications."

From Japan

Survey shows that Japanese youngsters are missing breakfast

Teiji Nakamura

Director, International Division

Japan Dietetic Association

Japan conducts a National Nutrition Survey every year in accordance with the Nutrition Improvement Law. The results of the 1997 survey are in line with dietary trends that have emerged in the past few years.

We are seeing a decrease in carbohydrate intake, an increase in fat intake, and insufficient calcium intake. People in Japan are eating less boiled rice and more high-fat side dishes as a result of Western influences in the diet.

Eating habits were also surveyed. Findings showed that 45% of males and 28% of females in their twenties miss breakfast more than 2 to 3 times a week. One in three youngsters has acquired this habit before entering senior high school.

Subjects who missed breakfast also scored higher in certain behaviors concerning the evening meal. They tend to eat at irregular times, eat salty or fried foods, often eat snacks, do not eat vegetables, and omit staple foods. These eating habits are prevalent among obese persons. The evening meal time is generally later than it was in 1985.

With these alarming dietary trends, nutrition education will become increasingly important in Japan.

From Korea

2nd Asian Congress draws record attendance

Rho, Sooknyung, PhD

Korean Dietetic Association

The 2nd Asian Congress of Dietetics, hosted by the Korean Dietetic Association, was held in Seoul Aug. 9-12, 1998, under the theme of Networks and New Ventures for

Asian Dietetics. More than 2,500 participants from 12 countries in Asia, the Pacific, Europe, and North America took part, making the Congress the biggest gathering of Asian dietitians to date.

The scientific program consisted of 10 plenary lectures, 6 workshops, and 18 symposia with 58 lectures. Nearly 200 papers were presented on clinical nutrition and practice, community nutrition and public health, education and training, nutrition-related regulation and policy, food science and technology, foodservice management, nutrition sciences, and quality improvement. About 50 companies participated in a trade show exhibition to showcase the latest advances in food technology and equipment.

The Asian Federation of Dietetic Associations (AFDA) and the Asia-Pacific Institutional Network on Education in Dietetics and Food Service Systems (APINET-EDFS) held business meetings during the Congress.

- AFDA representatives discussed the group's constitution and logo and crafted the Seoul Declaration in relation to the Congress theme. Eunkyung Suh, chair of the 2nd Asian Congress organizing committee, was elected president of AFDA.
- At the APINET-EDFS meeting, Dr. Hyun Kyung Moon, secretary-general of the 2nd Asian Congress organizing committee, was elected the group's chairperson.

Representatives of the AFDA member nations signed the Seoul Declaration at the closing ceremony of the Congress. Looking toward the 21st century, they pledged to collaborate through regional networks to enhance delivery of nutrition services and meet new environmental challenges.

From the Netherlands

Changes in treatment of hypercholesterolemia

Ellen Govers

Board Member

Nederlandse Vereniging van Dietisten

Dutch Association of Dietitians

In the Netherlands, patients with hypercholesterolemia are treated according to consensus. Cholesterol consensus has been thoroughly revised in light of recent scientific studies. The April 1998 revision outlines major changes in the treatment of hypercholesterolemia:

- Treatment is especially important if other risk factors are present, such as overweight (BMI ≥ 25 kg/m²), diabetes, myocardial infarction, hypertension, smoking, or hereditary hyperlipidemia.
- If hypercholesterolemia is the only risk factor, the guidelines on healthy food are recommended, with 10% of energy from saturated fat and total fat not more than 30% of the diet.
- Weight reduction is recommended when BMI is over 25 kg/m².

- With additional risk factors, as mentioned above, diet counseling is advised.
- Advice on fatty fish has been changed to consumption twice a week.

The Dutch Association of Dietitians has organized several meetings to inform its members of these new approaches.

Working with physicians

Physicians still choose to prescribe medication for many patients with hypercholesterolemia instead of offering dietary counseling. The Dutch Association of Dietitians is trying to strengthen its members' role in the treatment of this condition by giving them the tools to approach physicians.

From the Philippines

Governmental and nongovernmental organizations team up to improve nutrition

Maria Bernardita T. Flores
Deputy Director
National Nutrition Council

Helen Keller International (HKI) is a private volunteer organization founded in 1913 by Helen Keller to build local capability to prevent avoidable blindness and to offer services for the blind. In 1978 it began operation in the Philippines, where it eventually became involved in public health nutrition.

The vitamin A partnership between HKI and the Department of Health began in the late 1980s with a project on vitamin A supplementation and nutrition education interventions (the VITEX project). The first phase of the project catalyzed a Department of Health policy on vitamin A supplementation, the development and approval of a national five-year plan for the prevention and control of vitamin A deficiency, and the testing of a system for dispensing vitamin A capsules and nutrition education.

The project was eventually expanded to three additional provinces. HKI helped to design, and evaluate two intervention models. One was for vitamin A supplementation of xerophthalmia for high-risk children and post-partum mothers; another was for nutrition education to improve dietary practices among mothers of weaning infants.

Lessons learned

HKI and the Department of Health Nutrition Service co-authored several studies documenting the processes and lessons learned.

- Weight-for-age status, infant feeding practices, and participation in nutrition education: VITEX baseline survey, 1991. This study provided the baseline measure before the vitamin A supplementation and nutrition education components of the VITEX project were implemented.

- Infant feeding beliefs and practices among mothers in selected provinces in the Philippines. Results of this study were used to design community-based nutrition education programs and client materials.
- Infant feeding education: a shift in paradigm. This paper documents the processes used to design and implement the nutrition education component of the VITEX project.
- Process monitoring: use of the Weaning Moments Learning Package. This paper describes how use of the learning package was monitored.
- Evaluation of the impact of an infant feeding intervention on maternal knowledge, infant feeding behavior, and infant growth: preliminary analysis. This study demonstrates that the VITEX nutrition education project improved mothers' knowledge of infant feeding and helped change their feeding behavior.

The VITEX project provided a model for designing, implementing, monitoring, and evaluating a nutrition education program. The project veered away from traditional approaches and showed how innovative tools such as counseling cards and comics can be used in various settings. It also generated in-depth information on infant feeding practices and maternal communication.

The 1993-98 Philippine Plan of Action for Nutrition emphasized counseling as a strategy for nutrition education, but there have been very few documented experiences with effective nutrition counseling. The VITEX project filled this void.

The lessons learned from VITEX were applied in managing the Child Growth Project, which focused not only on infant feeding, but on the broader concern of growth promotion. VITEX and other nutrition education efforts are being reviewed to invigorate the 1999-2004 Philippine Plan of Action for Nutrition.

From South Africa

ADSA's Nutrition Education Campaign for 1999-2001

Karen Charlton

Association for Dietetics in South Africa (ADSA)

South Africa bears a double burden of disease. On the one hand, chronic diseases are prevalent among adults. It is estimated that 57% of South African adults have at least one chronic disease risk factor that requires lifestyle modification. On the other hand, children are hindered by poverty and undernutrition. An estimated 20-25% of preschool children and at least 20% of primary school children are stunted and therefore suffer from chronic undernutrition.

Nutrition education is urgently needed on a national level to improve the nutritional status and food choices of South Africans, young and old. In such a culturally diverse "rainbow nation," any nutrition education campaign needs to be flexible and

appropriate to populations of differing socioeconomic and educational levels. Nutrition education campaigns should also challenge South Africans to take responsibility for their food and nutrition habits.

Association adopts a national nutrition theme

Up until now, the Association for Dietetics in South Africa (ADSA) did not have a national theme for its public education campaigns. As a result, public relations activities during National Nutrition Week, which we celebrate in October, have failed to provide a consistent, visible public message.

In August 1998, the South African Sugar Association sponsored a workshop in Durban with ADSA's public relations officers to develop strategies for nutrition education. Participants adopted a theme for the next three years to emphasize the role of nutrition in a healthy lifestyle and to ensure a consistent, wide-reaching public message.

The theme needed to be flexible enough to communicate nutrition recommendations and dietary guidelines as a framework that can be personalized to an individual's food preferences, nutritional needs, health status, and lifestyle. All Foods Can Fit was rated the most appropriate umbrella slogan. Culturally sensitive educational materials will be developed to meet two campaign objectives:

- To promote optimal nutritional status of South Africans through increased awareness of good dietary practices.
- To use all forms of media to educate people about healthy eating.

From Switzerland

Association supports members' interests

Sandra Voland Oliveira

President

Schweizerischer Verband diplomierter ErnährungsberaterInnen

Swiss Dietitians' Association

The Swiss Dietitians' Association was founded in 1942 and is an independent association within the Swiss Health Association. Its goal is to maintain and promote the professional and economic interests of its 800 members by:

- Keeping members up-to-date on dietary and nutrition issues.
- Endorsing regular training.
- Collaborating with dietitian education centers.
- Ensuring members' professional and economic interests with employers, institutions, other associations and professions, and the public.
- Promoting cooperation with national and international institutions having the same interests.
- Recognizing opportunities to provide nutrition instruction.

Members are divided among employees in clinics (57%), industry (13%), public advice centers (11%), and training centers (13%), as well as freelance members (20% fully and partially self-employed). There is some overlap because many work in more than one field.

Members' main area of responsibility is providing advice on nutrition and clinical therapy. Hospital personnel are also active in nutritional organization and management. Training, research, and other duties (administration, creating advice documentation, fielding telephones, teaching) comprise a smaller part of all activities.

Current projects

The Swiss Dietitians' Association is currently involved in the following projects:

- educational policy/training and further education
- tariff policy/tariff discussions with cost unit groups
- public policy/public relations
- quality management systems for the association and profession

From The United States

Medical nutrition therapy protocols presented at World AIDS Conference

Eryn Ferdman, DTR

The American Dietetic Association

Quality Management & Research Team

About 13,000 people from around the world attended the 12th World AIDS Conference held in Geneva, Switzerland, June 28 to July 3, 1998. Titled Bridging the Gap, the meeting called together mental health workers, community and transmission specialists, as well as scientists and dedicated HIV clinicians. Several members of The American Dietetic Association (ADA) participated in panel discussions and poster sessions.

Linda Heller, MS, RD, CSP, from Children's Hospital Los Angeles, Children's AIDS Center, was part of a satellite symposium called the Next Generation of Care of HIV/AIDS Patients. She also delivered a poster session on recent research using anabolic therapy in children with HIV-associated wasting. "Anabolic therapies have been studied for the past several years in adults with AIDS wasting," Heller noted. "Like adults, children under certain circumstances seem to require more than nutrients to reverse the wasting process. Anabolic therapy in conjunction with medical nutrition therapy seems to provide just one more strategy to improve the nutritional status, the quality of life, and, possibly, the length of life for children infected with HIV/AIDS."

Included in the handouts for Heller's session was an advance copy of a medical nutrition therapy protocol for pediatric HIV/AIDS, which she and three other dietitians developed in conjunction with the Pediatric Nutrition and HIV/AIDS dietetic

practice groups of The American Dietetic Association. This protocol is now contained in ADA and Morrison Health Care's *Medical Nutrition Therapy Across the Continuum of Care, 2d ed.*

Marcy Fenton, MS, RD, of AIDS Project Los Angeles, participated in a satellite symposium on wasting, metabolism, and altered body shape in HIV/AIDS. She was also one of four speakers on a panel on dietary considerations in people with HIV/AIDS. This program was co-sponsored by Tufts University School of Medicine, USA, and the National Institute on Drug Abuse.

Awards

Award recipient chronicles FoodLinks initiative

The 1998 Wimpfheimer- Guggenheim Fund for International Exchange in Nutrition, Dietetics, and Management Award was presented to Sal J. Attanasio, RD, clinical dietitian, for an innovative private industry project to enhance nutritional well-being within a developing country.

Attanasio received \$1,000 for his essay titled "FoodLinks." He learned of FoodLinks through his internship with the Washington, D.C., office of the International Fund for Agricultural Development, which provided technical assistance to FoodLinks' ventures in the past. He offered his nutrition expertise to the project on a consultant basis.

The essay details the efforts made by the Canada-based International Development Research Centre's (IDRC) FoodLinks program to promote trade between industrialized and developing countries. FoodLinks provides developing countries with the tools and technology to increase product quality, which, in turn, helps to alleviate the poverty and lack of economic opportunity that underlie food insecurity.

FoodLinks' mission is to create partnerships among food producers, processors, and marketers in developing countries and highly developed or industrialized countries through "the provision of commercial liaison and project management services, training, and research support, leading to increased capacity, employment, and incomes for developing countries in a sustainable and equitable manner."

Under the direction of project coordinator William Edwardson, FoodLinks seeks to improve poor growers' abilities to assess market demand for agricultural goods and capitalize on new export markets. It also strives to increase poor growers' access to more profitable, value-added food processing technologies. FoodLinks garners financial and technical support from a variety of donors and coordinates activities with many partners to share the most beneficial practices at the local regional, and international levels.

Since its inception in 1996, FoodLinks has:

- Launched its first product venture, an undertaking to benefit Costa Rican growers. Their bananas are now sold by a major Canadian supermarket chain.

- Successfully marketed a value-added cashew juice processing technology developed with IDRC support in Vietnam. A Canadian juice company has adopted the technology and Vietnamese growers benefit from added income.
- Promoted agricultural research alliances to share knowledge about optimal crop use, reduction of losses, market opportunities, and incentives for farmers to adopt disease-resistant or drought-resistant crop varieties.
- Forged links with key development agencies to increase collaboration on issues of food security, alleviation of poverty, and public-private partnerships. FoodLinks is chiefly pursuing opportunities in Latin America and the Caribbean but is beginning to explore ventures in Asia and Africa.

The Wimpfheimer-Guggenheim Fund for International Exchange in Nutrition, Dietetics, and Management has given competitive essay awards to enhance the nutritional health of the world community since 1993.

Past winners

Consult the appropriate issue of the *Journal of The American Dietetic Association* for details of each of the international projects cited here.

1997: Bernadette Lucas, MS, RD

(*J Am Diet Assoc.* 1998;98:12)

1996: Ninfa Saturnino Springer, PhD, RD, FADA

(*J Am Diet Assoc.* 1997;97:11)

1995: William D. Evers, PhD, RD

(*J Am Diet Assoc.* 1996;96:225)

1994: Judith A. Beto, PhD, RD, FADA

(*J Am Diet Assoc.* 1995;95:164)

1993: Barbara N. Benson, MS, RD

(*J Am Diet Assoc.* 1994;94:719)

\$1,000 award for an innovative interdisciplinary team approach to solving nutritional problems in a developing country

The Wimpfheimer-Guggenheim Fund for International Exchange in Nutrition, Dietetics, and Management is offering a \$1,000 award for an essay by a professional dietitian/nutritionist. The essay must describe the applicant's innovative work or proposed work in cooperation with other health, social, or management professionals to raise the nutritional standard in a developing country with few dietitians/nutritionists. The nutrition professional participating in the program must be involved with team members of the developing country.

The author of the selected essay must submit it to the *Journal of The American Dietetic Association* for publication consideration. The specific, well-organized nutrition project described in the essay should reach a large segment of the population. It must be effective, practical, and attainable, and it should serve as a model with guidelines to be used in other developing countries.

All essays must reach The American Dietetic Association (ADA) Foundation by July 30, 1999, and should be between 5 and 7 typewritten pages, double spaced. The author of the selected essay will be required to submit a more detailed proposal to the ADA Foundation.

Address all award correspondence to the ADA Foundation, 216 W. Jackson Blvd., Chicago IL 60606-6995 USA. Attn: Linda Maraba.

Announcements

ICDA member updates

Association for Dietetics in South Africa

Fax: 27-31 886 7612

E-mail adsa@iafrica.com

Danish Dietetic Association

Okonomaforeningen

Fax: 45 3313 8240

Dietitians Association of Australia

Web site: www.daa.asn.au

Resources

- ***The American Dietetic Association Foundation Directory of Resources for International Food, Nutrition, and Dietetics Professionals, 2nd ed***
A reference for graduates in food, nutrition, or dietetics who are seeking funding for professional study or work experience in their home country or abroad. Text includes a listing of organizations offering financial assistance information and other resources for international students and professionals. To receive a free copy contact Linda Maraba, ADA Foundation, 216 W. Jackson Blvd., Chicago, IL 60606-6995 USA; e-mail lmaraaba@eatright.org.

Conference Calendar

June 17-19, 1999

8th European Nutrition Conference

Lillehammer, Norway

Sponsored by: Norwegian Nutrition Society, Federation of European Nutrition Societies, and European Academy of Nutritional Sciences

Contact: Lillehammer Arrangement P.O. Box 14

N-2601 Lillehammer, Norway

Phone: 47 61 251705

Fax: 47 61 256515

E-mail: lillarra@sn.no

Internet: www.nutrition.uio.no/nse/8thfens_eans

Sept. 21-24, 1999

Pacific Partners in Nutrition: Weighing the Evidence

Auckland, New Zealand

Sponsored by: Dietitians Association of Australia, New Zealand Dietetic Association,

Pacific Islands Nutritionists and Dietitians
Association, Nutrition Society of Australia, and Nutrition Society
of New Zealand
Contact: GTB Management
P.O. Box 9197
Newmarket,
Auckland, New Zealand
E-mail: gtb@ix.net.nz
Internet: www.nutridiet.org

Oct. 14-15, 1999

XXXII Annual Convention
Dietetics in the Next Millennium
New Delhi, India
Sponsored by: Indian Dietetic Association
Contact: D-II/21
All India Institute of Medical Sciences
Ansari Nagar West,
New Delhi 110029, India
Phone: 91 11 6593519 or 6594447
Fax: 91 11 6197743
E-mail: saro@medinst.ernet.in

Oct. 18-21, 1999

The Future Is Now-Dietetics 2000
Atlanta, Georgia, USA
Sponsored by: The American Dietetic Association
Contact: Meeting Services
216 W. Jackson Blvd.
Chicago, IL 60606-6995, USA
Phone: 1 312 899 4868
Fax: 1 312 899 0008
E-mail: mtgsinfo@eatright.org

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Please distribute this newsletter to your colleagues.

Encourage organizations in other countries to join ICDA. To apply for membership, contact: Marsha Sharp, ICDA Secretariat, Dietitians of Canada, 480 University Ave, Suite 604, Toronto, Ontario, M5G1V2, Canada; phone 416 596 0857; fax 416 596

0603; Web site www.dietitians.ca/icda.
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