

Dietetics Around the World

The Newsletter for the International Confederation of Dietetic Association



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- First International Nutritionist/Dietitian (FIND) Fellowship for Study in the USA
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ICDA Board of Directors

From the Chair of the ICDA Board of Directors

2013 – A time for planning our future

Happy New Year to you all. How fast time flies – it is now six months since the 16th ICD in Sydney and what a wonderful congress it was. It was a great pleasure to meet so many of you there and a very big thank you and congratulations to the Dietitians Association of Australia for hosting such a fantastic event. It is now time to look forward to the 17th Congress in Granada. It is also time for the work to start on the next four year cycle of the ICDA. The Board works to four year plans between our congresses. We are now going to move towards writing a plan with strategic activities for the 2012-2016 period. The Board has already met this year and we are already starting to work on the plan, basing it upon those ideas and activities that you, the members, told us you wanted us to include. We expect to be able to post the new plan around mid-year so look out for it!

Planning is important for many reasons – it frames the work we do, the way the money that member associations pay in fees is used and it has the potential to advance the profession. The important part is that the plans are real and concrete, yet flexible to ensure that we can make the most of any opportunities that arise. Frank Ogden, the Canadian futurist, stated “my idea of long range planning is lunch” (Ogdenisms: the Frank Ogden Quote Book, 1994) suggesting that when things are rapidly changing it is important not to plan too far ahead. So the Board plans for longer term outcomes but reviews the plan each meeting, so that it remains relevant and that new issues are not missed.

In this issue of the newsletter are summaries of the outcomes of the ICDA sponsored workshops at the ICD. The Board has grouped the ideas from these summaries under a number of headings to guide us in developing our plans – but the list is long indeed. The Board itself does not have the capacity in either time or ability to do all the things you want or implement all the ideas. That is why we need help. In 2010- 2012 we tried new systems to get help – through member associations taking on topics and tasks, supporting existing and known activities and by calling for individuals to help the Board directly on specific issues. This was very successful, so we plan to continue doing this. Please look out for calls for helpers and put your hand up if you can. There are many ways to help and the more helpers we have the easier the jobs become. Working for the international dietetics community brings its own rewards – new friends around the world and the knowledge that you have made a difference, so please consider this.

As we look forward to the 2012-2016 period, this is an exciting and a great time to be a dietetics professional – the environmental issues and climate change have the capacity to put our knowledge and skills into real focus and the rise of chronic diseases is already impacting services we provide. The ICDA has a critical role to play in the way these issues unfold for the profession globally.

A really big welcome to new representatives from Turkey. Mrs. Zehra Büyüktuncer DEMİREL and Dr. Dilek ONGAN have taken on international roles for the Turkish Dietetic Association. Congratulations and well done. We hope you find your role with ICDA rewarding.

Sandra Capra
Chair, Board of Directors, ICDA

Feature Articles

An Overview of the ICDA Workshops held at the ICD 2012 in Sydney

The ICDA Board of Directors sponsored and led 9 workshops (3 per day) at the ICD. This was the first time we attempted an ambitious plan. The workshops were one of the strategies the Board adopted to achieve our key result are of a strong network, by developing the networking and the collaborative action of the Congress.

The success of the workshops was certainly obvious with each one resulting in lively discussion of the issues. The outcomes of the workshops will provide a strong base for the next strategic plan of the ICDA. There was a general feeling that these should continue in some form as they provided a real forum for high level discussion of topics of interest to all dietetics professionals.

Given here are the recommendations from some of the ICDA workshops.

Evidence Based Dietetic Practice – from definition to implementation

1. Translate the definition and preamble into relevant languages and disseminate to member countries
2. Incorporate evidence-based dietetic practice definition and basic required skills into international training standards
3. Create a simple implementation framework that considers identified barriers
4. Facilitate partnerships and networks amongst member countries related to research and evidence based practice guidance
5. Foster sharing of best practices amongst member countries

Minimum standards for dietetics education and practice – towards a common goal around the world

1. Move from defining dietitian by the name as opposed to the role (based on a country basis). For example – in Pakistan they have 0.1 dietitians per 100,000 of the population, whereas in Japan there is 42 – leads to different work roles.
2. >70% of 39 member countries have professional title registered/protected by law (n=28) 2012
3. Compulsory practicum program – no practicum = 3 (in 2002 this was much higher); Compulsory practicum = 35 (92%)
4. 81% (n=30) countries have national standards – represents a challenge in creating change
5. Should we move to competency based approach and away from a didactic approach? – 28 countries have competencies students must meet to complete their dietetic education program

Learnings from EFAD

1. In the EU aim is for equality of healthcare across member states
2. 3 EU standards – 1 uni (2005), 1 practice placement standard (includes a minimum duration) (2005), and 1 set of competencies at point of qualification – these are minimum standards, each country can go above them
3. More important to start with the competencies required in a country-specific situation – premature to determine a required set of hours/years before there is additional research
4. But important to acknowledge that these ‘standards’ are not set in stone – they are aspirational minimum standards – helpful to some countries

The way forward

1. That we take these standards and use them as an international competency framework?
2. Possible that most value from these standards is where the profession is emerging.
3. Does ICDA want to head towards being an international credentialing organisation as per OT?
4. Working at a principle level rather than getting too specific will make more sense at the international level.

The International Confederation of Dietetic Associations – Have your say

1. Like to know what ICDA does apart from hosting the congress.
2. Language is a barrier. Run a few sessions at the congress in at least one or two other languages apart from English.
3. Bring out an ICDA journal and / or a case study manual which can carry scientific inputs from members. To be published online.
4. Give a brief talk about ICDA during the NDA annual meetings, if it’s not being done already.
5. Announce resources in DAW regularly (even if it’s a repeat).
6. Provide a list of expert speakers on various topics to all member countries so that the NDAs can invite the experts when required.
7. Hold the congress once in 2 years. Encourage regional meetings.
8. Organise the annual general meeting in a member country along with a short scientific symposium so that the regional members benefit.
9. Help more countries join ICDA or establish dietetic groups. Get Africa, South America and Middle East more involved.
10. ‘Dot’ all the member countries in the picture on the NDA page.
11. Identify centres of excellence / fellowship residency in member countries and publish the information on the website.

Advancing the profession – marketing dietitians and dietetics in the international arena

1. Dietetics is not recognized world-wide as a profession but seen more as a job.
2. More work needed on minimum international standards to allow greater career mobility.
3. Identify countries and representatives for more countries in Africa, South America and the Middle East.
4. Develop marketing materials for use with employers, governments, other professions about the benefits of hiring qualified dietitians.

International workforce – supply and demand

1. ICDA should help NDAs reach agreement on minimum standards and competencies to be a dietitian/nutritionist; maybe assess the differences between countries and have it available to those persons wishing to move.
2. Define “accreditation” and come to international agreement. Then allow transparency so there are no surprises when one wishes to move.
3. Set up a clearinghouse with information and contacts to help people who are moving with expectations into the new country.
4. Develop a checklist to use when comparing one country’s competencies with another. Support development of modular content which can be studied / tested to move to new practice areas.
5. Promote the inclusion of a foreign language for undergraduate electives.
6. Develop approved international supervised practice placements/internships. Include areas of the world where dietitians are not already over-tasked with preceptor roles.
7. Develop a network to support students/faculty who want to do research in other countries.
8. Add descriptions to the country profiles that describe whether or not each nation’s educational programs include clinical, foodservice, and/or public health nutrition content.

EFAD adopts two new position papers

EFAD had the very good fortune to receive €100000 from the European Commission in 2012 to support the work of the Federation. This money was used to produce several useful outcomes, including surveys on standardised terminology and on the embedding of European Dietetic Competencies. A communications strategy was developed, a LinkedIn group (called European Dietitians) was established and four newsletters and a new brochure were published. EFAD was also able to organize stakeholder workshops and workshops to facilitate mentoring relationships between established and developing associations.

In addition to all of this EFAD was also able to publish two position papers, two briefing papers and three reports.

The first report “Health in the Workplace: The Role of the Dietitian”, based on data collected earlier, was used to stimulate discussion between stakeholders from industry, public health organisations and politicians, to gain a better understanding of what dietitians can offer in this important area of public health.

To develop the other documents a project officer undertook a desk search and drew up draft papers on the role of the dietitian in the fields of Diabetes, Gerontology, Administrative Dietetics and Public Health Dietetics. Each EFAD member association was asked to identify specialist dietitians in these fields, creating a database of specialist dietitians within Europe. These specialist dietitians were asked to comment on, and contribute to, the draft briefing papers and reports. They were also invited to meet at the EFAD/DIETS conference and to form European Specialist Dietetic Networks, with a view to developing competencies for dietetic specialties in future.

The outcome of all this activity was the publication of two reports: “The role of the dietitian in effective health promotion to reduce health inequalities” and “The role of the dietitian in the provision of safe, tasty, nutritious and sustainable food”.

Two Position Papers with supporting briefing papers were also published: “The Role of the Dietitian in the Prevention and Management of Gestational and Type 2 Diabetes” and “The Role of the Dietitian in the Prevention and Management of Nutrition-related Disease in the Older Adults”.

EFAD members voted at the General Meeting to adopt these two position papers, adding them to the two existing position papers on the role of the dietitian in management of obesity and malnutrition.

The Position Papers will be used to advocate for dietitians. They have already been “released” to stakeholders, including politicians, employers, other health professionals and educators, with accompanying press releases.

The position papers, and all the other outcomes described here, are available for download on the EFAD web site. Please visit www.efad.org and register to use the extranet, to ensure that you have access to all this information and to receive regular updates of EFAD activities in future.

Judith Liddell
EFAD Secretary General

ICD 2012 Experiences

Charlotte Jackson, British Dietetic Association

Only occurring once every 4 years, this is the Olympics of the Dietetic world! The 16th International Congress of Dietetics in Sydney was a fantastic experience and the best networking opportunity I could have imagined. I was privileged enough to attend this prestigious event following an invitation to present my masters dissertation on Malnutrition in Nursing Homes.

I applied to the Congress after seeing the British Dietetic Association “Too Hot to Handle” advert. The abstract I submitted was entry number 1085, and although the approach I took was not scientific, it was simple, personal and full of passion. You can imagine how over the moon I was when I realised I had been chosen!

This year the Congress was in the incredible location of Sydney where I was able to taste interesting foods and explore a spectacular city. After returning from the Congress my motivation and ambition has been amplified. Finding myself surrounded by so many dietitians, all with the same mission of moving dietetics forward, their passion was contagious and enhanced my own.

I met inspiring dietitians from around the world and I know the discussions we had will remain with me throughout my dietetic career.



The Congress was hosted by The International Confederation of Dietetic Associations and the Dietitians Association of Australia. This year's theme was "*LEAP: Leadership, Evidence and Advancing Practice*". New evidence and nutrition for the future were discussed and debated by world's leading dietitians. There were over two thousand delegates from fifty seven countries in attendance.

The cooking demonstrations were brilliant and I brought back with me some original tips for a number of international dishes. Among the many interesting talks I attended some included the Australian healthy eating recommendation of two fruits and five vegetables per day; Nutrigenomics: the effect of genetic variation on response to diet and FODMAPS: Fermentable, Oligosaccharides, Monosaccharides and Polyols in the treatment of Irritable Bowel Disease.

As a fan of television's "Ice Road Truckers", I found the talk around food security issues in indigenous communities in Canada riveting, with the prices of fresh healthy foods being extortionate in order to cover the cost of getting food to these communities during the winter months. The talk explored the government's idea around funded "Grow your Own" projects as a solution to this problem.

The congress is definitely versatile and innovative. For example, I even attended an interesting breakfast seminar about mushrooms, discussing their power of possibly reducing the risk of breast cancer and placing an idea that everyone should be consuming one white button mushroom at least per day.

One of my favourite parts of the conference was the End of Day Interest Meetings. This enabled delegates to discuss topics that were of interest to them, and quickly became the best opportunity to network with other Dietitians from around the world. Their ideas along with your own are invaluable.

There were also launches of new products that can put you ahead of the game and are great discussion points. For example, one of my favourites was "Pepsi Next", a drink that contains 30% less sugar than Pepsi, an innovative concept and topic to discuss wherever you are. Personally, I thought it tasted the same as Pepsi Max!

To say this was a fantastic experience is a serious understatement. I found this a very powerful Congress and the opportunity enabled me to gain a greater understanding of how dietitians work all over the world, broadened my skills and opened my eyes to the bigger picture of nutrition. I cannot recommend this event more highly to all dietitians and student dietitians. Make a note! The next one is in Spain so any dietitians out there who have completed research, get applying and get your voices heard!

Beatrice Conrad, Swiss Association of Registered Dietitians

It was a very exciting conference in Sydney! ICD 2012 meant to me:

- meeting people from all over the world
- sharing experiences
- making friends
- opening the mind for new experiences
- learning from each other



- having an insight in the ongoing process of the implementation of IDNT and NCP in different countries
- visiting a beautiful venue

..... just having a wonderful time and going back filled up with new ideas!

Jagmeet Madan, Indian Dietetic Association

The 16th International Congress of Dietetics (ICD) held in Sydney from 5th to 8th September 2012 had nearly 2300 participants from 43 countries. This is the first time that twenty four participants from Indian Dietetic Association (IDA) were present at an ICDA conference. It was an honor to see Dharini Krishnan (former National President of IDA) as a guest speaker for a lead session. It was indeed a matter of pride to see a number of Indian research papers selected for Oral and Poster presentations. The oral presenters were Jagmeet Madan (IDA Board Member), Rita Bhargava (IDA Board Member) and Neha Gehi. The poster presenters included Latha Sashi, Anjali Nair and Uma Chitra. We also had the august presence of Rekha Sharma (National President of IDA), Sheela Krishnaswamy (Director ICDA Board & Country Representative), Molly Joshi (Former ICDA Country Representative), Manju Mathur (IDA Board Member), Mallika Janakiraman, and others.



The icing on the cake was Latha Sashi's poster getting an International Award – 'Highly Commended Poster'. Latha Sashi was also a part of the ICDA working group in developing the definition for Evidence Based Dietetic Practice that culminated in a workshop at ICD 2012. It was indeed a learning experience to meet many dietitians from varied cultures and background and also get a wide professional exposure in the exhibition stalls. Meeting Rita Batheja, Founder, Indian American Dietetic Association (New York) and Ms Alice Wimpfheimer brought back fond memories of IDA's presence in ICDA in 1997

when Molly Joshi was the National President of IDA. The added nostalgia was a cozy dinner session of Indian delegates with Rita Bhateja, Alice Wimpfheimer and some members of the Academy of Nutrition and Dietetics from USA, at "Zaafraan", a fine Indian restaurant at Darling Harbor, Sydney, and a dinner cruise for some of the invited delegates.

It was an extremely enriching experience to be a part of a conglomeration of nutrition and dietetics fraternity from all over the world, and to exchange knowledge and best practices in the field of Dietetics. Kudos to the organizers for having put forth a packed scientific program during the conference that took care of interests of nutritionists, dietitians, academicians and researchers alike. The warmth of the Aussies, the never-sleeping Darling Harbor and the legendary Sydney harbor bridge and the Opera House made the ICD at Sydney very special. The Indian fraternity is already looking forward to being together at Spain and South Africa in spite of losing the bid to host the ICD in 2020.

Janice Macdonald, Dietitians of Canada

Canadian dietitians stood proud at the 16th International Congress of Dietetics in Sydney, Australia. Delegates were commenting in the hallways on the strong Canadian presence on the program from plenaries to workshops to poster presentations plus the popular Dietitians of Canada (DC) booth in the exhibit area.

There were over 2200 delegates from 57 countries with 55 dietitians from Canada, most of who were on the program and many more than once. Thirty DC members with successful program submissions were supported by DC to attend the Congress.



- Corinne Eisenbraun co-chaired a session on international supports for the uptake of International Dietetics and Nutrition Terminology (IDNT).
- Paul Fieldhouse and Jayne Thirsk were invited to present – Paul spoke on food security issues in indigenous populations in Canada and Jayne on evidence-based practice.
- Two DC members, Sobia Khan and Jessica Rutherford, received the DC Novice Researchers Travel Award. Sobia spoke on reaching culturally diverse communities. Jessica had this to say about her experience – *“I am very grateful to have had the opportunity to attend ... it was an honour to share my research on Manitoba school nutrition programs and policy to an international audience. I returned from the ICD feeling fully satisfied; I had expanded my network of colleagues and learned new ideas and techniques for research. And of course, I got to explore Australia; I tasted delicious foods, visited breathtaking sites, saw many weird and wonderful creatures and even cuddled an unbelievably adorable Koala. This experience will not soon be forgotten!”*

There were several workshops delivered and/or facilitated by Canadian dietitians including three by the International Confederation of Dietetics Association (ICDA) on workforce supply (Marlene Wyatt), definition of evidence-based practice (Debbie MacLellan and Jayne Thirsk) and world-wide advocacy (Marsha Sharp).

Canada looks forward to equally strong participation at ICD 2016 in Granada, Spain.

Marleen de Bruin, Elles Steenhagen, Wineke Remijnse-Meester, Dutch Dietetic Association

“Change the values, then you can grow” - Ann Fox at the 16th ICD, Sydney, Australia

Another ICD has happened! It was really a perfect and lovely opportunity to meet so many international colleagues in Sydney. The world – for the moment – was small. We were 3 of 2200 participants who enjoyed the 4 packed days of stimulating lead sessions, plenary lectures, interactive workshops and poster sessions about Nutrition and Dietetics. Personal networks were expanded, experiences and ideas shared, research presented and points of view discussed. It was a great experience to hear about the professional practices from all the corners of the world. We came home impressed and inspired by all those active colleagues in so many fields of activities.



From left to right):
Marleen de Bruin
Elles Steenhagen
Wineke Remijnse-Meester

We enjoyed the scientific program. It was great to have the chance to present and share our research results from the Netherlands. And we are very honored and proud that Elles Steenhagen received two poster awards (Highly Commended Poster and Best Novice Researcher Poster) for ‘Efficacy and complications of nasojejunal, jejunostomy and parsenteral feeding after pancreaticoduodenectomy’ (<http://www.ncbi.nlm.nih.gov/pubmed/22528573>) and ‘Optimal feeding strategy after pancreaticoduodenectomy: a systematic review’ (<http://www.ncbi.nlm.nih.gov/pubmed/23354970>). We have celebrated it with a delicious Australian dinner and a good glass of Australian wine. Research in Nutrition and Dietetics is important to develop evidence based (inter)national nutritional guidelines. And even more important is to share the struggle of implementing those guidelines into practice.

Nearly every session brought something new or an inspiration. It was a great opportunity to discuss the differences and similarities between IDNT and the ICF dietetics (used in the Netherlands). Coming from a country where creating evidence is a hot topic, the combination of E-health (making an App) and ‘old fashion’ dietetics (making recipes for tube feeding) in the session about disasters (Thai flooding) gave a perspective – we shouldn’t lose our old professional skills, but we should sell them in a new way. Uncomplicated observational research to support the implementation of new policy on nursing wards showed that the solution is sometimes less complicated than we think. We were proud to hear Wineke’s speech about the Dutch approach. The applause when she told about the law suit against the Dutch government in case of reimbursement felt like a reward for our Dutch Dietetics Association.

We took home the message “more evidence, more sharing, shared language, leadership, coordinated curricula, choosing strategic partners and reaching out to others”.

Thanks to the DAA for an inspiring and well organized 16th ICD. We enjoyed Sydney! See you at the 17th ICD in Spain. Looking forward!

Spanish Association of Dietitians-Nutritionists

The Spanish Association of Dietitians-Nutritionists (AEDN), with its president, Giuseppe Russolillo at the head of a delegation, travelled to Sydney in September 2012 in order to attend the 16th International Congress of Dietetics (ICD). The AEDN had a stall and took part in a workshop on the Mediterranean Diet and ICDA workshop on marketing tools for the dietitian-nutritionist. But the most important thing that AEDN did in Sydney was to receive the baton to the next ICD in 2016, which will be in Granada, Spain.

Niva Shapira, Naomi Trostler, Ronit Endevelt, Rebecca Goldsmith, Israel Dietetic Association

The ICDA was a great experience for me personally and to the Israeli group - 8 of the leading professionals in Israel. It was a pleasure being together, many of us presented papers, and were enthusiastic about exchanging information and opinions and sharing perspectives, visions and missions. We all felt very positive about new practices presented, which were potentially very relevant and applicable for us in Israel. Others enjoyed the positive response they got to their presentations and from the professional interactions and opportunities they encountered.

Beyond the high academic level from scientists all over the world, and especially by Australian scientists, whom we had a rare opportunity to meet, the professional promotion emphasis was a great idea, which I believe should be taken much further in future conferences and activities. Attaining common language and perspectives would give us support and backing – wherever we may be – and this empowerment will bring the global message for improved effectiveness and enhancement.

Thank you Prof. Sandra Capra for your empowering lecture and by showing women who made differences in the professional world, reminding us the potential we have and the need for our contribution that increasingly exist!

Thank you the ICDA team for putting together such a significant professional conference!!!!

Niva Shapira Ph.D., R.D., Agr.
Clinical Nutrition and R&D Consultant
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ICDA congresses are for me the scene where I catch up on what is the status of the dietetic profession around the globe. Through formal and mainly informal, "corridor", meetings and chats with delegates one learns what the various challenges, successes and barriers to education of dietitians and practice dietetics are around the world. The ICDA in Sydney was no exception. The formal presentations laid out numerous important issues proving we are a global village and share similar issues. Solutions vary and it was interesting to compare them.

I left enriched and proud of our profession.

Thank you to the Dietitians Association of Australia for their fantastic job of organization and hospitality.

Naomi Trostler PhD, RD
Hebrew University of Jerusalem
naomi.trostler@gmail.com

I have participated in the ICD conference and enjoyed it very much especially the internet section and the multicultural perspective.

As the head of health promotion in the second biggest HMO in Israel and a clinical dietitian there were a lot to learn and share, though I was lacking some more sharing sessions. I will be happy to get the PDF's of the lectures

Dr Ronit Endevelt
Director of Health promotion and preventive medicine
Endevelt_r@mac.org.il

I particularly enjoyed the conference, as I am Australian, so that, in addition to benefitting from the excellent professional program, I had the opportunity to meet up with colleagues with whom I worked in the past.

There was an enormous variety in terms of subjects, and many new areas of work for dietitians that were explored. This conference provided an excellent forum for dietitians from around the world to network, share ideas, and learn from top-notch professionals.

Though Israel is a small country, I felt proud of our delegation of 9 and their presentations.

I look forward to receiving the PDF's of the presentations, and I hope that the poster sessions will also be included.



Rebecca Goldsmith
Senior Research Coordinator
Nutrition Department, Ministry of Health

National Dietetic Association Reports

Country – Australia

Dietitians LEAP into cyberspace at ICD 2012: Report from DAA

After months of preparation from Dietitians Association of Australia (DAA) staff, with support from DAA's Social Media Advisory Committee (SMAC), we were delighted to see many Australian and international dietitians LEAP into the social media world for the International Congress of Dietetics, held in Sydney, Australia on 5-8 September 2012.

The online interaction on ICD's social networking sites such as Facebook, Twitter and YouTube was extremely positive. Many online followers who were unable to attend the congress were grateful to those Tweeting and posting content and photos, which allowed them to follow the action as it happened.

Here is a snapshot of some of the social media outcomes from ICD2012:

Twitter (@icd2012)

- The account had more than 600 Twitter followers (mostly dietitians) from across the world
- More than 4,500 Tweets were generated using the #ICD2012 hashtag
- The official 'Tweet Up' at the Welcome Reception had a great turn out, attracting around 20 delegates
- Responses to the official ICD2012 Twitter competition, which was supported by numerous congress sponsors and exhibitors, was pleasing – with five prizes given away
- Delegates were able to view ICD2012 Tweets at the congress through a live Twitter stream set-up on numerous televisions throughout the venue.

A selection of the many great Tweets:

- What a great day #ICD2012 – learning about food insecurity, FODMAPs and more...inspiring & stimulating.
- Missed the first 20 mins of the social networking workshop whilst I set up a Twitter account – oh the irony! #ICD2012.
- Sylvia-Escott Stump takes the stand to speak about nutrition genomics! Folate especially can alter gene expression. #ICD2012.
- Networks, knowledge, readiness, confidence, resilience. Just some of the qualities needed to influence – Pauline Mulholland #ICD2012.
- People with IBS have more nerve endings lining the gut, therefore experience heightened sensations such as bloating and pain #ICD2012.

Facebook (www.facebook.com/icd2012)

- Almost 500 'Likes' to the ICD Facebook page
- ICD Facebook content reached more than 20 countries
- During the week of the congress, ICD Facebook content reached almost 9,000 people
- During the week of the congress, more than 250 people were talking about ICD on their Facebook pages.

Most popular Facebook posts:

- Video of the Australian Youth Choir at the Opening Ceremony
- Video highlights from the Opening Ceremony.

These clips can also be found on DAA's YouTube Channel at <http://www.youtube.com/user/DAAvideos>

A big thank you to dietitians around the globe who got involved with the social media channels for ICD2012. Your informative and enthusiastic messages created a great vibe for the congress.

DAA also noticed many budding social media dietitians engaging in 'cyberspace' in the last couple of days of the congress. We hope our social media efforts have inspired dietitians across the world to LEAP into this area and spread the expert word about health and nutrition across the ever-growing domain that is social media!

Holly Smith, Communications Dietitian, Dietitians Association of Australia

Connect with DAA:

Website: www.daa.asn.au

Facebook: www.facebook.com/dietitiansassociation

YouTube: www.youtube.com/DAAvideos

Twitter: @HealthyWtWk

Country – Brazil

Brazilian Nutrition Congress and Ibero-American Nutrition Congress Achieve International Exposure

More than 3400 nutrition professionals and students from Brazil and 11 Ibero-American countries gathered together at the 22nd Brazilian Nutrition Congress (CONBRAN 2012) from September 26 – 29, 2012 in Olinda, Pernambuco. The event was organized by the Brazilian Nutrition Association (ASBRAN) and the Pernambuco State Nutrition Association (APN), and brought together delegates from the 3rd Ibero-American Conference on Nutrition, the 3rd Ibero-American Sports Nutrition Symposium, the 1st Ibero-American Symposium on Evidence-Based Clinical Nutrition and the 1st Ibero-American Nutrition Symposium on Meal Production.

A landmark in the nutrition field and one of the most important nutrition events in Latin America, CONBRAN hosted lively debates on food production processes, trading, transformation, preparation, distribution and consumption, and their relationships to health, social movements, NGOs, government ministries and other governmental organizations.

Concomitant events, such as international conferences (involving professionals from Spain, Panama, Portugal, Uruguay, Costa Rica, Nicaragua, Argentina, Colombia, Paraguay and Chile), cultural attractions, film festivals, networking opportunities and meetings for professionals and students, all reflected important challenges facing nutrition science now and in the future. One of CONBRAN's permanent spaces, the Josué de Castro space, played host to approximately 2000 visitors. The space is a tribute to the great Brazilian activist who devoted his life to fighting hunger, and it stimulated debate on practical experiences and encouraged discussions on relevant topics. A movement was created at this event to encourage discussion and create petitions against pesticides and genetically modified foods. A series of criticisms was also formalized against violations of Human Rights to Proper Food (DHHA).

INTERNATIONAL EXCHANGE

The debates at the 22nd CONBRAN and 3rd Ibero-American Conference on Nutrition strengthened the approach towards transparent and concrete public policies that assure the Right to Proper Food in Brazil, Latin America and the world, which was the focus of the keynote topic: **Appropriate Food and Social Sustainability**.

In addition to the great impact caused by CONBRAN, the 3rd Ibero-American Conference showed that professionals from Ibero-American countries have become stronger from the exchange of research, knowledge and experience. To consolidate its international scope, the Ibero-American Conference on Nutrition is already organizing its next event to be held in Guatemala in September 2013.

PRONUTRI

In 2012, the Brazilian Nutrition Association launched PRONUTRI, a DISTANCE CONTINUING EDUCATION PROGRAMME for nutritionists, nutrition students and professionals from related areas.

PRONUTRI is structured as four-volume cycles produced on a quarterly basis. Over 1,400 courses were sold in the first year. The goal of the program is to make the knowledge and expertise of the most representative authors from different areas of study available to professionals in a systematic and organized way so that they have access to solution for the most common problems they see in their professional practice, along with follow up that encourages them to embark on permanent training. The first cycle is currently concluding with excellent results.

Country – Canada

Developing Canadian Entry-To-Practice Competencies - A Collaborative Process

Canada is preparing to release new entry-to-practice competency standards in April 2013. These new standards have been developed through a collaboration between Dietitians of Canada (DC), ten provincial dietetic regulatory bodies, and 50 academic and practicum dietetic education programs over a three-year period.

In 2009, DC, dietetic regulators and educators created a new alliance called the Partnership for Dietetic Education and Practice (PDEP). The goal of PDEP is to undertake projects of common interest to benefit the quality of dietetic services and the advancement of the profession in Canada.

The first priority of PDEP was to develop new entry-to-practice competencies for the profession – referred to as the Integrated Competencies for Dietetic Education and Practice (ICDEPs). This work was undertaken as a two-phase project led by a small working group of volunteers (two representatives of each of the three partner sectors) supported by a Project Manager and a Project Consultant.

Phase I of the project required that the working group draft a set of Job Task Statements for the Entry-Level Dietitian. The Job Tasks were validated through a national on-line survey of all dietitians in the country. Over 2200 dietitians responded to the survey, representing approximately 24% of the profession and included every practice setting and geographic region. Phase 1 was completed late 2010 and resulted in a set of statements that reflected current practice for dietitians and an assessment of what is an appropriate level of performance for those entering the profession.

During Phase 2, Performance Indicators (PIs) for competency evaluation purposes were created. This phase of the work was supported by a significant grant from the Canadian government. Draft PIs were developed between September 2011 and January 2012, which included extensive consultation with key stakeholders in education, practice and accreditation.

In response to a request from educators, a Foundational Knowledge section was developed to connect the practice competencies with essential foundational education required for the practice of dietetics. In September 2012, a targeted consultation was held with academic program directors to review the Foundational Knowledge Statements to ensure that they were inclusive and complete.

Between October and December 2012, all dietetic education programs completed a survey assessing their ability to implement the academic and practicum Performance Indicators and the

Foundational Knowledge. Data analysis confirmed that the great majority of the indicators were either immediately achievable and measurable, or could be included in education and practicum programs within the next two years. The few identified areas of concern were reviewed by PDEP January 2013. The complete and final version of the ICDEP will be released by the end of April 2013.

An implementation plan for the ICDEPs is currently being developed. The ICDEPs are integral to the accreditation process and form the basis for the Canadian Dietetic Registration Examination (CDRE). Over the past 9 months, an accreditation working group has been developing new accreditation standards that incorporate the ICDEPs.

Development of the ICDEP has been a comprehensive and collaborative process and one that would not have been possible without the dedicated leadership of PDEP and the substantial good will and engagement of all dietitians and educators in Canada.

Corinne Eisenbraun MA, RD, Director of Professional Practice Development and Marlene Wyatt MA, RD, Director of Professional Affairs

Country – France

Prevention of obesity and overweight among children in France

Obesity and overweight affect respectively 3.5% and 14.5% of children in France. These figures doubled in the last ten years. In order to prevent what has become a real public health problem, the French Association of Nutritionist Dietitians (AFDN) strives to raise awareness amongst public and professionals on the recommendations from the French National Authority for Health (HAS).

Dietitian's mission: preventing overweight in children.

According to AFDN, the dietitian involved in a multidisciplinary team (GP and/or pediatrician, psychologist, social worker), has two substantial concerns: helping to get on a healthy diet after an overweight diagnosis and fighting inactivity.

To prevent overweight, the dietitian relies on monitoring of Body Mass Index (BMI) percentile obtained by measuring the size and weight several times a year. If weight is stable without associated pathology, only weight gain is monitored. Otherwise, the goal is to reduce weight in a reasonable and progressive way (as the child grows the weight stabilization in the year helps to decrease the BMI).

To prevent inactivity, the dietitian assesses daily activities and physical abilities. The goal is very simple: to encourage the child to move without compelling him, and without weight loss targets.

To understand and anticipate risk situations through dialogue and listening.

When confronted with overweight and obese young patients, the dietitian and her team try to build a relationship of trust with the patient and his family in order to identify all the factors that contributed to weight gain: family medical history, socio-cultural factors (sleep rhythm, screen time) and eating habits (meal structure, time and duration of meals). The effectiveness of nutritional, medical, psychological or even social support relies on the quality of this relationship. Families proceed to an early nutritional assessment for their child because habits are easier to

modify before the age of 10. Consultation time also constitutes a good opportunity for the dietitian to evaluate the level of families' involvement.

The AFDN dietitian identifies situations like the following:

- A child who eats fast often eats larger quantities, and he should be encouraged to take longer time eating the meal.
- A 4 year child who is fed the same amount as a 10 year old should be taught to adjust quantities according to age.
- A home alone child after school should have access to appropriate snacks to prevent nibbling on cakes and sweets.

The dietitian includes common sense solutions

Children need to learn to eat a little bit of everything in reasonable quantities. It is more about providing a daily balanced diet that contains all the indispensable nutrients. Pleasurable foods like a small cake or a piece of chocolate from time to time will not damage their health.

The messages on the dangers of sweetened drinks are becoming better understood. But, they should not be replaced by fruit juices that are just as sweet. To hydrate nothing better than water. And finally, meals can be an opportunity to exchange and to share within the family, not only while eating but also during their preparation.

ASSOCIATION FRANÇAISE DES DIÉTÉTICIENS NUTRITIONNISTES
French Association of Nutritionist Dietitians
www.afdn.org



Country – Greece

Nutritional Support Teams in Greece – Recent Advances in Hospital Malnutrition Legislation

Prevalence rates of malnutrition in hospitalized patients in Greece vary from 25-40%. Since malnutrition largely goes by undetected and untreated the role of dietitians is essential in malnutrition screening and management.

In 29.2.2012 a new legislation devised by the Ministry of Health and Social Solidarity came into force. Law n. 4052/ Chapter n.134 refers comprehensively to Clinical Nutrition issues and addresses disease related malnutrition in Greek hospitals. Among the core objectives is ensuring appropriate nutrient intake for all patients according to their nutritional status, length of stay and possible changes in their clinical condition. The new legislation was the result of a concerted effort of the Hellenic Dietetic Association (HDA), the Hellenic Association of Hospital Dietitians (PASINOD) - both representing dietitians in Greece - and the multidisciplinary Society for Clinical Nutrition (GrESPEN).

The most important step against malnutrition the law recognizes is the establishment of the Nutritional Support Teams (NSTs) at every hospital. The Nutritional Support Team will primarily function through its multidisciplinary composition. Since nutritional care is and should be a responsibility of many disciplines, integrating the activities is absolutely essential. The NST will consist of a hospital dietitian, a nurse and a medical doctor. The doctors and nurses of the hospital that have gained postgraduate clinical nutrition education, or have at least attended relevant live courses will be selected for inclusion in the NST team. If necessary the hospital pharmacist will also be consulted.

NST will identify and treat those at risk for malnutrition. Useful measurements include recording nutritional intake, adverse effects associated with food intake, digestion and absorption, and food-drug interactions. NST will implement nutritional support when needed, and the outcome of the intervention recorded and evaluated. Special care will be given to the post-discharge patients at risk for malnutrition.

The hospital dietitian in collaboration with the NST will also be responsible for the provision of enteral or parenteral nutritional supplements, according to the nutritional plan. The new legislation clearly states that the hospital dietitian is responsible for the development of each patient's nutritional plan, and the definition of the nutritional plan's macro-micronutrient intake.

To further support the proper function of the NSTs in Greece, GrESPEN in collaboration with HDA and PASINOD will host relevant courses for all potential members of an NST on how to establish one and become a competitive member.

The new legislation highlights that the National and International Guidelines on Nutritional Support have to be followed. Given the economic situation in Greece, it becomes even more important that the NST focuses on the implementation of the simplest, safest, and most cost-effective means for nutritional support acceptable to the patient.

*Tsagari Amalia, PhD, Clinical dietitian
ICDA Representative of Hellenic Dietetic Association
Bathrelou Eirini, PhD*

Country – Hungary

Report on the second and third cycle training opportunities for dietitians with a bachelor's degree and changes in the continuing professional educational system in Hungary

The highest qualified professionals of diet therapy are the dietitians in Hungary. Dietetics at Bachelor's level has existed from 1975 in Budapest and from 1990 in Pecs. The education lasted for 3 years at the beginning, but it has now grown to 4 years. Recently (since 2009 in Debrecen and Budapest, and since 2011 in Pecs) it became possible to get a masters degree in the field of nutritional sciences as well, but in quite a unique way. The masters program for dietetics has been titled as Nutrition MSc. This means that health professionals still need a Dietetics BSc, and the masters program focuses mainly on scientific competencies instead of specialized dietetic competencies. Since 2006 it is also possible to get a PhD for health professionals because two universities (Pecs and Budapest) have launched a Doctoral School for Health Sciences. Many of the dietitian students have already defended their theses and received their PhD in Nutrition Science.

Another recent change is the continuing professional educational system for health professionals (including dietitians). Since 2009 registration is controlled by the Office of Health Authorisation and Administrative Procedures (EEKH). The criterion for registration is bachelor's degree accepted by the Hungarian government. There is no need of an exam to become a registered dietitian in Hungary, although the candidate has to be a member of the Hungarian Chamber of Health Professionals and the diploma cannot be older than 8 years. The Department of Registration keeps the Basic Register of healthcare experts, and keeps up the Operational Registry of paramedicals, physicians, dentists, pharmacists and clinical psychologists. Registering a candidate in the basic registration is automatic after acquiring any healthcare qualification. The goal of the basic registration is to testify the authenticity of the acquired qualification. One of the requirements to practice any healthcare activity independently is to be registered in the Operational Registry. Registration happens by request of the healthcare expert. The period of the registration is five years, which can be renewed. A registered dietitian has to collect credit points: 150 in 5 years. These credits are recorded by the National Institute for Quality and Organizational Development in Healthcare and Medicines, Directorate General of Basic and Continuing Education of Health Workers (GYEMSZI ETI). Besides that, they perform organisational, methodological and pedagogical tasks connected to vocational training and examination, adult education activity, organise healthcare vocational training outside the school system along with examinations, organise and conduct continuing education.

The new legislation according to the continuing professional education for dietitians came into force in 2012. There are three types of education: compulsory theoretical courses specially held for dietitians, elective theoretical courses and practice. The compulsory theoretical courses are accredited centrally and are organized by the Higher Education Institutes in collaboration with the governmental Directorate. These courses can be fulfilled with an exam at the end of the course. One compulsory course is for free in every period, though the employer could take over the charges of any other course the employee attends. The elective courses are also accredited by the professional body, but they are organized within the workplaces regularly. These credits can also be obtained with attendance at national and international conferences, with scientific work published in peer reviewed journals or with any other qualifications above the bachelors level (another bachelors in the field of health sciences, a masters or a PhD degree). It is also accepted if the registered dietitian is teaching or supervising students in related disciplines. For completing the practical requirements and remain competent, the registered dietitians have to work at least 3 years out of 5 within the profession (clinical, administrative or public health dietetics). Both national and foreign working environments are accepted. One year is worth 20 credits in a fulltime job; if somebody does not collect 60 credits with work, she can collect 20 credits per month under supervised practice.

The new training opportunities and the quality assurance in the continuing professional education hopefully will create an adequate and motivating environment for dietitians in Hungary for lifelong learning.

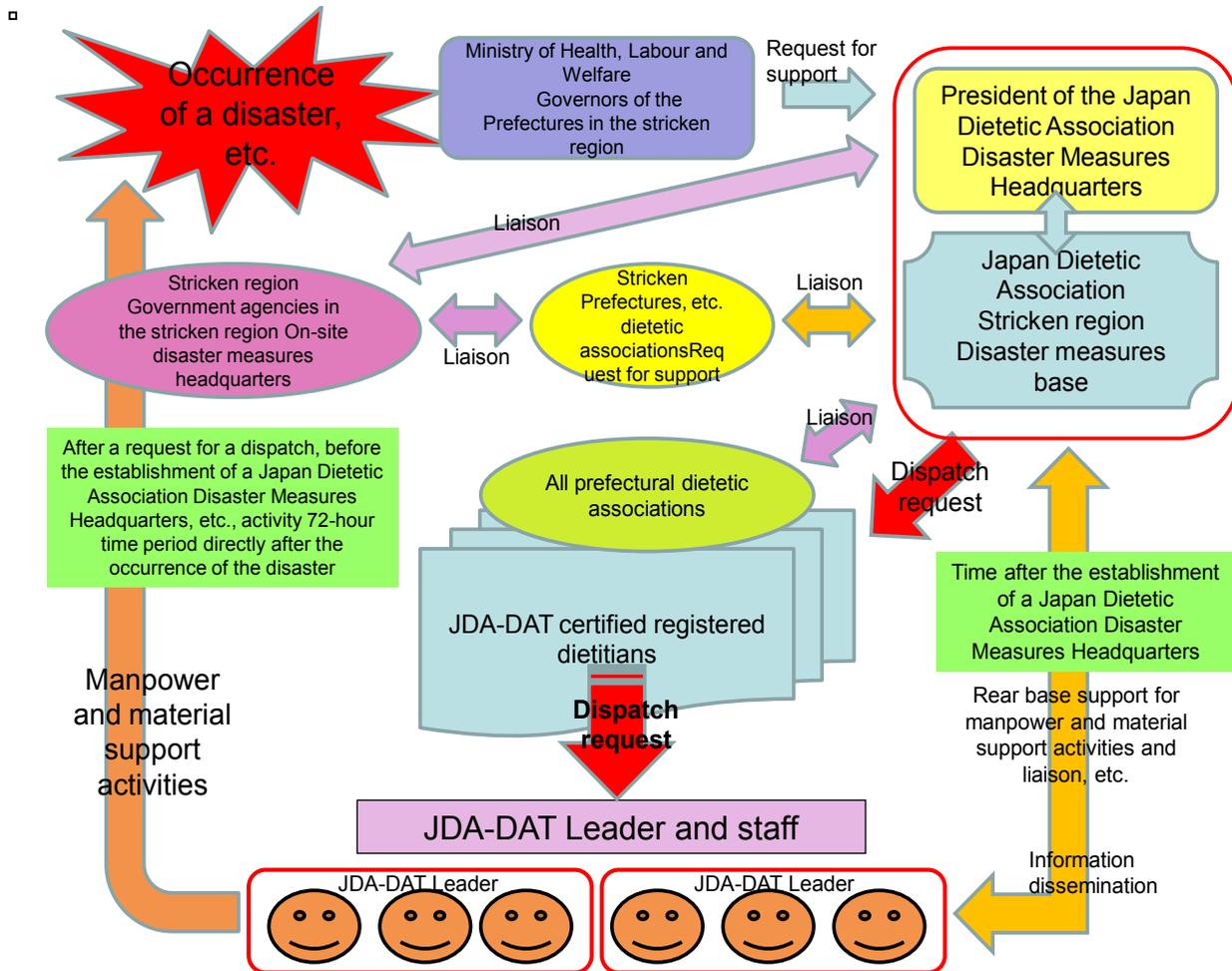
Simon Armbruszt, Assistant lecturer, University of Pecs, Faculty of Health Sciences, Department of Nutritional Sciences and Dietetics, Member of the Hungarian Dietetic Association (MDOSZ)

Jolan Kubanyi, President of the Hungarian Dietetic Association

Country – Japan

Establishment of the Japan Dietetic Association - Disaster Assistance Team (JDA-DAT) and its Roles

Based on our experience gained through the dispatch of registered and volunteer dietitians for disaster support and restoration related activities after the 2011 Tōhoku Earthquake and Tsunami hit Japan on March 11, 2011, the Japan Dietetic Association decided to establish the Japan Dietetic Association - Disaster Assistance Team (hereafter, JDA-DAT).



The purpose of this organization is to promote and foster registered dietitians equipped with the necessary technical knowledge and techniques required in order to provide swift emergency dietary support for the disaster-stricken region in cooperation with medical, welfare, and government nutrition specialists, etc., when a large-scale natural disaster, such as a major earthquake or typhoon, strikes anywhere in Japan.

The first session of the JDA-DAT Leadership Promotion Training Program was held in Tokyo on February 18 and 19, 2012. On the recommendation of dietary associations in all of the prefectures across the nation, a total of 106 persons with a history of work duty as a registered dietitian for five years or more and experience in disaster support situations completed the

training course and were awarded the JDA-DAT leader certification. In the next 10-year period, we intend to foster 1,000 new JDA-DAT leaders, and promote the inclusion of JDA-DAT staff members in all of the prefectural dietary associations across the nation.

Country – Israel

Stand Up for your Rights to Practice Nutrition in Israel

A significant landmark in educational history was set recently, when the CHE - Council of Higher Education in Israel, decided that a revolution in the studies of nutrition science must commence. In Israel, the nutrition profession is currently learned in three main academic institutions: The Hebrew University in Jerusalem, Tel Hai Academic College and Ariel University Center.

Students who graduate, receive a BSc in Nutrition Sciences after 3 academic years. Following the academic period, nutrition students must complete a training period of 6 months (750 hours) in general hospitals, outpatient clinics, nursing homes and community health programs. After the completion of the training period, the student must pass a national written examination administered by the ministry of health.

Until 8 years ago, there was only one nutrition school in Israel (the Faculty of Agriculture of the Hebrew University in Jerusalem), and it was the only academic institution which granted a degree in nutrition. The school was responsible for the professional training of dietitians, nationally. During this period, there was a waiting time of maximum one year in order to start professional training.

The joining of the Tel Hai Academic College - and in recent years - Ariel University Center, created an enormous increase in the number of students requiring professional training, but absolutely no changes in recruiting nutritional trainers. The main outcome was a waiting list of 2-3 years on average for professional training, for hundreds of students.

For historical and legal reasons, the professional training in nutrition, as opposed to other medical allied professions training programs in Israel (e.g., physical therapy), has seized to be the responsibility of the schools and was forwarded to the ministry of health, up to this day. A special committee was founded in November 2011 to seek solutions to the problem. The committee wrote a report about health professions training in Israel (Fainaru Commission Report), and recommended, unanimously, freezing any process of approval or opening of new nutritional programs/schools until 2015. They also recommended setting up another committee on nutrition studies to re-evaluate the academic and training structure. Despite the above conclusions, the CHE chose to delay their decision.

As a consequence, the student organizations from the 3 schools set together a goal to address this issue and to make the information public, especially for other people contemplating to study nutrition. The students knew they had to take the initiative and take care of themselves and peers to bring about a change. This battle of rights to practice nutrition in a reasonable amount of time included publishing articles in the media and collecting money from all students in all institutions - to hire a battery of attorneys. This step had a significant impact on the Ministry of Health - the CEO, Prof. Roni Gamzu, who expressed total support in the students' battle, claiming that his office is unable to solve the "waiting list" situation, and gave his recommendation to change the course of history again, and return the organization of nutritional training back to the institutions - i.e., CHE.

Another stepping stone towards the change was the recommendations of the International Evaluation Committee, chaired by Professor Alice Lichtenstein from Tufts University, MA, USA. The committee examined the nutritional sciences studies in the three schools. A comprehensive report was issued following their visit. The committee conducted interviews with the students, alumni and the faculty. The committee was able to analyze, question, and summarize our situation and in particular, our professional training. They noted the paradoxical situation in which high-quality students do not receive professional training they deserve. This report had a marked impact on the CHE resolution to make a profound change in nutritional studies in Israel.

In July 2012, the students (Main representative: Anna Fishman; Assaf Buch) along with a representative of the Israeli Dietitian Association - ATID (Dana Weiner), wrote the first draft for a model which compares the curriculum of dietitians to other medical allied professions and presented a comprehensive plan for a 4 year curriculum and the training program as part of it.

On 1/1/13 a massive group of nutrition students from all the institutions demonstrated outside the offices of the CHE. The demonstration was deliberately arranged for this day, as the topic discussed was the report of the International Committee and their recommendations. This had clearly pushed the CHE to adopt their conclusions. On that same day CHE declared its adoption of the committee report.

This a brief outline of a prolonged struggle, but full of faith. This struggle knew ups and downs, but we were guided by one principle - OUR RIGHT TO PRACTICE NUTRITION.

We thank the members of the International Evaluation Committee, the CHE members and all the concerned and involved parties. Even though we are headed for a major and dramatic change, we hope that the institutions will carry out the necessary adjustments as soon as possible. And in an analogy to the world of nutrition and lifestyle - changing habits is certainly not easy, but possible with a creative and open mind.

Dana Weiner, Dietitian, BSc in medical sciences, IDA-ATID board member and Deputy Director of the clinical nutrition department-RAMBAM medical center, Haifa, Israel

Country – Israel

Workshop on Nutritional therapy for HIV held in Israel for Dietitians

In Israel there are approximately 6,000 individuals infected with Human Immunodeficiency Virus (HIV). Thanks to the advancement in the treatment and medications for HIV, there has been a change in the dietitian's role and involvement in the treatment of HIV infected individuals. While, in the past, dietitians were called to treat acquired immunodeficiency syndrome (AIDS) patients suffering from severe malnutrition, today they are needed to help prevent and treat the metabolic risk factors (e.g., dyslipidemia, insulin resistance) prevalent under the medical treatment of Highly Active Anti-Retroviral Therapy (HAART). Since the dietitian has become a meaningful member of the multi-disciplinary team in HIV clinics, the Israeli Dietetic Association, together with the support of *Janssen*, conducted a professional workshop for its members about HIV.

The workshop included three sessions planned to give an insight on psychological, medical, and nutritional aspects of the disease. The workshop began with the personal story of an HIV infected individual. He described how he got infected with HIV, the dilemmas of confining his family and friends, the death of close friends with HIV, and more.

The second part of the workshop was given by the internal physician and infectious disease specialist Dr. Itsik Levy, the Head of the AIDS clinic in the Chaim Sheba Medical Center at Tel Hashomer. Dr. Levy explained the important lab tests (e.g., CD4, viral load) for the clinical assessment of the patient, and its relevance for the dietitian's treatment and approach. Furthermore, he gave a review of the medical treatment for HIV and an explanation regarding the side effects of the modern medications for HIV increasing the patient's risk for cardiovascular disease. Dr. Levi answered questions that helped fighting fears and ignorance such as: when is HIV contagious? When is the fetus infected? Can a HIV mother breast feed her baby? Etc.

The last part of the workshop was conducted by two dietitians: Dror Ben-Noah and Idit Ezov that gave a literature review of the nutritional treatment for the metabolic risk factors among HIV infected individuals, and discussed some case studies from the HIV clinic in which they work.

An attitude and knowledge questionnaire was given at the beginning and the end of the workshop, suggesting a significant improvement in both aspects. Dietitians that participated in the workshop are now in the Israeli Aids Task Force internet site and among physicians in HIV medical centers, and HIV individuals can look-up a dietitian to consult without fear of being judged or stigmatized.

Dr. Osnat Stone

CEO

Israeli Dietetic Association

Country – New Zealand

International Dietitians Day in New Zealand – “Eat Right, Your Way, Every Day”

A special day dedicated to all dietitians across New Zealand will be celebrated on March 13th 2013. This is the first time New Zealand based dietitians have participated in International Dietitians Day which serves to commemorate dietitians as invaluable health care professionals applying their specialised food and nutrition knowledge to improve the health of New Zealanders. As a dietitian's role often goes unrecognised in the community, the primary goal of this day is to raise awareness of registered dietitians as the key nutritional experts that translate the science of nutrition into practical use for the benefit of the public.

For the past four years, the American Academy of Nutrition and Dietetics, has been successfully celebrating an annual Registered Dietitians Day and the theme this year is “Eat right, your way, every day”. Healthy eating patterns, based on the New Zealand dietary guidelines, will be encouraged during this nutrition education campaign.

Dietitians New Zealand will be focusing most of their efforts on the day to targeted markets in primary schools, supermarkets and District Health Boards (publicly funded hospitals) nationwide. Collaborative relationships with strategically aligned organisations will be formed to help convey key messages to the public. Primary schools with low decile ratings, will receive

nutrition education packs, including healthy nutrition models, information on reading food labels and resources to help raise awareness on the need for modified diets for some children. Consumers at supermarkets will be provided with label reading opportunities, healthy low-cost recipe ideas and a nutrition booth staffed by dietitians to help answer questions on nutrition and nutrition related health. Public hospitals around the country, as well as other health organisations will be encouraged to participate during this day by holding a special lunch to honour their dietitians, putting up banners and handing out resources. This day will be an opportunity to draw positive attention to dietitians and provide recognition by the public for the important work that they do.

Country – Spain

Four Position Papers from GREP-AEDN

1. GREP-AEDN POSITION PAPER ON THE FLASH DIET

The Review, Study and Scientific Position Statement Group of the Spanish Association of Dietitians-Nutritionists (GREP-AEDN) prepared a position paper on the "Flash Diet", in order to respond to the numerous inquiries from members of the AEDN and media. Therefore, taking into account the Code of Ethics of the profession of Dietitian-Nutritionist, and in particular the responsibilities and commitments of Dietitians-Nutritionists towards society, the GREP-AEDN has issued a scientific opinion on this "diet" with the aim to help both health professionals engaged in Human Nutrition and Dietetics, and the general population, in making informed and responsible decisions.

The position of GREP-AEDN is to strongly discourage people following the "Flash Diet", for the following reasons:

1. It has no scientific basis. No human studies that have evaluated its effectiveness and safety have been found. The search strategy used in PubMed-Medline (database recommended by the National Health System) has been: ("Obesity" [Mesh] OR "Obesity, Abdominal" [Mesh] OR "Overweight" [Mesh]) AND Flash
2. The statements that appear in its website break the law.
3. It meets most of the characteristic criteria of fraudulent diets or methods to lose weight.
4. Dietary approaches like the "Flash diet" have been associated with health risks such as weakness, bone fracture risk, long term weight gain, metabolic syndrome, kidney damage, gastrointestinal disorders, depression and behavioural disturbances.

2. GREP-AEDN POSITION PAPER ON THE "ENTERAL TUBE DIET" FOR WEIGHT LOSS

The Review, Study and Scientific Position Statement Group of the Spanish Association of Dietitians-Nutritionists (GREP-AEDN) issued a position paper on the "Enteral Tube Diet" as a method for weight loss. GREP-AEDN analysed the scientific literature and concluded that the method is characterized by:

- The lack of scientific support.
- The contradiction with the Spanish Society for the Study of Obesity (SEEDO) criteria for therapeutic intervention.
- The potential breach of the 1999/21/CE Directive and its transposition into the Spanish law by *Real Decreto* 1091/2000.
- The potential health risks associated with the diet.

- Most of the characteristic criteria of fraudulent diets or methods to lose weight.
- The potential breach of *Real Decreto* 1907/1996.

Therefore, the GREP-AEDN position is to discourage people following the "Enteral Tube Diet" (also known as the "Backpack Diet", "Tube Diet", "Nasogastric Diet" or "Eating by the nose Diet").

3. GREP-AEDN POSITION PAPER ON THE "ISODIETA"

The Review, Study and Scientific Position Statement Group of the Spanish Association of Dietitians-Nutritionists (GREP-AEDN) wrote in 2009 a preliminary report on a book that appeared in the media called "Isodieta (dieta isolipoproteica), adelgazante y revitalizadora" written by Mr. Jaime Brugos. This report has been updated and reviewed. Taking into account the discussion in its position paper, the GREP-AEDN strongly discourages the statements from Mr. Jaime Brugos and following the Isodieta, considering it as a "dietary fraud" because "Isodieta" limits the consumption of a food or some food groups, foods are classified as "good" or "bad", it exaggerates or rejects the scientific basis of the nutrients and advocates the consumption of dietary supplements which are sold by the author, and Mr. Brugos advocates nutritional claims or statements that contradict reputable healthcare groups.

4. NUTRIENT LOSSES IN DOMESTIC MANIPULATION OF FRUITS AND VEGETABLES

In response to a request from "5 a day" Association for the Promotion of the Consumption of Fruits and Vegetables (which has a partnership agreement with AEDN), The Review, Study and Scientific Position Statement Group of the Spanish Association of Dietitians-Nutritionists (GREP-AEDN) has written an interesting report on those aspects related to the domestic manipulation of fruits and vegetables (F & V) that may affect their nutritional composition. The paper includes a brief introduction to the concept of "fruit" and "vegetable", as well as a brief update regarding the importance of F & V consumption and their actual intake by the Spanish population.

Regarding domestic handling of F & V and alterations in its nutrient content, the GREP-AEDN examines the effects of storage, mechanical processes like cutting and peeling, fermentation and canning, adding bicarbonate and cooking (boiling, stewing, boiling in a pressure cooker, steaming, frying, baking and using a microwave). Finally, the report includes some advice in relation to methods of handling food.

Country – United States

Activities of the American Overseas Dietetic Association (AODA)

The Academy of Nutrition and Dietetics and AODA Welcomed Visitors from around the Globe to International Congress of Dietetics

The American Overseas Dietetic Association (AODA), the Academy's international affiliate, welcomed guests to the International Congress of Dietetics 2012 with an International Breakfast Reception at the start of the conference. In addition to the networking taking place at the event, distinguished speakers, including AODA leader Naomi Trostler, Academy President Ethan

Bergman, and ICDA Board member Sandra Capra, presented information about their respective organizations, which set the tone for an informative and collaborative conference.



The Academy of Nutrition and Dietetics Welcomes International Guests to Annual Food & Nutrition Conference & Expo

The world's largest annual meeting of food and nutrition professionals, the Academy of Nutrition and Dietetics' 2012 Food & Nutrition Conference & Expo, was held October 6 to 9 in Philadelphia, Pennsylvania. Although the conference takes place in the United States each year, it draws attendees and speakers from around the world. The Academy, along with AODA, eagerly welcomed international members, supporters and guests with several special events, including the annual International Reception, where attendees from over 16 countries gathered to enjoy an evening of networking and fun.

For those of you who are able and interested, please consider attending FNCE 2013 in Houston, Texas! For more information, please visit www.eatright.org/fnce. We would love to see you there.

US and India Collaborate on Unique Educational Event to Address Diabetes

India and the U.S. are only surpassed by China in the number of individuals with type 2 diabetes mellitus. The prevalence of diabetes in both U.S. and Indian populations continues to rise at an alarming rate, necessitating multi-pronged diabetes prevention efforts and use of evidence-based diabetes care methods to obviate the profound negative effects of diabetes. Non-invasive and inexpensive interventions that can help prevent as well as manage type 2 diabetes, such as lifestyle management, are vital to addressing the pandemic.



The Indo-U.S. Interdisciplinary Conference on Nutrition Practice Guidelines for Type 2 Diabetes Mellitus: Sharing Evidence and Best Practices to Improve Health Outcomes was held to address the burden of this chronic disease, particularly for Indians and for Asian Indians residing in the U.S. The event took place in Chennai, India on November 17th and 18th, 2012. Made possible through a grant by the [Indo-U.S. Science and Technology Forum](#) (IUSSTF) and organized by AODA and [Frontier Lifeline Hospital](#) (Chennai, India), this bilateral interdisciplinary event involved multiple key stakeholders, including dietitians, physicians, researchers and

government and industry leaders from India and the U.S. The proceedings made clear the importance of addressing diabetes within the socio-ecological framework and advancing diabetes prevention at all levels - primary, secondary and tertiary - through application of evidence-based guidelines and continued research. During and following the conference, ideas for future collaborative projects have been generated and dissemination of diabetes care practice points has been furthered. To learn more about the specific conference topics as well as the list of distinguished speakers, please go to <http://eatrightoverseas.org/page/indo-us-diabetes-conference>.

Country – United States

Public Health Issues Create Opportunities for Registered Dietitians in USA

A new emphasis in the United States on public health and community based health care creates opportunities for registered dietitians. Two new positions relate to important public health issues. The full text and support papers can be found in the Health Professions Section of the Academy's website, www.eatright.org. The first position released in August 2012 is "Food and Nutrition for Older Adults: Promoting Health and Wellness." The position statement follows:

It is the position of the Academy of Nutrition and Dietetics that all Americans aged 60 years and older receive appropriate nutrition care; have access to coordinated, comprehensive food and nutrition services; and receive the benefits of ongoing research to identify the most effective food and nutrition programs, interventions, and therapies. Health, physiologic, and functional changes associated with the aging process can influence nutrition needs and nutrient intake. The practice of nutrition for older adults is no longer limited to those who are frail, malnourished, and ill. The population of adults older than age 60 years includes many individuals who are living healthy, vital lives with a variety of nutrition-related circumstances and environments. Access and availability of wholesome, nutritious food is essential to ensure successful aging and well-being for the rapidly growing, heterogeneous, multiracial, and ethnic population of older adults. To ensure successful aging and minimize the effects of disease and disability, a wide range of flexible dietary recommendations, culturally sensitive food and nutrition services, physical activities, and supportive care tailored to older adults are necessary. National, state, and local strategies that promote access to coordinated food and nutrition services are essential to maintain independence, functional ability, disease management, and quality of life. Those working with older adults must be proactive in demonstrating the value of comprehensive food and nutrition services. To meet the needs of all older adults, registered dietitians and dietetic technicians, registered, must widen their scope of practice to include prevention, treatment, and maintenance of health and quality of life into old age.

The second position statement released in September, 2012 relates to the importance of fluoride in maintaining strong bones and teeth and reads:

It is the position of the Academy of Nutrition and Dietetics to support optimal systemic and topical fluoride as an important public health measure to promote oral health and overall health throughout life. Fluoride is an important element in the mineralization of bone and teeth. The proper use of topical and systemic fluoride has resulted in major reductions in dental caries, and its associated disability. Dental caries remains the most prevalent chronic disease in children and affects all age groups of the population. The Centers for Disease Control and

Prevention have named fluoridation of water as one of the 10 most important public health measures of the 21st century. Currently more than 72% of the U.S. population that is served by community water systems, benefits from water fluoridation. However, only 27 states provide fluoridated water to more than three quarters of the state's residents on public water systems. Fluoride also plays a role in bone health. However, the use of high doses of fluoride for osteoporosis prevention is considered only experimental at this point. Dietetics practitioners should routinely monitor and promote the use of topical fluorides for all age groups.

In addition, the Academy continues to expand the resources in the Public section of the website to include educational videos, nutrition games, diet reviews and recipes. These materials are developed to position the registered dietitian as the community's food and nutrition expert.

New Journal Editor

The Academy also is pleased to announce a new Journal of the Academy of Nutrition and Dietetics Editor-in-Chief: Linda Snetselaar, PhD, RD, LD. She will assume the position on June 1, 2013. Dr. Snetselaar is Endowed Chair, Associate Head for Admissions and Curriculum, and Professor in the Department of Epidemiology, College of Public Health, at the University of Iowa. Notably, she was principal and co-principal investigator there in the Lipid Research Clinic and other NIH studies, including the Diabetes Control and Complications Trial, Modification of Diet in Renal Disease, Dietary Intervention Study in Children, and others. Her research network includes colleagues in China, Africa, Micronesia, Romania, the UK and Canada.

*Sylvia Escott-Stump, MA, RD, LDN
ICDA Representative, USA*

Resources

French translation of IDNT available shortly

Edition of the International Nutrition and Dietetics Terminology (IDNT) into French (terms, definitions, SNAPShots and Comparative Standards). This translation has been endorsed as the official French translation by the Academy of Nutrition and Dietetics. The complete French translation of the 4th Edition IDNT Pocket Guide is available from Presses de l'Université Lavalin. Be sure to check their web site for updates <http://www.pulaval.com/> or contact Dominique Gingras at Dominique.Gingras@pul.ulaval.ca for details.

In addition, DC has updated our position paper on the Nutrition Care Process, available now in both English and French.

<http://www.dietitians.ca/Downloadable-Content/Public/NCP-and-IDNT-Statement-Eng.aspx>
<http://www.dietitians.ca/Downloadable-Content/Public/NCP-and-IDNT-Statement-Fre.aspx>

DC has been pleased to work in partnership with the Academy of Nutrition and Dietetics and Laval University Press to bring the IDNT to Francophone dietitians in Canada and around the world.

*Corinne Eisenbraun, MA, RD
Director, Professional Practice Development*

Dietitians of Canada
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Professional Continuing Education at your fingertips

Dietitians of Canada's new Learning on Demand (LOD) site brings evidence-based continuing education to dietitians in a convenient, new way. Designed for maximum mobility, our Learning on Demand service lets you engage in learning via the web - without barriers of time or distance.

Learning on Demand offers the latest evidence on a wide variety of food and nutrition topics accessible online or downloadable to portable devices including tablets, smart phones and mp3 players. Most sessions also include handouts, reference lists or other supporting materials to support high quality audio or video presentations.

New content is uploaded frequently so be sure to stop into LOD regularly to see what's new. Some of the newly released items include:

- Get the newest evidence, diagnostics and diet advice to help you support your clients with Celiac Disease and gluten sensitivity by internationally recognized expert, Shelley Case.
- Explore the progression and nutrition management of chronic kidney disease (CKD) in the elderly.
- Understand what's going on in today's workforce through Dr. David Foot's dynamic and engaging presentation on generational motivators.
- Learn from a leader in change management how to effectively implement change, using IDNT as an example, applying the ADKAR change management approach.

Access these opportunities and all the great Learning on Demand content at:
www.dietitians.ca/elearning

Karen Boyd, MSc, RD
Dietitians of Canada
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There's an App for That!

In the United States, more than 100 million people own smartphones, app downloads number in the billions per year, and the typical user spends more than an hour a day using apps. As these numbers rise, apps will continue to become more and more integrated into the lives of average Americans. The Academy of Nutrition and Dietetics is committed to empowering its members to be food and nutrition leaders and recognizes the opportunity that apps offer. Thus, the Academy has begun developing apps for both practitioners and consumers. Currently, there are three Academy apps, available for download from the iTunes App Store and Google Play, with several others in development. The three that are currently available are listed here:



NutriGuides

NutriGuides provides dietetics practitioners with a mobile version of the Academy's Evidence Analysis Library (EAL), a valuable resource for nutrition research and practice guidelines. Beginning at the home screen, users can choose to search *NutriGuides* in three ways—by topic, diseases/conditions, or steps in the Nutrition Care Process.



Is My Food Safe?

The *Is My Food Safe?* app, part of the Home Food Safety public awareness campaign from the Academy of Nutrition and Dietetics and ConAgra Foods, guides consumers through a series of questions about safe cooking temperatures, food storage, and kitchen safety to help them make decisions that reduce the risk of food poisoning.



The Gluten Detective

This app helps consumers with gluten sensitivity negotiate the often difficult task of shopping for groceries while avoiding foods with gluten-containing ingredients. The heart of the app is the Gluten Detector Tool. This interactive questionnaire guides users through a decision tree to help them determine whether a particular food contains gluten. It progresses through a series of questions about the product's ingredients and package label until it can be determined whether the product fits into one of three categories: Contains Gluten (or may be cross-contaminated with gluten), Labeled Gluten-Free, or Seems Gluten-Free.

In addition to these apps, the *Journal of the Academy of Nutrition and Dietetics* is available through Elsevier's *Health Advance Journals* app and an individual *Journal* app is currently in development. The Academy and Commission on Dietetic Registration are also working on a Professional Development Portfolio app as well as an app that allows members to take *Journal* Continuing Professional Education quizzes on their mobile devices. As apps become more and more commonly used tools for education, organization, and productivity, the Academy will continue to find ways to use them to help both practitioners and the public improve the nation's health.

Sylvia Escott-Stump, MA, RD, LDN
Academy of Nutrition & Dietetics

More impact and influence of the Spanish Journal of Human Nutrition and Dietetics

The Spanish Journal of Human Nutrition and Dietetics (RENHDIET), formerly *Dietetic Activity* (Actividad Dietética) is the official scientific publication of The Spanish Association of Dietitians-Nutritionists. RENHDIET is published quarterly and has the main objective to be the leading journal in the field of human nutrition and dietetics. Its scientific impact and influence is growing and nowadays are similar to the main journals in Spain and Latin America, according to November 2012 data.

RENHDIET is included in the collection of the 50 best magazines of biomedical issues from Elsevier-Doyma (Elsevier Doyma Spanish Medical Collection). Any institution that buys the pack

of Elsevier journals can access the entire contents of the Spanish Journal of Human Nutrition and Dietetics through Science Direct (always from the IP address of the institution). Our journal publishes scientific articles that have been peer-reviewed and include the main topics of interest in nutrition and dietetics: hospital and clinical nutrition, diet therapy, applied dietetics, community nutrition and public health, basic and applied nutrition, food and health education, food services, social and commercial cooking and food technology, food science, toxicology and food safety, food culture, sociology and anthropology related with food, humanitarian cooperation, etc.

Journal of the Portuguese Association of Nutritionists

Revista Nutricias, is the Journal of the Portuguese Association of Nutritionists, regarding technical and scientific issues with four editions per year. All professionals of the nutritional sciences background can submit articles to this journal which will be published after the approval of journal's scientific committee. Information about the journal and publication guidelines can be found at the Association's website <http://www.apn.org.pt/scid/webapn/defaultCategoryViewOne.asp?categoryID=857>

Awards and Grants

The Academy of Nutrition and Dietetics Foundation makes available awards, fellowships, and grants each year to international nutrition professionals, students and organizations through [To download an application click here](#). Please contact Amy Donatell at adonatell@eatright.org for more information.

First International Nutritionist/Dietitian (FIND) Fellowship for Study in the USA

This award is given to assist foreign nationals who are pursuing postgraduate work in the USA and have a clearly articulated plan to return to their country. The annual deadline to apply is February 1st. The award amount is \$2,000.

Wimpfheimer-Guggenheim Fund for International Exchange in Nutrition, Dietetics and Management Essay Award

This award is given to provide for the international exchange of needed nutrition, dietetic and/or management information for the benefit of the nutritional health of the world community. The deadline to apply is April 1st. The award amount is \$1,000. Up to two awards may be given. [To read past essays please click here](#).

American Overseas Dietetic Association International Project Award

The purpose of this fund is to foster collaboration and the sharing of knowledge and skills among food and nutrition professionals in the international community. An award will be given to AODA members who intend to work in partnership with another food or nutrition professional on a project that will benefit the local community of one of the individuals. The premise is that the AODA member and colleague will have somewhat different knowledge and skill sets that, when brought together, will serve to fulfill a special project. The annual deadline to apply is February 1st. The award amount is \$3,000.

Colgate Palmolive Fellowship in Nutrition, Oral Health/Dental Education

This Fellowship is given to support master's thesis research on nutrition and oral health/disease or nutrition and dental education or doctoral or postdoctoral research on nutrition and oral health/disease or nutrition and dental education for individuals working in dental and nutrition education. Non-US residents may apply. The annual deadline to apply is April 1st. The fellowship amount is \$15,000.

Wimpfheimer-Guggenheim ICDA Welcome Fund

This fund supports new members of the International Confederation of Dietetic Associations. New member organizations will receive \$500 (US) to provide resources for further development of their participation in ICDA activities. A country is eligible to receive the grant once.

Calendar of Events

1st Worldwide Congress on Hidden Hunger from 6 to 9 March 2013

Experts from Germany, the USA, the UN and the FAO will come together for the first time to join the international congress from the 6th to the 9th of March 2013 at the University of Hohenheim in Stuttgart, Germany. Their common goal is to bring the crisis caused by a worldwide micronutrient deficiency to the attention of politicians and the general public and to demonstrate which strategies can be used to get the problem under control. Fighting hidden hunger is an important task to be accomplished not only in poorer countries, but also in many developed nations in Europe and North America.

Visit the homepage of the congress at: <https://hiddenhunger.uni-hohenheim.de>

Society of Behavioral Medicine 34th Annual Meeting & Scientific Sessions - San Francisco, California from March 20-23, 2013

Embodying the meeting theme, "*Technology: the Excitement and the Evidence*," the conference program will explore the many ways that technological innovations are expanding the reach and impact of behavioral medicine. For more information pertaining to program updates, submission procedures and deadlines, as well as things to see and do in San Francisco, visit the 2013 SBM Annual Meeting website: <http://www.sbm.org/meetings/2013>.

1st International Probiotics Prebiotics and Functional Food Congress, April 11 – 13, 2013

Organized by Turkish Probiotic Prebiotic Association (TPPA) at Sueno Hotel Side, Antalya, Turkey. For detailed information please visit the website: www.ppd2013.org

First edition of the World Forum for Nutrition Research Conference: Mediterranean Food on Health and Disease from May 20th–21st, 2013

The World Forum for Nutrition Research Conference will provide the opportunity to have an overview of recent advances in research regarding the health benefits (as well as other social and cultural benefits) of the typical foods that form the Mediterranean diet.

The World Forum for Nutrition Research Conference emerges as the meeting point of three major events to be held in Spain in 2013: *The International Congress of Nutrition* (in Granada) organized by the International Union of Nutrition Sciences, the *World Congress on Nuts and*

Dried Fruits (in Barcelona) organized by the International Nut and Dried Fruit Foundation, and the *International Congress on Mediterranean Diet* (in Barcelona) organized by the Mediterranean Diet Foundation. This Forum is organized in collaboration with the Iberoamerican Nutrition Foundation (FINUT), the International Nut and Dried Fruit Foundation and the Mediterranean Diet Foundation.

On the conference website www.worldnutrition2013.com you can find more details about the event.

12th Nutrition and Food Congress by Portuguese Association of Nutritionists from 16th to 17th of June 2013

2002 and now it is the biggest congress in this field of science in Portugal. Usually it receives 1200 to 1500 participants (nutritionists, dietitians, medical doctors, engineers and students). This year the Congress will focus on "Surprise and undertake future". More information can be found in www.cna.org.pt.

Important dates:

25th March 2013 – Last day for abstracts (400 words) submission

19th April 2013 – Early registration fee

8th International Conference on Culinary Arts and Sciences - Global, National and Local Perspectives (ICCAS 2013), from 19 to 21 of June, 2013

Hosted by Portuguese Nutritionists Association in collaboration with the Faculty of Nutrition and Food Sciences Rectorship building of Porto University – Porto, Portugal.

This Conference aims to build on the success of past programs by drawing together individuals and organizations from a variety of disciplines, where experts and practitioners can exchange ideas and develop themes of mutual interest and benefit.

To achieve the central thrust of the Conference, that is combining culinary arts and science, the themes will focus on five major areas: 1) Foodservice, 2) Food Habits and Nutrition, 3) Food Science and Technology, 4) Food and Tourism, and 5) Food Choice and Consumer.

More information can be found in www.iccas2013.org. Important dates:

24th April 2013 - Early registration fee

10th June 2013 - Proceedings published

20th International Congress of Nutrition (ICN) from September 15-20, 2013

Being held at Granada (Spain), at the Granada Congress Center, Paseo Violon, S/N 18006 Granada, Spain. Topics covered include advances in nutrition research, public health nutrition, nutritional assessment, food culture practices, functional foods & bioactive compounds, and so on. Visit www.icn2013.com for more details.

12th Hellenic Dietetic Association Congress, 5-8 December 2013

The 17th ICRNM in Wurzburg, Germany from 6-10 May 2014

This will be an important congress for all dietitians involved in the nutritional care of patients with Kidney Disease, whether Acute or Chronic. A dedicated website for the ISRNM 2014 Congress will be added to the ISRNM website: www.renal-nutrition.com and please follow any updates.