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Feature Article

Project Update on the Food Sustainability Initiative

Web-based Sustainable Food Systems Toolkit in Progress!

The ICDA Food Sustainability Initiative is in phase two of the project, which focusses on building an online toolkit that supports dietitian-nutritionists to integrate sustainability into their practice and measuring our collective contributions to a more sustainable world.

For readers new to this project, a quick review of the back-story: In phase one, we ran a global conversation about Sustainable Food Systems (SFS) with 72 dietitian-nutritionists from 30 countries. We created a collective vision, learned about barriers to integrating SFS into practice, and made recommendations to ICDA for strengthening the organizational role in supporting SFS. The high-level recommendations were to:

i. Provide strong leadership for sustainable food systems in practice
ii. Facilitate learning and collaboration among ICDA members
iii. Identify and engage global partners in this work

These are captured in more detail in the final report of April, 2019.

In Phase two we are working to support two of these recommendations. To support item i., Provide strong leadership for sustainable food systems in practice, we are measuring the profession’s current contributions to SFS, allowing us to track our progress over time. We developed methods and collected members’ input into indicators in phase one. Now we are collecting data. We hope the work will be ready for sharing in October, 2020.

Two barriers identified in phase one were:

1) a professional culture that does not always support inclusion of sustainability in practice, and

2) the lack of a common vision and language to orient actions. These barriers led to the recommendation for item ii. Facilitate learning and collaboration among ICDA members. To support this, we are developing a toolkit. We have hired two team members, Haley Jenkins (dietetic trainee) and Chaiti Seth
(sustainability educator, sustainable food systems and community development specialist) and gathered a group of 18 advisors from 14 different countries to inform the development of a web-based SFS Toolkit. The toolkit is well underway and the beta-version will be ready for testing in September, 2020! At that time, we will be testing it with dietitians and improving it before a release of the final tool.

Our vision for the toolkit is that: *Dietitians bring a deep understanding of sustainable food systems into their practice. Access to a range of practical, evidence-based and context-specific tools and resources that will support all dietitians in making positive contributions to sustainability. Dietitians play key roles in creating healthy communities and accelerating a shift towards sustainable food systems.*

Our Objectives are to:

- Provide accessible, relevant and transferable information on the interconnections of sustainable food systems and human health
- Provide practical, evidence-based tools for incorporating sustainability into dietetic practice in a diversity of roles and cultural contexts
- Facilitate peer-learning and collaboration to deepen understanding and support incorporation of sustainability into dietetic practice

The toolkit curates a suite of tools to facilitate knowledge and skill development for SFS in practice, and facilitates peer-to-peer collaboration and learning. It includes a sustainability self-assessment for dietitians, a database of existing, relevant resources and examples, case studies, practice briefs, practice tools, community discussion forums, and a professional development section. We have done our best, with support from our Advisors, to find and include resources that are relevant to a diversity of roles, practice areas, geographic and cultural regions.

We are excited to share this beta version with dietitians in September or the nearest future!

Liesel Carlsson & Edith Callaghan
Canada
Information and Reminders
International Congress of Dietetics (ICD), 2020

Please keep in touch with ICD 2020 and ADSA website for updates:
https://www.adsa.org.za/icd-2020
http://www.icda2020.com/

President, ADSA

National Dietetic Association Reports

Country – Belgium

News from Francophone and Flemish Dietetic Organisations (VBVD& UPDLF)

New Reimbursement for the Support of Overweight Children by Registered Dietitians in Belgium

As in most parts of the affluent world, the prevalence of obesity in Belgium is still increasing.
This will lead to comorbidities, increase of sick leave, loss of income, reduced quality of life for the patient and rising healthcare expenses for the government. In 2018, 49.3% of the Belgium adults (18-65 years of age) reported being overweight (BMI > 25) and 15.9%, obese compared to 41% and 10.8% respectively in 1997. The percentage of overweight children (2-17 years of age) increased from 13.6% in 2017 to 19% in 20018 and 5.8% of the children were reported obese in 2018.

In view of the concerns about the obesity epidemic and especially childhood obesity in Belgium, initiatives were taken not only by the Belgian dietetic organizations to create awareness among the populace through publicity campaigns. Politicians also organized a hearing at the Belgian Federal Parliament on a broad Belgium approach to obesity and childhood obesity in particular. The President of the Flemish Dietetic Association (FDA) was invited too and expressed the FDA’s vision on this matter. This resulted in an announcement of the Federal Minister of Health, Mrs De Block in November 2018 about an agreement with the National Institute for Health and Disability
Insurance (NIHDI) to reserve a yearly budget of 5 million Euro for dietary advice and follow up of obese children (age 6-17) by 2020.

Subsequently, early 2019, both Presidents of the Francophone and Flemish Dietetic Organisations (Hélène Lejeune and Rian van Schaik) were respectively invited at the Ministry of Health, to discuss the conditions for reimbursement of dietitians for the treatment by of obese children. The Presidents also advocated the inclusion of prevention of obesity by treating overweight children too. In the latter case, the emphasis should not solely be on energy restriction but on improvement of the food pattern and life style of the child and of their parents/family. Therefore, dietitians responsible for treatment of overweight children should also be trained in motivational coaching techniques.

The original plan of the Ministry of Health was to reimburse six 30 minutes consultations by a dietitian just for one year. The Presidents pleaded however for a follow up by the dietitian of five (5),5 hours in total over two years, since
lifestyle changes usually take at least 2 years according to scientific literature. This amendment was included in the final treatment plan. From 1st April 2020, reimbursement for the treatment of overweight and obese children by dietitians will be available upon declaration of cost of 40 Euro per hour to the NIHDI.

For patients, this means in practice, an out of pocket expense of 25% of the 40 Euro per hour, and in cases of recognized low income earners, 10%. Reimbursement of the dietitian is made dependent on the condition that treatment requires written referral by the family physician or paediatrician. Furthermore, reimbursement for this treatment will be available only once during childhood.

It is hoped that these changes in reimbursements will contribute to better treatment by the dietitians of overweight and obese children, leading to a healthier lifestyle and wellbeing in later life, which should be cost-effective.

President Rian van Schaik
VBVD (Flemish Association of Dietitians)

President Hélène Lejeune
UPDLF (French-speaking Dietitians)

Country – Israel

News from Israeli Dietetic Association

Feeding the Critically Ill Mechanically Ventilated Patient during the Covid-19 Epidemic

A position paper on nutrition care in critical pulmonary patients in the context of COVID-19 was recently composed by Atid, the Israeli Dietetic Association, and presented to the Israeli Ministry of Health and hospitals across the state.
New challenges have arisen in the area of nutrition care in hospitals due to the recent outbreak of the coronavirus epidemic. It is most likely that the proportion of patients requiring respiratory support will increase and therefore, and so too will the proportion of patients needing specialized feeds, including enteral and parenteral nutrition.

In general, every person who is hospitalized for more than 48 hours in the ICU is at nutritional risk. Among ventilated patients with COVID-19, it is expected that there will be a relatively higher proportion of older patients with co-morbidities, sarcopenia, and fragility, and therefore they will be at increased nutritional risk. It is also known that the prevalence of gastrointestinal symptoms (diarrhea, abdominal pain and vomiting) is significant and ranges from 5-40%. These symptoms, together with changes in taste and smell, may result in decreased dietary intake even prior to admission to the ICU.

The principles of nutritional therapy for these patients are based on well-known guidelines for nutrition care for acute respiratory patients, the current state of the art, and strict adherence to the prevention of infection.

The purpose of this document: Feeding the Critically Ill Mechanically Ventilated Patient during the Covid-19 Epidemic is to train dietitians rapidly in treating mechanically ventilated patients who have been infected with COVID-19, by concentrating the most up-to-date information and principles of nutritional care of acute respiratory patients.

Prof. Niva Shapira Ph.D.,R.D.,Agr.
R&D, functional and Clinical nutrition
Country – Chile

News from Chilean Dietitian Professional Association

President Cecilia Sepúlveda Alarcón

Let us Reflect what we want to be

During the last months, a social earthquake has occurred in Chile, voices have been raised from all sectors asking for and demanding respect for their rights. Spaces for conversation, dialogue and reflection have probably been created, through citizen councils and dialogues, or in a more intimate way in our homes, between colleagues, friends. Perhaps, there have been breaks or heated discussions and without a doubt, something has moved.
Soon, as Chileans, we must choose how we want our Constitution to be. We must become aware of the social role of our profession and understanding what it means in-depth to be Dietitians. Looking for ways to achieve constitutional changes in favour of those who encouraged us to continue this career ... our patients and users is very important. But let's go step by step:

In Chapter III, article 19, the Chilean Constitution assures all people of:

1° The right to life and the physical and mental integrity of the person.

9° The right to health protection:

- The State protects free and equal access to actions to promote, protect and recover the health and rehabilitation of the individual.
- It will also correspond to the coordination and control of actions related to health.
- It is the preferential duty of the State to guarantee the execution of health actions, whether they are provided through public or private institutions, in the form and conditions determined by law, which may establish mandatory contributions.
- Each person will have the right to choose the health system they want to use, be it state or private.

10° The right to education:

- Education aims at the full development of the person in the different stages of his/her life.

These three articles directly involve Nutritionists. Nutrition and Food is one of the essential pillars for the integral development of people; being able to affect all areas of life. The Constitution ensures the right to health protection, as well as free and equal access. However, there is a great difference between a public hospital or Cesfam and a private hospital. The difference is abysmal. The public system has undoubtedly improved, but still does not comply with equal access. For example, if a person with FONASA (public health insurance) wants to access professional services of dietitians, the care by FONASA is for people who are overweight or obese or with cardiovascular risk factors by implication,
dietitians cannot respond to people with other pathologies that depend on food as a single or complementary therapy. Although this same article of the Constitution clearly speaks of protection and health promotion, still, according to FONASA guidelines, one can only have access to dietitians care if obese. Then, it is a fully assistance-oriented look because when there is an existing disease, there is no health promotion and less prevention.

On the other hand, in public health, there are two controls by dietitians between 0 and 5 years, how can we educate efficiently in this way? It is impossible, and we forget epigenetics, we have gone from malnutrition to obesity, and still, this does not facilitate the promotion and prevention of diseases of nutritional origin. Regarding, article 10 which says ... education aims at the full development of the person; at a public level we have teachers serving 45 children. How will it be possible for them to provide adequate food and nutrition education? The recommendation here, is that the “cobbler should stick to his job”. Can medical doctors do the work of endodontics as well as a dentist? of course not. They must have ad hoc professionals doing what they know how to do. Self-care does not pertain only to drugs, alcohol and sexuality but also pertains to food.

I left the first article from our constitution listed above to be last in this writeup. Our country’s Constitution defends the physical and mental integrity of all Chileans, without discrimination based on creed, politics or money but how can one explain the high rate of obesity in the poorest sections of our economy without a good education. One can see that obesity is synonymous with inequity; I understand this concept as the inequality that can be prevented. Therefore, we cannot ensure health without ensuring access to healthy food although we cannot force anyone to eat healthily because this is exercising autonomy. Still, we must provide adequate and sufficient education and information so that the choice of healthy eating will be made by the individual.

Thus, colleagues, this writeup is a call for reflection, do we want health to be subject to people's monetary resources? Can we practice the right to health without having the right to healthy food? Is it correct to think that 12 years in
school is just for preparation for University selection test? We must look forward to see how we can contribute to our society, we need to be more united, then we can answer these questions and generate concrete actions for them.

Cecilia Sepúlveda Alarcón
President, Chilean Dietitian Professional Association

Country – United States of America

News from The Academy of Nutrition and Dietetics

The Academy of Nutrition and Dietetics Responds to the COVID-19 Pandemic

The coronavirus pandemic affects virtually every aspect of society on a global scale. For health care professionals, COVID-19 has made a huge impact on preparedness, patient care, food safety and access, and many more areas. The Academy of Nutrition and Dietetics has responded to the pandemic by immediately assembling and providing valuable resources for consumers and health practitioners alike.

We created the online Coronavirus Nutrition Resource Center for consumers, with articles, tips, videos and activities for individuals and families. The consumer resource center is available in English, Spanish, Hindi and Arabic.

The Coronavirus (COVID-19) Professional Resource Hub features an ever-expanding list of resources and recommendations, Q&A forum and free webinars. Academy members on the front lines of COVID-19 care are sharing stories of successes, concerns and challenges.
We have created social media kits in English and Spanish with shareable messaging and graphics regarding nutrition and food safety for families.

The Front Line Webinar Series, a collection of online webinars, is available at no cost to Academy members and non-members alike, through the generous support of the Academy of Nutrition and Dietetics Foundation.

The Academy’s efforts during the pandemic also include advocacy for legislation and public policies, particularly those that make it possible for nutrition and dietetics professionals to provide even more potentially lifesaving services, such as online counseling and other telehealth services. In addition, the Academy has assessed the impact of COVID-19 on issues such as licensure laws, supervisor requirements and the availability of sites for professional credentialing and certification.

Simultaneously with COVID-19 response, the International Affiliate of the Academy of Nutrition and Dietetics (IAAND) remains focused on the professional needs of Academy members who live and work outside the United States or are interested in associating or collaborating with international members. One of IAAND’s major activities is offering professional development activities and opportunities to network.

IAAND and the Nutrition and Dietetics Association of the Philippines organized a pre-conference workshop at the 65th NDAP Convention in Manila on February 26. Nearly 90 participants created innovative ways and techniques for dietitians in the Philippines to manage their professional branding. Personal and professional traits, strengths and expertise necessary to provide ethical
leadership in dietetics, especially when using social media, were presented with an overview of social media platforms; ways to create a social media brand specific to personal practice; and addressing nutrition and dietetics issues of importance in the Philippines.

IAAND plans to participate in the International Congress of Dietetics, rescheduled for 2021 in South Africa, and present a session featuring activities of IAAND members to promote the advancement of global dietetics.

IAAND conducts monthly webinars for members. This year’s webinar topics ranged from Being a Media Savvy Dietitian, Tips and Tricks for Enhancing Motivational Interviewing Education (for dietetics students), Behavioral Change through MI, Malnutrition, Oats and the Microbiome (available in English and Spanish), Nutrigenomics and Role in PCOS Nutritional Management and Intuitive Eating. Annual subscriptions for the recorded webinars are available to non-members at tiered pricing.

IAAND also supports efforts of Country Representatives to have local "meetups" in their country to share and discuss local nutrition and dietetics accomplishments and challenges, often held with national dietetics meetings. For more information about IAAND activities visit the IAAND Website.

Another of the Academy’s member groups is the Global Member Interest Group. GMIG is community of members focused on improving the nutritional status in regions with high burdens of malnutrition or with nutritional crises due to conflict or natural disasters, through the sharing of information, resources, and ideas among Academy members, students, governmental and non-profit aid organizations, and health workers within these countries.

GMIG raises the profile of international malnutrition within the Academy while developing the capacity of Academy members with shared ideas, resource tools, research, experiences and strategies on the prevention and management of malnutrition in vulnerable people in developing regions whose nutritional status is still highly intertwined with issues of poverty, sanitation, unclean water, agriculture, literacy, and cultural norms and whose financial
and professional resources are limited. More information is available about the Global MIG at https://gmig.eatrightpro.org/.

To apply for Academy membership, complete an **International Membership Application** and **International Verification Form** and return them to the Academy with payment. Materials and additional information can be found online, by email or by phone at +1-312/899-0040, ext. 5000, Weekdays, 8 a.m. – 5 p.m. Central Time (within the U.S. call 800/877-1600, ext. 5000).

Joan Schwaba, MS, RDN, LDN

Director, Strategic Management
Academy of Nutrition and Dietetics, USA.

**Country – Caribbean**

News from Caribbean Association of Nutritionists and Dietitians (CANDi)

**Nutrition for Infection in Adults and Children – Past Lessons**

With the shift in focus to obesity and chronic diseases, it is a re-awakening when infectious diseases again rear their heads. Although vector (mosquito) transmitted infections have always been with us, the epidemic of chikungunya (chikv) in 2016 made the medical profession review their treatment protocols. The scare of Zikv in 2018 again challenged us, indicating that our vigilance cannot be relaxed. This occurred simultaneously with the upsurge of infectious diarrhoea in babies causing deaths in hospital from protein energy malnutrition (PEM). This new influenza pandemic of covid-19 has never been experienced in this generation and our health sector personnel are stretched beyond local resources, despite the many WHO praises of their efficient handling of the systems in place. There is no known medical cure for these new viral diseases and nutrition is often overlooked.

**Viral transmitted infections and nutrition**
The role of nutrition in treating infections, was especially evident for the elderly, those with metabolic conditions and babies. It reminded us that it was the intensification of the nutrition programme in the 1970s and control of infections that eventually led to the reduction to negligible levels of PEM in children under 5 years of age. During the Chikv crisis, many elderly persons were hospitalized and died, and yet there is a case to be made for proper nutrition to contribute to the survival rate.

On a personal level, my own 86 year old father was able to overcome the attack of chickv even while travelling from Kingston to Montego Bay (4½ hours) and back while ill, as he insisted on attending his grand-daughter’s wedding. This meant consistent nourishment by feeding and drinking of high calorie meals/feeds adjusted in consistency for the reduced appetite, and this led to his full recovery.

Many persons recognized that hydration was important but selected to use the high potassium coconut water. Perusal of the blood profile however, informed me that the sodium levels were exceptionally low relative to the potassium levels so that the reverse formula was warranted. We knew that the chikv tended to aggravate already existing symptoms such as arthritic pain, and being hypertensive and on medication, the result was to intensify the effect of the medication in ridding the body of sodium. The remedy was to reduce visible potassium intake from fruits, vegetables and fresh foods while adding salt source to the diet. Another observation was the need for more vitamins such as A and B₁₂ to supplement declining dietary sources. These lessons in treatment were repeated with subsequent cases referred to me, leading to positive results even for the elderly who were already hospitalized.

**Diarrhoea and other infections**

The temptation is to generalize nutrition treatment and information as if we are all the same. The above treatment is contrary to the high potassium feeds that would be more appropriate for children suffering with diarrhoea. It should be noted that individualization of nutrition assessment and treatment is just as important as individualization of medical assessment and treatment. In the community, babies and children at risk of malnutrition are subject to nutrition
assessment and monitoring from birth. The metabolic nutritionist or clinical dietitian in hospital should also be an integral part of the medical team and be included in all case consultations from the start. Too often, medics ignore the need for nutrition intervention until it is too late. Data from the USA show that patients deprived of appropriate food in hospital, especially when kept too long on the drip, promotes or aggravates malnutrition and patients may die.

The Future
It is noteworthy, that many of our government hospitals have only general dietitians and the private hospitals are not even required to have dietitians. The feeding of patients in hospital is the purview of the nurses and is often erroneous and inappropriate, while the true dietetic specialists are not consulted. Their expertise includes calculating individualized diets and especially high calorie, metabolic feeds for babies suffering with protein energy malnutrition. This condition should not have to lead to death. Government hospitals should employ clinical dietitians separate from those involved as general dietitians or administrative dietitians and all private hospitals should be required to have consultant nutritionists. The nutrition and dietetics profession is woefully understaffed in hospital and community practice and this must be remedied to achieve high quality medical care.

RNutr. Patricia Thompson
Caribbean – Jamaica

Caribbean Nutrition Day 2020
Caribbean Nutrition Day is organized on every 1st of June. The theme remains the same each year (Healthy Eating Active Living – HEAL); however, the tag line is changed. The Caribbean Association of Nutritionists and Dietitians (CANDi) is the organization responsible for spearheading the focus of Caribbean Nutrition Day. The topic of Caribbean Creativity became an important point for consideration to educate and promote the use of local foods and natural resources, especially during the COVID-19 crises. The benefits of using locally available foods and resources are important to increase nutritional intake, boost immunity and overall wellness.
The theme for 2020 is, therefore:
"Healthy Eating, Active Living: Be Creative Caribbean Style!"

The rationale behind the selected tagline this year were as follows:

While CANDi is a professional association, its role in the Region involves community outreach. Therefore, as part of its health promotion and education efforts, information is shared, and activities are encouraged among the general public across the Caribbean.

Numerous health practices in the Caribbean can be maximized to promote optimal nutrition, adequate exercise, and overall wellbeing. Thousands of visitors travel to the Caribbean to enjoy the natural health resources often taken for granted by citizens. So, each person is reassured that it is okay to embrace the nutritional and wellness benefits of locally grown as opposed to imported foods.

Individuals are encouraged to be adventurous and to try nutritious cuisines from across the Caribbean while enjoying national dishes by incorporating heart-healthy fats and oils. Persons are also encouraged to use the multi mix principle to obtain a good nutrient supply from combining different food groups.

In addition, there are wonderful natural available resources such as the beach, cold river water, hot water springs, mineral baths and rich bentonite soil. Children in the Caribbean still sing, dance, and play games like hopscotch, skip rope, and "Chinese" skip (a game made from ropes of rubber-band where they jump in skilful array of movements). The Caribbean is also blessed with valuable heritage, music, and ways that evoke laughter and dance, thereby helping to improve overall mental health.

Some key messages are highlighted on the colourful flyer, and dietitians around the globe are invited to participate in available nutrition and wellness practices wherever they are. Planning to visit a Caribbean island of choice? Come and experience distinct Caribbean flavours!
Dorothy M. Graham-Charles, PhD Candidate
President
Board of Directors 2019 - 2021
Caribbean Association of Nutritionists and Dietitians [CANDi]

Country - Mexico

News from Mexican College for Dietitians

REDCIEN: A NETWORK FOR PROMOTING EVIDENCE-BASED PRACTICE
AMONG MEXICAN DIETITIANS

Nancy G. Valenzuela-Rubio, BN
Edna J. Nava-Gonzalez, PhD

Nancy G. Valenzuela-Rubio and Edna J. Nava-Gonzalez
BACKGROUND

Health diseases related to over or under nutrition are leading causes of deaths worldwide. It is same panorama in Mexico. Nutrition intervention is an important process that contributes to improvement of people’s health and availability of trained health care professional specializing in nutrition is essential. Deciding the best intervention for a patient or community is crucial to achieving the United Nation’s Sustainable development Goals. It is not possible to implement successful sustainable strategies without evidence-based practices.

According to the national code of ethics and the code of good practice promoted in Mexico by the Mexican College for Dietitians (CMN, in Spanish) CMN, a dietitian has a moral commitment to the generation and application of knowledge as well as disseminating the advances in nutrition among professionals and society. Recognizing and promoting research in nutrition is an opportunity for enhancing health and human development in Mexico.

RedCieN (Science and Nutrition Network) is a strategy for promoting evidence-based practice of as well as food and nutrition research among Mexican dietitians. RedCieN has been developed through the Mexican College for Dietitians by Nancy Valenzuela-Rubio and Edna Nava-Gonzalez in 2017 during Edna Nava-Gonzalez’s position as President of CMN.

Main objectives:
1. To consolidate national and international professional networks between scientists and practitioners in nutrition.
2. To promote food and nutrition research among Mexican dietitians.
3. To train Mexican dietitians on evidence-based practice and research.

RedCieN has been working in the following activities to promote evidence-based in nutrition since 2017 to date.

1. Implementation of a science poster presentation during the first and second International Congress by the Mexican College for Dietitians, a total of 23 posters were presented by different institutions around the country, 2017-2018.
3. A Journal for Science and Nutrition (RedCieN) was registered in the National Institute of Copyright (INDAUTOR), 2018 and production of the ISSN is in process.
4. Three articles on mechanisms for losing weight; evidence-based practice in nutrition and antioxidants for preventing type 2 diabetes mellitus respectively, published on home webpage for associated dietitians (https://www.cmnutriologos.org/seccion.php?sec=17)
5. A direct contact with the PEN system (Practice-based Evidence in Nutrition) was established. Free meeting for dietitians in collaboration with the Autonomous University of Nuevo Leon, in 2018.
7. 39 articles have been published in the first and second edition of the Journal of RedCieN, January-June 2019 and July-December, 2019.

Conclusion

Health diseases related to over or under nutrition are leading deaths worldwide. Trained health care professional specializing in nutrition is essential to contribute to improve statistics. RedCieN is a network for training Mexican dietitians in evidence-based practice as well as in food and nutrition research.
RedCieN has been implementing some strategies, it is necessary to continue to enhance the network.

References


Edna Nava and Nancy Valenzuela
RedCieN
Mexican College for Dietitians (CMN)

Country – Singapore

News from Singapore Nutrition and Dietetics Association (SNDA)

Experiences during the COVID-19 Health Crisis

Singapore has been fighting COVID-19 and our dedicated healthcare professionals have been at the forefront in providing support during this health crisis. On April 7, 2020, a set of safe distancing measures, known as the Circuit
Breaker (CB) were implemented. This was a strategy designed to reduce the number of local transmissions in the community.

As healthcare professionals our primary concern is, as always, the health and safety of our patients or clients we serve. Dietitians and Nutritionists have contributed towards supporting the fight against this health crisis in many ways. Some have been fighting on the front line ensuring that acute patients receive the optimal nutrition they need to aid recovery from COVID-19. Ms. Maja Vukmirovic shares her experience in Food Service at KK Women’s and Children’s Hospital, “We saw a challenge to develop and operationalize a Circuit Breaker Menu. This approach was conceived not only to manage operations but for the continuity of the business as well. In order to decipher roles and responsibilities of every team member without compromising service quality and deliverables, teams were split into two sections and a CB menu was conceived. Whilst the menu was varied with different cuisine choices offered at every meal, it did not compromise on the provision of therapeutic variety for patients with special dietary requirements”.

Furthermore, Dietitians and Nutritionists continue to support and advise patients on health and nutrition by remotely tapping on available technology. Ms. Alka Sinha, Nutritionist shares her experience working from home “work from home during CB was a challenging journey initially. Later it became more interesting by learning to use new technology such as Zoom. I used Zoom for my virtual consultations, communication and to keep up with professional development”. Ms. Jamie Lye who works at National Youth Sports Institute (Singapore) saw this experience as a new challenge “COVID-19 has pushed us to engage our audience and stakeholders online. Beyond just delivering the content via an online web conferencing platform, I found myself searching for online games and thinking of activities to make use of the unique situation we have”.

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Schools and Institutes of Higher Learning shifted to full home-based learning. Ms. Win Nie Loh shares her experience as a Senior Lecturer at Temasek Polytechnic on home-based learning “interacting with students without being able to see all their expressions was actually not as bad as I thought. I could still feel the energy in the classroom through the engagement and their endless inquisitive list of questions. There is a saying that ‘opportunity always lies in challenges’ and I have learned many different tools during this home-based learning e.g. Padlets, Mentimeter, Microsoft Teams, Blackboard Collaborate Ultra”.

**New Sugar Measures to reduce Singaporean’s Sugar Intake**

To continue to win the War on Diabetes, the Ministry of Health (MOH) and Health Promotion Board (HPB) have introduced a set of new regulatory measures intentionally designed to reduce the sugar intake from pre-packaged sugar sweetened beverages.

Dr Kalpana Bhaskaran, Head, Centre for Applied Nutrition Services & Glycemic Index Research Unit, Temasek Polytechnic and Vice President of SNDA has been appointed as an expert advisor to the MOH in relation to the measures to reduce the consumption of sugar from the sugar-sweetened beverages.

The first measure is to introduce a graded colour-coded front of pack nutrient summary label for less healthy pre-packaged sugar sweetened beverages. The aim of this measure is to support consumers in making informed healthier choices.

This label ‘Nutri-Grade’ applies to all pre-packaged non-alcoholic beverages sold in Singapore. There are four colour-coded grades each with a letter that corresponds to the sugar and saturated fat threshold of the beverage.

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The second measure is to implement advertising prohibitions of product advertisements for beverages that rank the least healthy on the nutrient summary label. Advertising prohibitions cover all local mass media platforms, broadcast, print, out-of-home and online channels. The aim is to reduce the influence of advertising on consumers' choices. These two measures have been extended to the freshly prepared beverage sector in order to better achieve the overall objective of reducing sugar intake among Singaporeans.

In addition, another measure has been rolled out to encourage Singaporeans to consume plain water. The approach is to increase the availability and accessibility of drinking water and installations of water dispensers in Hawker centres and water coolers at bus interchanges and bus terminals.

SNDA continues to support the government’s initiatives towards promoting the health and well-being of Singaporeans.

**Karishma J. Surtani**

Main Committee Member

Singapore Nutrition & Dietetics Association

**Country – Pakistan**

News from Pakistan Nutrition and Dietetic Society (PNDS)

PNDS organized its First International Conference on Non-Communicable Diseases (NCDs) with the theme of “4X4 Four Diseases and Four Modifiable Shared Risk Factors”. It was held on 1-3 November, at Avari Hotel Lahore, Pakistan in collaboration with The Nutrition Society UK and several other health professional societies of Pakistan. This multi-disciplinary conference aimed to provide a forum for discussing evidence-based research and strategies to address the growing problem of Non-Communicable Diseases (NCDs) in Pakistan and promote health and well-being. This three-day scientific event featured speakers from UK and Pakistan,
covering a wide range of topics and focusing on shared modifiable risk factors of NCDs.

Over 450 participants from different cities of Pakistan attended the conference. These included PNDS members from all over the country as well as nutritionists, dietitians, eminent professors, researchers and, and representatives of World Health Organization including WR, Dr. Mahipala Palitha, non-governmental organizations and international members of PNDS. President of Pakistan Dr. Arif Alvi graced the occasion as the Chief Guest at the inaugural session. During his speech, he emphasized the role of nutrition and exercise for health promotion and NCDs prevention in the country. Dr. Romaina Iqbal, life member of PNDS and Section Head of NCDs, CHS at the Aga Khan University gave the plenary talk. Fayza Khan, Co-Chair Organizing Committee, & President PNDS delivered welcome note and Prof. Ghazala Pervez Zaman, Lahore Chapter Head, Chair Organizing Committee gave closing remarks for the inaugural session.

Next two days of the conference were full of interesting oral and poster presentations, panel discussions, workshops, and career counseling sessions. Out of 126 abstracts received, 26 were selected for oral presentations and 84 for poster presentation under different themes of the conference.

**Day Two: Plenary Session** was on “**What makes a successful international research grant proposal?**” Key principles from the UKRI Global Challenges Research Fund” was presented by Prof. Nicola M. Lowe (Professor of Nutritional Sciences) Co-Director of the International Institute of Nutritional Sciences University of Central Lancashire, UK.

**Session on Cardiovascular Diseases:** Keynote talk- “CVDs in Pakistan: Challenges & Issues” by Prof. Dr. Khawar Kazmi (Preventive Cardiology department, NICVD), Nutrition Keynote - “Diet & Cardiovascular Diseases” by Prof. Dr. Julie Lovegrove (Prof. of Nutrition, President, The Nutrition Society UK) followed by five free papers
Parallel session on Diabetes started with the Keynote talk “Primary Prevention of Diabetes” by Prof. Abdul Basit followed by Nutrition Keynote on “Diet Quality and Diabetes” by Prof. Dr. Rubina Hakeem followed by free papers selected for oral presentations in diabetes session. There was a Panel Discussion organized on” Using a multi-sectoral approach to prevent and control NCDs in Pakistan”. Second day of conference ended with workshop on Nutrition Care Process facilitated by Prof. Dr. Rubina Hakeem.

Day Three of the conference, last day of the conference started with a breakfast Career counseling session for young graduates of Nutrition and Dietetics from various universities. Mariam Khan Registered Dietitian moderated the session. Around 80 individuals attended the session and thoroughly enjoyed communication with the Panel of experts.

Scientific session on Lung Health and Tobacco started with a Keynote talk on“Reducing the burden of Chronic Respiratory Diseases in Pakistan” by Prof. Dr. Javaid Ahmed Khan fromt he Aga Khan University. Nutrition Keynote talk was presented by Shifa Ali (Registered Dietitian, Ittefaq Hospital Trust) who talked about “Nutrition Perspective for prevention and control of lung disease” followed by two free papers by young researchers.

Parallel session on Public Health started with the Key Note talk by Dr. Khalid Iqbal, Associate Professor (Khyber Medical University) on “New Developments in Nutrition Epidemiology “followed by another talk on “Trans-Fats situation analysis of Pakistan “by Dr. Adnan from Heartfile followed by five free papers on public health .

Panel Discussion on “The Role of Nutritionists/Dietitians in Prevention & Control of NCDS – Developing an Action Plan” was held post lunch.

Closing Ceremony started at 4:30 pm in which closing remarks were given by Lt. Cdr. Rabia Anwer, V.P of PNDS. She appreciated Dr. Romaina Iqbal’s selfless efforts for organizing the NCD Conference. At the end of the conference, best oral & best poster presenters were given certificates and awards. Prof Dr. Salma H. Badruddin, Honorary Life President of PNDS contributed a cash prize to each award winner as a token of appreciation to promote research culture
and encourage young researchers. PNDS plans to organize International Conference every two years in future.

www.pn ds.org, follow us at twitter account@pn dsorg

Fayza Khan,

President PNDS.

Country- Japan

News from Japan Dietetic Association

Dietetics Activities Related to Food Supply System in a Japanese Hospital during COVID-19 Pandemic
Japan, like the rest of the world, is facing a pandemic caused by the severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2). Japan has postponed the 2020 Olympics and declared a state of emergency beginning in April 2020 and by May 26 the infected cases in total were 16,600 (about one third of them in the Tokyo area) and the number of deaths was 846. Many health facilities, especially acute-care hospitals, are becoming overwhelmed. In April 2020, the hospital in Tokyo with which we have a cooperative agreement recorded 52 coronavirus cases including both medical staff members and inpatients. The hospital had to temporarily stop receiving outpatients and emergency patients.

Japanese hospitals’ food supply system has to follow the HACCP system at all times. All staff members have to be trained to implement proper procedures. The HACCP system helps to minimize risk when supplying food; especially in the hospital environment there are many risks of disease, so compliance with the HACCP system is critical. COVID-19 is a new type of virus; there is no vaccine or medicine as yet; and it is highly infectious in the community, especially among elderly people and people with impaired resistance. The hospital’s kitchen staff includes many elderly people and unfortunately, we early detected one case of a part-time kitchen cleaning staff member with coronavirus; isolation was quickly implemented. Coronavirus anxiety in a closed workplace is unavoidable.

In this situation, the nutrition department immediately had to have a further solution to ensure maintenance of a safe food supply for patients and to prevent spread of nosocomial infection.

Japan is used to natural disasters such as earthquakes and tsunamis, so nutrition management manuals for these cases are available. However, COVID-19 is new; there is no manual and it is a new situation for us. Our current experience which is shared below is still being gradually improved and needs to be flexible depending on each hospital’s situation. We hope this
experience will be useful for other nutrition departments in hospitals in dealing with the pandemic.

1. Human resources

Health check: for dietitians and kitchen workers, besides the usual health check list, we implemented a health check list for symptoms of COVID-19 such as fever, cough, headache, muscle ache, chills, smell disturbance, vomiting in staff members and people who live with them to be followed and reported to the hospital every day. If people have any abnormal symptoms, stopping work for inspection and tracking are required.

Teamwork: Dietitians were also divided into two teams to be in the hospital to work on different days, and to implement distancing when communicating. Meetings are conducted online. Kitchen staff also work in shifts and teams. Changing the food supply system will help to reduce the number of kitchen staff members as much as possible to limit possible viral transmission among the staff members.

2. Hygiene

Almost all viruses (except norovirus), including coronavirus, will die at about 80 degrees Celsius. This means that all hygiene activities have to reach at least 80 degrees including sanitation by alcohol, drying tableware, steaming food, etc. The food supply system in hospitals needs to guarantee that the HACCP system is followed. However, because kitchen and medical staff members may be temporarily replaced by new emergency staff who are not familiar with our procedures, we posted reminders that all staff must strictly follow procedures.

3. Food supply system

Because of coronavirus anxiety, our hospital decided to change temporarily to an outside food supply system. With this system, the kitchen staff can have more time to rest and maintain psychological stability.
- Change to outside food supply system:
  + Commercial food stored at room temperature
  + Frozen foods can be stored for some days
  + Outside food center kitchen ships to hospital every day
- Change menus: need to change the menus according to outside food supplement companies which have three main meal types including normal meal, soft meal and mixed meal. All use one-time plastic tableware. **After patients finish meals, nurses have to dispose of all plastic tableware within the ward.** Hospital top management had to agree on and all medical staff need to know these modified menus before supplying them to patients.
- Change nutrition products for enteral nutrition from paper type to one-time bag type to reduce risk of infection for patients and nurses.
- The nutrition software including food orders, doctors’ orders, patients’ menus etc. also need to be adjusted according to the new menus.

Dietitian supported to change kitchen tray to ward tray in Covid-19’s emergency

Shigeru Yamamoto, Keiko Hirose, Thao Phuong Tran
Jumonji University,
Member of International Committee, Japan Dietetic Association
Country – Nigeria

News from Dietitians Association of Nigeria (DAN)

The year 2020 has been eventful with the emergence of the novel corona virus disease! COVID -19 is a public health emergency of international concern. The emergence of the disease brought with it huge negative social and economic implications with its resultant effect on nutrition.

Prior to the emergence of the novel virus, March 2020, was the official world nutrition month! The World Dietitian Nutritionist day (WDND) was also celebrated in March. The Dietitians Association of Nigeria was not left out in the celebrations. Her theme for this year’s WDND was ‘Diet the best medicine’.

This year’s celebration featured

➢ Media publicity on the role of a Dietitian-Nutritionist,
➢ Road walks for public sensitization,
➢ Food demonstrations, Medical outreaches, and nutrition education,
➢ Health talks and Nutrition counselling

The above activities were organized by different chapters of the professional body in the country (Federal Capital Territory, Cross River State, Abia State, Enugu State, Rivers State and Ebonyi).
A major significant aspect of the WDND celebration was the robust involvement of Nutrition & Dietetics students (Catching them Young) from various universities e.g University of Nigeria, Nsukka, University of Calabar, University of Agriculture Umudike, etc. around the country.
Other activities of DAN included a national conference with the theme ‘Revitalizing Dietetic Practice in Nigeria, challenges and prospects. A virtual conference is planned to take place later in the year.

As the corona virus ravages the world, the association was saddled with the responsibility of disseminating the right nutrition information to combat unfounded claims about ‘immune boosters’ and Covid -19. Please visit: https://www.jdan.org.ng/advice-on-nutrition-for-the-general-public-about-covid-19-dietitians-association-of-nigeria-dan

**Keep Safe, wash your hands and Eat healthy**

Ms Patricia Chima  
Assistant Editor for DNAW  
Dietitians Association of Nigeria

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**Awards and Grants**

Academy of Nutrition and Dietetics Foundation  
Academy of Nutrition and Dietetics Foundation Update

**A Special Thank You**

The Academy of Nutrition and Dietetics Foundation would like to extend a special thank you to Alice A. Wimpfheimer, MS, RDN, CDN for her generous support and dedication to the international exchange of needed nutrition and dietetics information for the benefit of the nutritional health of the world community. Ms. Wimpfheimer’s support includes suggesting this newsletter in 1994 and providing the initial grant to fund it through the Academy Foundation, as well as the current ICDA Welcome Fund and numerous other international awards and projects through the Academy Foundation.
Academy of Nutrition and Dietetics Foundation Wimpfheimer-Guggenheim ICDA Welcome Fund

The Academy of Nutrition and Dietetics Foundation Wimpfheimer-Guggenheim ICDA Welcome fund provides financial support to new ICDA members. Contact Nicci Brown at nbrown@eatright.org for information.

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

The First International Nutritionist/Dietitian (FIND) Fellowship for Study in the USA, awarded by the Academy of Nutrition and Dietetics Foundation, is given to assist a foreign national who is pursuing postgraduate work in the USA and has a clearly articulated plan to return to his/her country. The fellowship has been bestowed to students representing 20 different countries.

Congratulations to the 2020 recipient, Lubna Alnaim, MS (Saudi Arabia), who is completing her doctorate in Medical Nutrition Science at the University of Kansas Medical Center. After graduating, Lubna plans to return to Saudi Arabia to work as an Assistant Professor in the Clinical Nutrition Department at King Saud Bin Abdulaziz University of Health Sciences.

2020 Wimpfheimer-Guggenheim International Lecture at FNCE

At the Academy of Nutrition and Dietetics Annual Food and Nutrition Conference and Expo, the Academy Foundation will present the 2020 annual Wimpfheimer-Guggenheim International Lecture. The session will be presented by of Dr. Jonathan Gorstein, PhD. Dr. Gorstein currently serves as a Clinical Associate Professor in Global Health at University of Washington as well as the Executive Director of the Iodine Global Network. This session will highlight the work of the Iodine Global Network, including lessons on international collaboration. To view recordings of past Wimpfheimer-Guggenheim International Lectures, please visit the Academy Foundation’s website.
World Food Day

ICDA call to collaborate with World Food Day, October 16, 2020

The Office of the Food and Agriculture Organization of the United Nations (FAO) in Washington, DC, has requested ICDA's support for the World Food Day campaign. World Food Day promotes global awareness and action for those who suffer from hunger and for the need to ensure healthy diets for all. The Food and Agriculture Organization of the UN (FAO) designated 16 October as World Food Day in 1979. [www.fao.org/world-food-day](http://www.fao.org/world-food-day)

ICDA would like to support WFD 2020 under the theme, “Grow, Nourish, Sustain. Together” by inviting all member countries to participate and communicate this day of reflection to dietitians and the entire population.