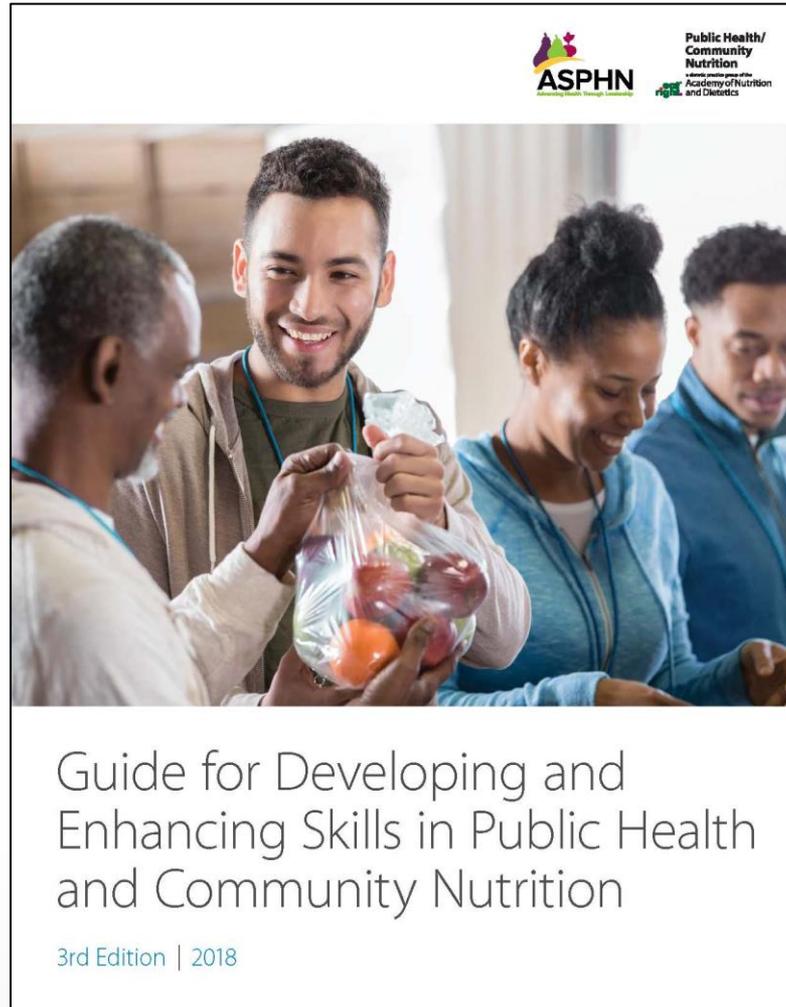


Training Our Workforce: A New Guide for Training Public Health and Community Nutrition Professionals



Official Launch of *The Guide*



Speakers



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Learning Objectives

- Describe the evolving field of public health/community nutrition and the rationale for training and enhancing skills among present and future RDNs/NDTRs.
- Describe the rationale for the development of the *Guide for Developing and Enhancing Skills in Public Health and Community Nutrition (Guide)* and identify the target audiences.
- Identify how to use and customize the *Guide* effectively to meet personalized knowledge and skill development goals.

Evolution of Public Health Nutrition

- Public health (PH) and community nutrition (CN) continues to rapidly evolve and expand with a complex, multifaceted array of programs and services that serve both individuals and populations.
- Client-focused approaches used in community settings serve a complementary and supportive role to public health approaches that support large-scale changes at community, organizational, and policy/environmental levels, and align with the Social-Ecological Model (SEM)¹
- Continued emphasis on evidence-based and culturally appropriate approaches to behavior change

A Social-Ecological Model for Food and Physical Activity Decisions



Integration of coordinated, multi-level approaches, ensuring a comprehensive approach to programming consistent with current public health practices for health promotion and disease prevention

SNAP-ED EVALUATION FRAMEWORK

Nutrition, Physical Activity, and Obesity Prevention Indicators

	READINESS & CAPACITY SHORT TERM (ST)	CHANGES MEDIUM TERM (MT)	EFFECTIVENESS & MAINTENANCE LONG TERM (LT)	
INDIVIDUAL 	GOALS AND INTENTIONS ST1: Healthy Eating ST2: Food Resource Management ST3: Physical Activity and Reduced Sedentary Behavior ST4: Food Safety	BEHAVIORAL CHANGES MT1: Healthy Eating MT2: Food Resource Management MT3: Physical Activity and Reduced Sedentary Behavior MT4: Food Safety	MAINTENANCE OF BEHAVIORAL CHANGES LT1: Healthy Eating LT2: Food Resource Management LT3: Physical Activity and Reduced Sedentary Behavior LT4: Food Safety	POPULATION RESULTS (R) TRENDS AND REDUCTION IN DISPARITIES R1: Overall Diet Quality R2: Fruits & Vegetables R3: Whole Grains R4: Dairy R5: Beverages R6: Food Security R7: Physical Activity and Reduced Sedentary Behavior R8: Breastfeeding R9: Healthy Weight R10: Family Meals R11: Quality of Life
ENVIRONMENTAL SETTINGS EAT, LIVE, WORK, LEARN, SHOP, AND PLAY 	ORGANIZATIONAL MOTIVATORS ST5: Need and Readiness ST6: Champions ST7: Partnerships	ORGANIZATIONAL ADOPTION AND PROMOTION MT5: Nutrition Supports MT6: Physical Activity and Reduced Sedentary Behavior Supports	ORGANIZATIONAL IMPLEMENTATION AND EFFECTIVENESS LT5: Nutrition Supports Implementation LT6: Physical Activity Supports Implementation LT7: Program Recognition LT8: Media Coverage LT9: Leveraged Resources LT10: Planned Sustainability LT11: Unexpected Benefits	
SECTORS OF INFLUENCE 	MULTI-SECTOR CAPACITY ST8: Multi-Sector Partnerships and Planning	MULTI-SECTOR CHANGES MT7: Government Policies MT8: Agriculture MT9: Education Policies MT10: Community Design and Safety MT11: Health Care Clinical-Community Linkages MT12: Social Marketing MT13: Media Practices	MULTI-SECTOR IMPACTS LT12: Food Systems LT13: Government Investments LT14: Agriculture Sales and Incentives LT15: Educational Attainment LT16: Shared Use Streets and Crime Reduction LT17: Health Care Cost Savings LT18: Commercial Marketing of Healthy Foods and Beverages LT19: Community-Wide Recognition Programs	

Public Health and Community Nutrition

- Complementary interface of public health/community nutrition approaches in population health with clinical nutrition services
- The three classic approaches to disease prevention:
 - Primary: **Promote** health and **protect** against exposure to risk factors that lead to health problems, by changing the environment and the community, as well as, family and individual lifestyles and behaviors
 - Secondary: **Early identification and management of risk factors** to stop or slow the progression of disease through screening and detection for early diagnosis, treatment, and follow-up in high risk populations
 - Tertiary: **Managing and rehabilitating diagnosed health conditions** to reduce complications, improve quality of life, and extend years of productivity

Public Health and Community Nutritionists

- Overlapping skill sets
- Ideally work closely with multi-disciplinary public health teams
- PHNs trained in both nutrition and the core competency areas of public health
- CNs trained in the delivery of primary, secondary, and tertiary nutrition services within community settings

3 Core Public Health Functions related to Public Health Nutrition Practice

1) **Assessment** of the nutrition problems and needs of the population, and monitoring the nutritional status of populations and related systems of care;

2) **Development** of policies, programs, and activities that address highest priority nutritional problems and needs; and

3) **Assurance** of the implementation of effective nutrition strategies.

The 10 Essential Public Health Services



Source: Centers for Disease Control and Prevention (CDC), Public Health Image Library. Available at <https://phil.cdc.gov/Details.aspx?pid=22746>. Accessed October 12, 2018.

Public Health Approach

- Defined by its focus on primary and secondary prevention rather than treatment
- Targets large, at-risk populations rather than individuals and employs evidence-based interventions that have the potential to reach large numbers of individuals, impact behavior, and change social norms
- Interventions that address the determinants of health rather than the treatment of disease

Public Health Nutrition

- Include PSE Interventions include to increase access to healthy eating and low- or no-cost physical activity opportunities (***make the healthy choice the easy choice***)
- Focus on accessibility, marketing, purchase, selection, and preparation to increase consumption of healthier food choices
- PSE change interventions, as well as *educational* and marketing interventions, can be implemented across a continuum of settings and may be employed as part of multi-level interventions.

Public Health Nutritionists

- Employed in public, business, and non-profit sectors
- International, national, state, and local organizations
- Collaborate with policy makers, key officials, related health professionals, and community leaders to promote health and prevent disease
- Integral role in designing, implementing, and evaluating food and nutrition policy, systems, and environmental (PSE) interventions in community settings

Cross-Sector, Multi-Level Programming

- Senior centers
- Social service and nutrition assistance systems
- Governmental public health organizations
- School districts
- Faith-based organizations
- Health care
- Private practice
- Food banks
- Food service
- Worksites
- Day care centers
- Supermarkets
- Farmers markets
- Sport and fitness centers

Trends in Health Care Costs

- Over the last few decades, the field of public health nutrition has gained increasing attention both in the US and globally, largely due to the challenge of increasing global obesity and other diet-related, chronic diseases.
- In the U.S., chronic diseases account for
 - 7 out of every 10 deaths; and
 - 86% of U.S. healthcare costs²
- Yet, only 3% of total annual U.S. healthcare expenditures are spent on prevention.³

Trends in Health Care Costs

- U.S. Centers for Medicare & Medicaid Services
 - In 2016, U.S. healthcare expenditures grew 4.3% to **\$3.3 trillion in 2016**, accounting for 17.9% of Gross Domestic Product (GDP).
 - Under current law, national health spending is projected to grow at an average rate of 5.5% per year for 2017-26 and to reach **\$5.7 trillion by 2026**.
 - As a result, the health share of GDP is expected to rise from 17.9% in 2016 to 19.7% by 2026.

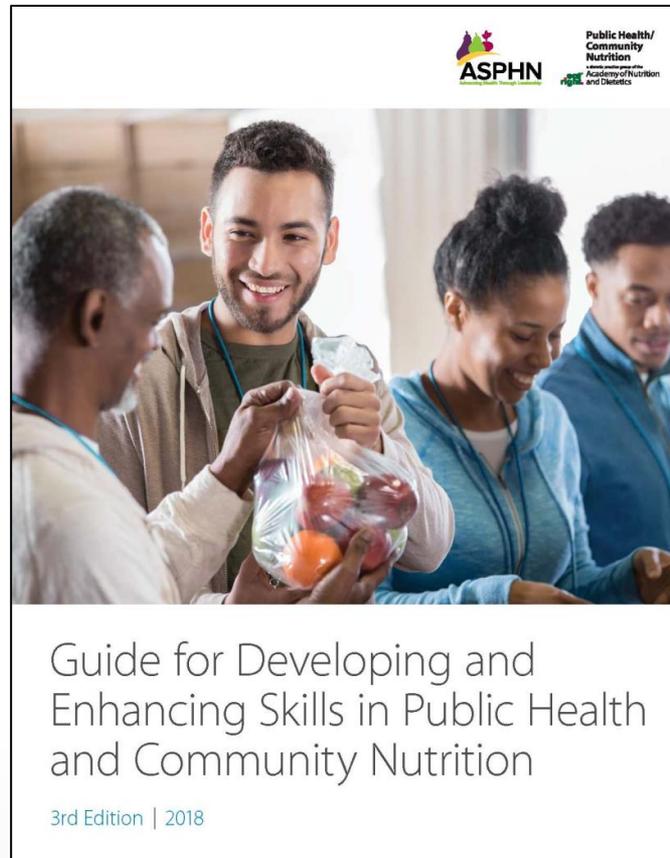
Trends in Health Care Costs

- Number of Americans ages 65 and older is **projected to more than double** from 46 million today to over 98 million by 2060
- Enrollment shifts from private health insurance to Medicare related to the aging of the population
- With the dual burden of escalating healthcare costs and an aging population, health promotion and disease prevention efforts will have a larger role in healthcare services
- American Hospital Association increasing support of community-based health promotion and disease prevention

Rationale for the *Guide*

- A stronger focus on and need for public health skills of present and future RDNs and NDTRs
- Positioning the next century of nutrition and dietetics practitioners as leaders in the face of shifting demographics, changes in nutrition and physical activity patterns, health care disparities, and domestic and global economic pressures
- Current and future PHN leaders in policy development, assessment, assurance, advocacy, PSE change, education, marketing, and programs and services
- Shift from a client to a population/systems focus is ongoing and continues to occur at different rates

The Guide for Developing and Enhancing Skills in Public Health and Community Nutrition (*Guide*)



Revision: *Guidelines for Community Nutrition Supervised Experiences*

- The original *Guidelines* was first authored in 1995.
- The first comprehensive curriculum for enhancing the capacity of public health nutrition personnel to respond to the broad range of responsibilities demanded from this field.
- The 2nd edition of the *Guidelines* was published in 2003 and reflected changes in public health nutrition over the previous decade.

Rationale for the 3rd Edition

- Much has changed in the public health arena over the past 15 years.
- The Academy's Committee for Public Health/Community Nutrition is working to assist members transitioning to work in the field of community nutrition and move public health forward.
- Provide an updated tool for numerous entities to develop/enhance the knowledge and skills needed to perform the role of a public health nutritionist.

Revision Process

- **Timeline for Revision**

- **January 2013:** PHCNPG partnered with ASPHN
- **Fall 2013:** *Guidelines* identified as a collaborative revision project
- **Spring 2014:** Expert Review Committee established
- **Summer 2015:** Preliminary draft reviewed by members of ASPHN, PHCNPG, and NDEP
- **Fall 2017:** Final draft reviewed by Academy's Committee for PHCN, PHCNPG Executive Committee, ASPHN Board, NDEP Executive Committee
- **March 2018:** Academy approved

Expert Review Committee

INDIVIDUAL	ORGANIZATION REPRESENTED
Anne Bartholomew, MS, RD	U.S. Department of Agriculture Food and Nutrition Service
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Jill Lange, MPH, RDN, LD Shana Patterson, RDN Karen L. Probert, MS, RD	Association of State Public Health Nutritionists
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Marsha Spence, PhD, MPH, RDN, LDN	American Public Health Association, Food and Nutrition Section
Jamie Stang, PhD, MPH, RDN, LN	Association of Graduate Programs in Public Health Nutrition, Inc.
Chrisandra Stockmeyer, MPH, RD	Centers for Disease Control and Prevention, Division of Population Health

Purpose of the *Guide*

Three (3) primary purposes of the *Guide*:

1. Enumerate the knowledge and skills expected of public health and community nutritionists.
2. Synthesize best practices for nutrition professionals in public health and community nutrition.
3. Facilitate the professional development of nutritionists to assure a competent workforce that is capable of meeting ever-changing population needs and workplace requirements.

Components of the *Guide*

Three (3) Main Components of the *Guide*:

- Self-Assessment Tool
- Knowledge and Skills Statements for the RDN/NDTR
- Knowledge and Skills Development Guide

Intended Users of the *Guide*

- Practitioners
 - RD/RDN
 - DTR/NDTR
 - Nutrition Personnel
- Employers
 - Public Health and Nutrition Administrators
- Educators, Preceptors and Students
 - Dietetic Internship Directors and Preceptors
 - Individual Supervised Practice Pathways (ISPP) Directors, Preceptor and Students

The Major Revisions

1) Updated document title

- **1st and 2nd Eds:** *Guidelines for Community Nutrition Supervised Experiences*
- **3rd Ed:** *Guide for Developing and Enhancing Skills in Public Health and Community Nutrition*

2) Specified how each target audience can use the *Guide*

- **1st and 2nd Eds:** Included general suggestions for use
- **3rd Ed:** Includes step-by-step how-to information for each of the 3 intended users (practitioners, employers, educators/students)

The Major Revisions

3) Improved accessibility and usability of the *Guide*

- **1st and 2nd Eds:** PDF available for download online
- **3rd Ed:**
 - Interactive PDFs of 3 versions available online
 - PDF of complete version available online

4) Targeted current needs of public health and community nutritionists

- **1st and 2nd Eds:**
 - 3 Overarching Topics
 - 25 Training Areas
- **3rd Ed:**
 - 6 Core Competency Areas
 - 46 Knowledge and Skills Statements

Basis for the Knowledge and Skills Statements: Competencies/Standards Considered

**Accreditation Council
for Education in
Nutrition and Dietetics**

The accrediting agency for the
**Academy of Nutrition
and Dietetics**




**Society for
Nutrition Education
and Behavior Foundation**



**The Council on Linkages
Between Academia and
Public Health Practice**



FROM THE ACADEMY
Standards of Practice & Professional Performance

**Academy of Nutrition and Dietetics: Standards
of Practice and Standards of Professional
Performance for Registered Dietitian
Nutritionists (Competent, Proficient, and Expert)
in Public Health and Community Nutrition**

Meg Bruening, PhD, MPH, RD; Adrienne Z. Udarbe, MS, RDN; Elizabeth Yakes Jimenez, PhD, RD; Phyllis Stell Crowley, MS, RD, IBCLC; Doris C. Fredericks, MEd, RD, FADA; Leigh Ann Edwards Hall, MPH, RD




**Commission
on Dietetic
Registration**
the credentialing agency for the
Academy of Nutrition
and Dietetics

**Essential Practice
Competencies**
for the Commission on
Dietetic Registration's
Credentialed Nutrition
and Dietetics Practitioners



**Strategies for Success: Curriculum Guide
(Didactic and Experiential Learning)
Third Edition**

Graduate Programs in Public Health Nutrition

Association of Graduate Programs in Public Health Nutrition, Inc.
2013

GUIDELINES
for
**Community Nutrition
Supervised Experiences**
2nd Edition

Public Health/ Community Nutrition Practice Group
American Dietetic Association
2003

The United States Department of Agriculture Food
and Consumer Service provided support for
development of the original Guidelines
publications in 1995. Support for the second
edition of the Guidelines was provided by the
Public Health, Community Nutrition Practice
Group of the American Dietetic Association and
the Association of Graduate Programs in Public
Health Nutrition, Inc.




Knowledge and Skills

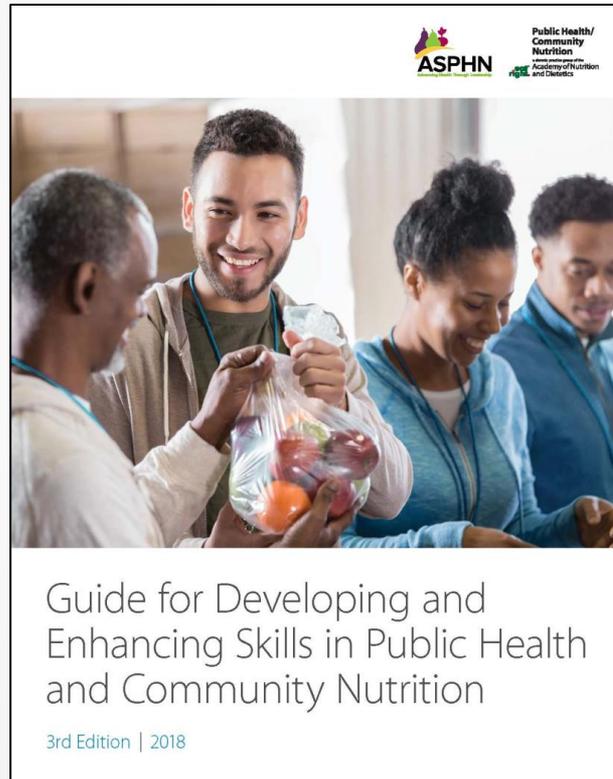
- The six core areas of competency identified in the *Guide* include:
 - Food & Nutrition
 - Communication, Marketing, & Cultural Sensitivity
 - Advocacy & Education
 - Policy, Systems, & Environmental Change
 - Research & Evaluation
 - Management & Leadership

Knowledge and Skills Development Guide

Food & Nutrition (FN)

RDN	NDTR	Suggested Work-Related & Learning Activities	Example Resources
<p>FN1. History</p> <p>Describes the historical development of public health and public health nutrition and utilizes the core functions of public health to guide practice.</p>	<p>FN1. History</p> <p>Identifies the core functions of public health.</p>	<ul style="list-style-type: none"> ■ Select one public health nutrition program and compare it to the 10 Essential Public Health Services and the Core Functions of Public Health; Explain how the activities of the program and the two frameworks align, and describe how the program has evolved over time (e.g., from individual- to population-focused); Document activities that include, at a minimum, one of the core functions of public health. ■ Investigate the integration of nutrition services from direct services (individual and group focus) to population focus (policy, systems, and environmental approaches); Review the rationale and history of at least one categorical nutrition program, how it has evolved over time, and its reported benefits (e.g., the Special Supplemental Nutrition Program for Women, Infants and Children (WIC), the Supplemental Nutrition Assistance Program (SNAP), the Supplemental Nutrition Assistance Program Education (SNAP-Ed), Child Nutrition Programs (see Glossary). ■ Identify the governmental and non-profit nutrition programs available in your community and determine how to describe them on a continuum that goes from individual- to population-focused (e.g., WIC, SNAP, Congregate Meals, emergency food providers, CDC DNPAO). ■ Identify a state or local annual plan of operations from one or more nutrition 	<ul style="list-style-type: none"> ■ The Public Health System and the 10 Essential Public Health Services, CDC https://www.cdc.gov/stltpublichealth/publichealthservices/essentialhealthservices.html ■ 2015-2020 Dietary Guidelines for Americans, USDA-DHHS http://health.gov/dietaryguidelines/2015/guidelines ■ The State of Obesity: Better Policies for a Healthier America https://www.tfah.org/reports ■ Programs and Services, USDA-FNS https://www.fns.usda.gov/programs-and-services ■ Healthy People 2020, Public Health 3.0, U.S. DHHS https://www.healthypeople.gov/2020/tools-resources/public-health-3 ■ Contento, I. R. (2016). <i>Nutrition education: linking research, theory, and practice</i>. Burlington, MA: Jones & Bartlett Learning.

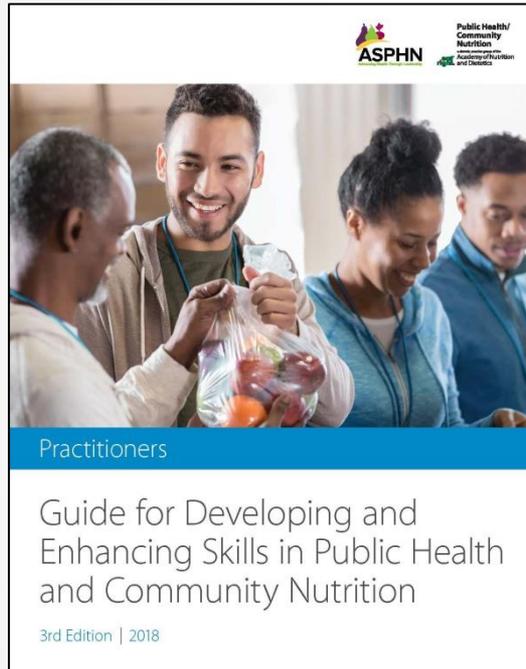
How to Use the *Guide*



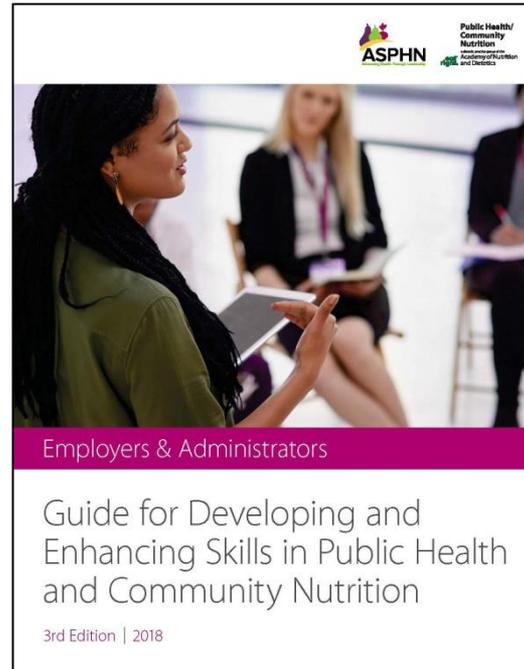
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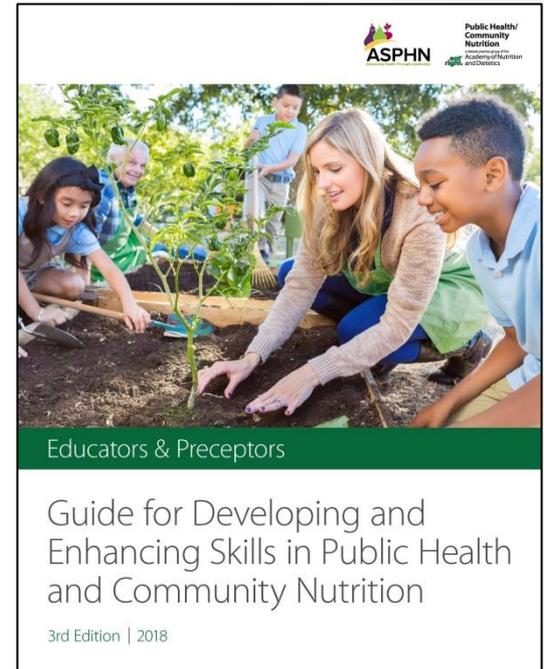
How to Use the *Guide*



Practitioners

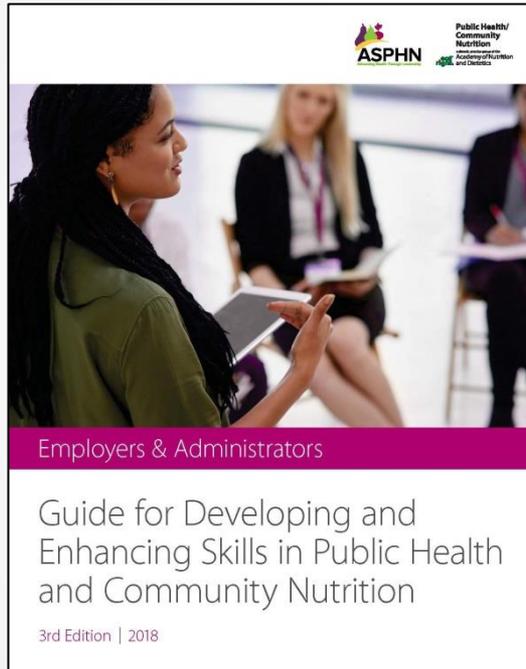


Employers &
Administrators



Educators, Preceptors,
and Students

How to Use the *Guide*



Employers & Administrators

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Section 2: Self-Assessment Tool

Available for download at www.phcnpg.org.

Section 3: Knowledge & Skills Statements

Knowledge & Skills Statements for the RDN

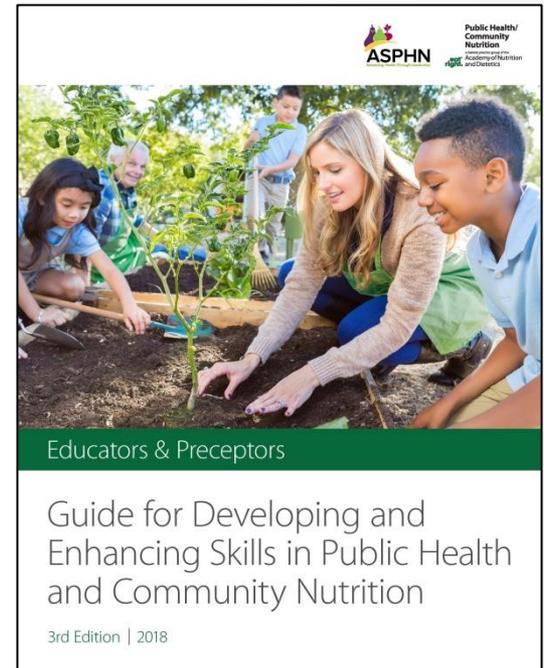
Knowledge & Skills Statements for the NDTR

Section 4: Knowledge & Skills Development Guide

Available for download at www.phcnpg.org.

How to Use the *Guide*

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Educators, Preceptors, and Students

How to Use the Guide

Comparison of Standards for the RDN

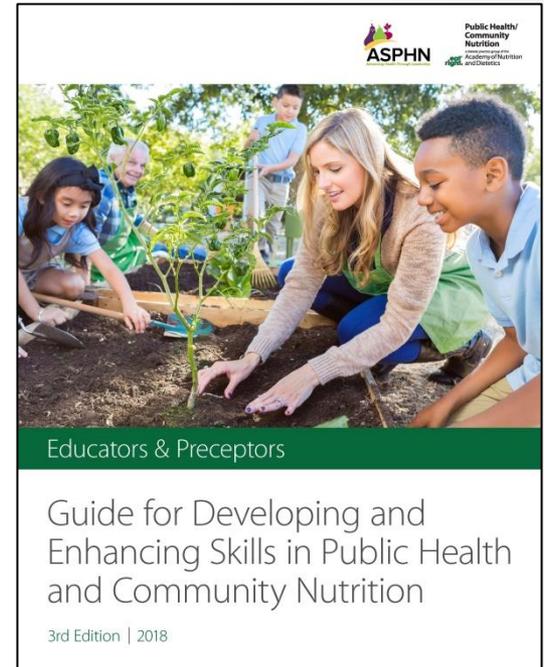
2017 ACEND® Accreditation Standards CP, DI, DPD, FDE, IDE Programs

Knowledge & Skills Development Guide

Domain 2. Professional Practice Expectations

Beliefs, values, attitudes and behaviors for the professional dietitian nutritionist level of practice (ACEND®, 2017).

KRDN	KRDN 2.1 Demonstrate effective and professional oral and written communication and documentation.	CMC1-7, RE7
	KRDN 2.2 Describe the governance of nutrition and dietetics practice, such as the Scope of Nutrition and Dietetics Practice and the Code of Ethics for the Profession of Nutrition and Dietetics; and describe interprofessional relationships in various practice settings.	
	KRDN 2.3 Assess the impact of a public policy position on nutrition and dietetics practice.	AE2, AE5
	KRDN 2.4 Discuss the impact of health care policy and different health care delivery systems on food and nutrition services.	AE2
	KRDN 2.5 Identify and describe the work of interprofessional teams and the roles of others with whom the registered dietitian nutritionist collaborates in the delivery of food and nutrition services.	FN6, PSE1, ML5, ML12
	KRDN 2.6 Demonstrate an understanding of cultural competence/sensitivity.	CMC2-3, CMC5-6
	KRDN 2.7 Demonstrate identification with the nutrition and dietetics profession through activities such as participation in professional organizations and defending a position on issues impacting the nutrition and dietetics profession.	AE5, ML15
	KRDN 2.8 Demonstrate an understanding of the importance and expectations of a professional in mentoring and precepting others.	ML15
	CRDN 2.1 Practice in compliance with current federal regulations and state statutes and rules, as applicable, and in accordance with accreditation standards and the Scope of Nutrition and Dietetics Practice and Code of Ethics for the Profession of Nutrition and Dietetics.	RE4, ML1
	CRDN 2.2 Demonstrate professional writing skills in preparing professional communications.	CMC1, RE7
CRDN 2.3 Demonstrate active participation, teamwork and contributions in group settings.	FN6, PSE1, ML5, ML12-13	
CRDN 2.4 Function as a member of interprofessional teams.	FN6, PSE1, ML5, ML12-13	
CRDN 2.5 Assign duties to NDTRs and/or support personnel as appropriate.	Multiple statements from core areas FN, CMC, AE, PSE, RE, ML	
CRDN 2.6 Refer clients and patients to other professionals and services when needs are		



Educators, Preceptors, and Students

Self-Assessment Tool

	Knowledge What is your level of knowledge related to...			Confidence How confident are you in your abilities related to...					Guide Knowledge & Skills Reference Number	
	Little or no	General	Thorough	Not at all	Not very	Moderately	Very	Extremely		
Food & Nutrition										
■ Describing the historical development of public health and public health nutrition interventions	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	FN1
■ Utilizing the core functions of public health in your workplace	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	FN1
■ Applying food, nutrition, and physical activity principles to meet the health needs of individuals	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	FN2
■ Applying food and nutrition principles to meet nutrition needs of populations	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	FN2
■ Relating factors in the food system to food and nutrition	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	FN3
■ Describing factors that impact food accessibility, adequacy, and safety of local and global food systems	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	FN4
■ Assessing and interpreting nutritional status of individuals	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	FN5
■ Assessing and interpreting nutritional status of populations	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	FN5
■ Determining priority nutritional needs of individuals	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	FN5
■ Determining priority nutritional needs of populations	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	FN5
■ Implementing public health nutrition programs and/or interventions	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	FN6
■ Explaining issues related to dietary and physical activity guidance	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	FN7
Communication, Marketing, & Cultural Sensitivity										
■ Utilizing a range of media platforms to communicate nutrition information	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	CMC1
■ Tailoring food and nutrition messages to diverse audiences	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	CMC2
■ Following the concepts of cultural sensitivity when developing, implementing, and evaluating food and nutrition programs and resources	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	CMC3

Self-Assessment Tool

My Professional Development Goals & Learning Plan

Targeted Areas for Improvement	Learning Plan/Resources	Time Frame	Priority		
			Low	Med	High
			<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
			<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
			<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
			<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
			<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

How to Use the *Guide*: Hands-on Application

- Practitioners
- Program administrators
- Educators, preceptors, and students

Example 1: Practitioner

- Review the Introduction of the *Guide*
- Complete the Self-Assessment Tool and prioritize areas for improvement
- Use the Development Guide to develop and enhance knowledge and skills

Example 1: Practitioner

Self-Assessment Tool

	Knowledge What is your level of knowledge related to...			Confidence How confident are you in your abilities related to...					Guide Knowledge & Skills Reference Number	
	Little or no	General	Thorough	Not at all	Not very	Moderately	Very	Extremely		
Advocacy & Education										
■ Identifying economic, cultural, and societal trends that have implications for the health and nutrition of populations	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	AE1
■ Describing governmental structures and political processes	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	AE2
■ Describing the role of governmental and non-governmental organizations in the delivery of nutrition and physical activity programs and services	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	AE3
■ Differentiating between lobbying and education	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	AE4
■ Articulating the value of evidence-based public health nutrition programs	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	AE5
Policy, Systems, & Environmental Change										
■ Establishing partnerships with stakeholders	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	PSE1
■ Assessing the built and social environments	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	PSE2
■ Identifying gaps in services	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	PSE2
■ Planning interventions that support collective impact and sustainability of services	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	PSE3
■ Developing and implementing nutrition programs	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	PSE3
■ Increasing access to healthy food and physical activity	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	PSE4
■ Identifying food and nutrition safety net programs	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	PSE5
Research & Evaluation										
■ Applying concepts used in research	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	RE1
■ Applying principles of epidemiological approaches	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	RE2

Example 1: Practitioner

My Professional Development Goals & Learning Plan

Targeted Areas for Improvement	Learning Plan/Resources	Time Frame	Priority		
			Low	Med	High
PSE3	Activity 1 (Select a nutrition program; Develop program objectives that align with program activities and evaluation measures) Resource 1 (Moving to the Future)	3 weeks	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
			<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
			<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
			<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
			<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Example 1: Practitioner

Policy, Systems, & Environmental Change ■

RDN	NDTR	Suggested Work-Related & Learning Activities	Example Resources
<p>PSE3. Developing and Implementing Nutrition Programs</p> <p>Utilizes evidence-based and best practice nutrition and physical activity recommendations in identifying, developing, and implementing nutrition programs.</p>	<p>PSE3. Developing and Implementing Nutrition Programs</p> <p>Utilizes evidence-based and best practice nutrition and physical activity recommendations in implementing nutrition programs.</p>	<ul style="list-style-type: none"> ■ Select a nutrition program with a base in evidence and theory; Develop program objectives that align with program activities and evaluation measures. ■ Identify appropriate global, national, regional, and local <i>nutrition or physical activity plans</i> for recommendations on a specific project or policy issue: Based on your findings, develop a program proposal, or similar document that integrates recommendations and discusses potential intentional and unintentional outcomes that can arise from these recommendations (e.g., breastfeeding and domestic or international formula initiatives). ■ Identify states that have implemented a policy to add an excise tax or a sales tax to the current price of soda, fruit drinks, energy drinks, tea or coffee drinks, sports drinks, or other sugar sweetened beverages, how funds generated by the tax are used (e.g., to subsidize healthy foods or to support other public health initiatives), and what the intentional and unintentional outcomes were. ■ Review an ideal vs. feasible nutrition and/or physical activity program; Identify potential barriers to implementation (e.g., funding/cost, stakeholders, public awareness/support, competing priorities, etc.) and recommend ways to overcome them. 	<ul style="list-style-type: none"> ■ Moving to the Future, Tools for Planning Nutrition and Physical Activity Programs, CSPHN http://movingtothefuture.org ■ Mensel, D., Höger, C., Pérez-Rodrigo, C., González-Gómez, N., & Armstrong, T. (2008). A framework to monitor and evaluate implementation. http://www.who.int/dietphysicalactivity/M&E-ENG-09.pdf ■ Funded DNPAO State and Local Programs, CDC https://www.cdc.gov/nccdphp/dnpao/state-local-programs/funding.html ■ World Health Organization. Interventions on diet and physical activity: what works. Summary report. 2009. http://www.who.int/dietphysicalactivity/summary-report-09.pdf ■ International Code of Marketing of Breast-Milk Substitutes, WHO http://www.who.int/nutrition/publications/infantfeeding/9241541601/en

Example 1: Practitioner

movingtothefuture.org

Moving to the Future Tools for Planning Nutrition and Physical Activity Programs

Home

Home Welcome Grant Opportunities More resources

Home	
Planning Tools	Chapter 1: Conduct a Community Assessment
Your account	Chapter 2: Determine Priorities and Write Goals & Objectives
Buy MS Word files	Chapter 3: Develop a Nutrition and Physical Activity Plan
Contact us	Chapter 4: Implement the Plan
Credits	Chapter 5: Evaluate
Login/Signup	
Admin Login	

1. Community Assessment
2. Priorities, Goals, and Objectives
3. Nutrition and Physical Activity Plan
4. Implementation
5. Evaluation

Welcome to Moving to the Future

Meet *Moving to the Future* with this slide show. Use this website to develop successful community programs that promote healthy eating and physical activity. We provide ...

- Step-by-step instructions for conducting a community assessment, writing objectives, developing a plan, or evaluating your program.
- Forms, surveys, and worksheets in MSWord for you to download and adapt to your own needs
- Discussion forums to network with colleagues around the country doing this same work

To get started click the "Community Assessment" link on the Home Page.

Copyright Policy

The *Moving to the Future* online book is copyrighted. [Click here](#) to read the copyright policy. The online book is accessed by clicking on one of the 5 links above or through the left-hand side menu under Planning Tools. Click on "Buy MS Word files" in the left menu bar for more information.

On-Going Grant Opportunities

[Healthiest Cities and Counties Challenge](#)

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[Community Facility Grants](#)

[KaBoom Playground Grants](#)

[Kaiser Permanente Grants](#)

[National Association of Chronic Disease Directors: Funding Opportunities](#)

[Finish Line Youth Foundation](#)

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Grant Funding With Deadlines

[Growing Up Fresh](#)

[The Northeast Regional Nutrition Education Center of Excellence at Cornell University](#)

[BUILD Health Challenge](#)

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This website is a product of the Association of State Public Health Nutritionists (ASPHN). For more information about ASPHN visit their website at www.asphn.org.

Example 1: Practitioner

movingtothefuture.org/story_read.php?sid=&story_id=199&chapter_id=22&origin1=chapter_contents

Moving to the Future Tools for Planning Nutrition and Physical Activity Programs

Planning Tools

Home Welcome Grant Opportunities More resources

Home	
Planning Tools	Chapter 1: Conduct a Community Assessment
Your account	Chapter 2: Determine Priorities and Write Goals & Objectives
Buy MS Word files	
Contact us	Chapter 3: Develop a Nutrition and Physical Activity Plan
Credits	Chapter 4: Implement the Plan
Login/Signup	
Admin Login	Chapter 5: Evaluate

Writing Objectives - Overview

-  **PDF/Acrobat** **Writing Objectives--worksheets** : These materials include definitions, worksheets to help you write outcome and process objectives, and example worksheets
-  **PDF/Acrobat** **Example Writing Objectives Worksheets** : This file includes several sample completed worksheets
-  **PDF/Acrobat** **Do We Have Program Gaps?--guidance and worksheet** : Assess whether the existing and proposed interventions teach people healthy behaviors and create an environment that supports healthy behaviors
-  **PDF/Acrobat** **Writing Objectives Cheat Sheet** : This is a one-page summary of how to write good objectives

Objectives provide direction on how to achieve a goal. An objective is a specific, measurable, intended result of your committees work. Objectives need to relate logically to a goal, and they should include specific measurements and time frames.

The terminology for and categorization of objectives varies. For example, an objective having to do with the proportion of adolescents drinking three servings of milk per day could be defined as an outcome objective, intermediate objective, or health behavior objective depending on the resource. Or, an objective directing the establishment of a school employee wellness program might be considered a process objective, a policy objective, or even a strategy for an objective focused on improving the school health environment, depending on the resource.

The exact term for an objective is not important. It is important that goals, objectives, and strategies are logically related and that objectives are well-written. A logical relationship among goals, objectives, and strategies helps make sure that your work will impact what you are targeting.

Well-written objectives are essential to effective evaluation. *Moving to the Future: Nutrition and Physical Activity Program Planning* describes and defines two different types of objectives--outcome objectives and process objectives.

In *Moving to the Future*, outcome objectives can address health status, health behaviors, health environment or health policy. Generally it will take a community at least three years to achieve these objectives. Other common terms for such objectives are impact, long-term, behavioral, community-level and intermediate. Here are examples of three outcome objectives:

- By December 31, 2010, increase from 37% to 44% the percentage of people in Friendly County who are of healthy weight. (Baseline data source: 2005 BRFSS data with data from Friendly County and 10 peer counties. The state chronic disease epidemiologist generated this regional data. Goal source: the upper 95% confidence interval from this same regional data.)

Moving to the Future Terminology

Coalitions. People work together in a number of ways, in coalitions, partnerships, committees, teams, task forces, and so on. The tools in *Moving to the Future* will help you no matter how your group is structured. To make *Moving to the Future* friendly to people working together in different ways, we use these group terms interchangeably. So, if you are working in a formal committee and *Moving to the Future* uses the word *team*, the information applies to you as well.

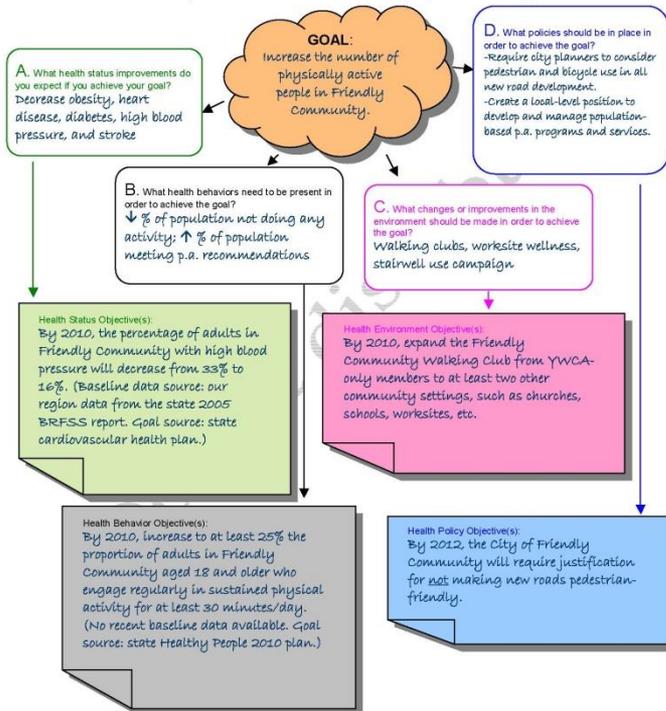
Program. In *Moving to the Future*, the word *program* is defined broadly and could encompass any group of activities including projects, services, programs, and policy or environmental changes.

Nutrition and Physical Activity. In *Moving to the Future*, we often pair the word *nutrition* with the phrase *physical activity*, as for example in "address the nutrition and physical activity needs" or "develop a nutrition and physical activity plan." This does not suggest that these materials are only useful to people working on community-based nutrition AND physical activity

Example 1: Practitioner

Writing Objectives Outcomes Worksheet . . . Example 1

This example assumes stroke deaths are alarmingly high in this community.



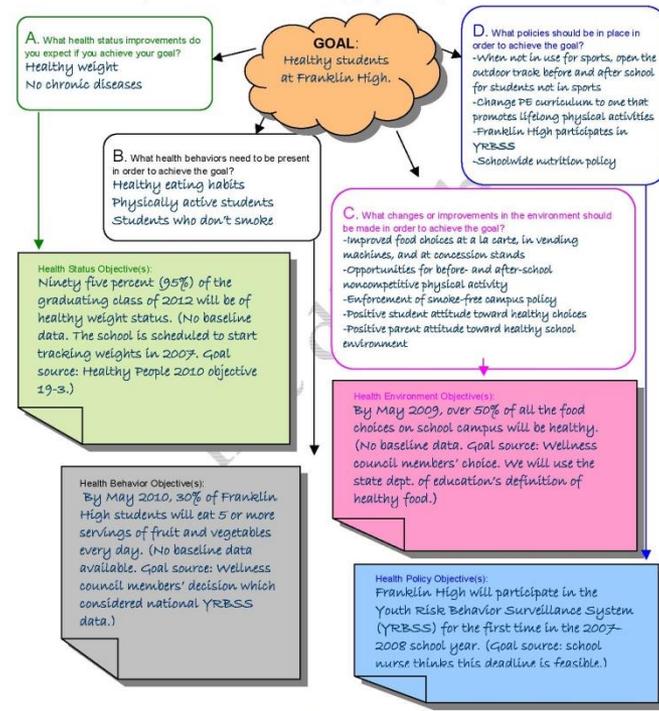
Moving to the Future: Nutrition and Physical Activity Program Planning
Chapter 2: Determine Priorities and Write Goals & Objectives
Writing Objectives – Overview, Example Writing Objectives Worksheets

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Writing Objectives Outcomes Worksheet . . . Example 2

This example assumes that the team is developing a plan for a high school wellness council.



Moving to the Future: Nutrition and Physical Activity Program Planning
Chapter 2: Determine Priorities and Write Goals & Objectives
Writing Objectives – Overview, Example Writing Objectives Worksheets

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Example 2: Administrator

- Review the Introduction of the *Guide*
- Use the Knowledge and Skills Statements to develop job descriptions
- Use the Management and Leadership core competency to enhance skills
- Refer employees to the Self-assessment Tool and Development Guide for professional development

Example 2: Administrator

Knowledge & Skills Statements for the RDN

■ Food & Nutrition

FN1. History Describes the historical development of public health and public health nutrition and utilizes the core functions of public health to guide practice.

FN2. Food Safety Independently applies the principles of food and nutrition (preparation, food safety, and management) to meet the food and nutrition needs of target individuals, populations, and environmental settings across the life course.

FN3. Food Systems Explains the relationship of biological, chemical, economic, marketing, and physical factors in food systems to food and nutrition, such as new products, manufacturing processes, food distribution, food modifications, genetically modified foods, sustainable agriculture, food marketing, consumption, and waste management.

FN4. Food Access Describes factors that impact the accessibility, adequacy, and safety of the global food system (production, processing, storage, distribution, and consumption) and their

to assess and interpret individual- and community-level nutritional status to determine priority nutritional needs of target populations across the life course.

FN6. Interventions In collaboration with stakeholder(s) and with the input of target audience(s), implements evidence-based or best practice population-based programs and/or interventions.

FN7. Dietary and Physical Activity Guidance Explains the processes, rationale, and issues related to establishing nutrient requirements, dietary guidance, national health objectives, food and nutrition policy, and food and nutrition program regulations.

■ Communication, Marketing, & Cultural Sensitivity

CMC1. Media Platforms Utilizes a full range of current media platforms (e.g., TV, radio, print, newspapers, internet, and social media) appropriate for the target audience(s) to communicate food and nutrition information effectively.

CMC3. Cultural Sensitivity Follows concepts of cultural sensitivity when developing, implementing, and evaluating food and nutrition interventions, programs, events, and resources for health promotion/disease prevention.

CMC4. Interviewing and Counseling Utilizes appropriate interviewing and counseling techniques to positively impact behavior change at the individual or interpersonal levels.

CMC5. Public Relations Effectively communicates relevant demographic, statistical, programmatic, and scientific food and nutrition information to diverse audiences (e.g., professionals, consumers, government officials, policy makers, and the community).

CMC6. Social Determinants of Health Explains the role of cultural, socioeconomic, and behavioral factors in the availability, accessibility, acceptability, and delivery of public health services.

CMC7. Marketing Identifies and utilizes principles of marketing for use in the food, nutrition, and physical activity

Example 2: Administrator

Management & Leadership ■

RDN	NDTR	Suggested Work-Related & Learning Activities	Example Resources
<p>ML8. Funding Opportunities and Grant Writing</p> <p>Identifies potential funding opportunities for public health and food/nutrition programs and services, and effectively contributes to grant writing teams that generate competitive grant proposals.</p>	<p>ML8. Funding Opportunities and Grant Writing</p> <p>Recognizes the role of grant funding in program development and assists RDNs and grant writing team members in the preparation and submission of competitive grant proposals.</p>	<ul style="list-style-type: none"> ■ Complete a grant writing seminar or workshop series or certificate program. ■ Learn about the grant writing process, from formulating a solicitation, managing the secure competition, overseeing the competitive review process, and issuing recommendations for approval; Differentiate between processes used by different kinds of public sector, university, or non-profit solicitations and awards of funding (e.g., bids, contracts, local assistance, etc.). ■ Review RFPs from different sources (e.g., MCH, CDC, USDA (multiple types of programs), NIH, foundations (charitable, business, trade), voluntary agencies (e.g., AHA); Compare similarities and differences. ■ Volunteer to serve on a local, state, or federal external peer review committee to evaluate public health nutrition proposals for competitive funding. ■ Participate in a grant writing team with public health professionals who have successfully received grant funding for nutrition programs. ■ Identify a significant public health nutrition problem that you would like to address via a funded grant opportunity; Identify a potential funding source for your proposed project; and Develop a three-page Concept Paper (or Letter of Intent) comprised of no more than a two-page narrative and a one-page budget based on the requirements of the opportunity you have identified. 	<ul style="list-style-type: none"> ■ Moving to the Future: Nutrition and Physical Activity Program Planning http://www.movingtothefuture.org ■ Grants and Funding, Partners in Information Access for the Public Health Workforce https://phpartners.org/grants.html ■ Resources Related to Proposal-Writing, Partners in Information Access for the Public Health Workforce https://phpartners.org/grants.html#Resources%20Related%20to%20Proposal-Writing ■ Grants & Funding, Write Your Application, NIH https://grants.nih.gov/grants/how-to-apply-application-guide/format-and-write/write-your-application.htm ■ Cullinen, K.M. (2018). Grant writing in public health nutrition (S. Edelman, Ed.). In <i>Nutrition in public health</i> (4th ed.) (pp. 363-384). Burlington, MA: Jones & Bartlett Learning.

Example 2: Administrator



A collaboration of U.S. government agencies, public health organizations and health sciences libraries

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Grants and Funding

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Opportunities for fellowships, grants and other awards, including awards from members of the Partners project.

[Funding Opportunities](#) | [Resources Related to Proposal-Writing](#)

Funding Opportunities

Administration for Children and Families (ACF), HHS

[ACF Funding Opportunity Announcements](#)

Funding opportunities for federal programs that promote the economic and social well-being of families, children, individuals, and communities.

Agency for Healthcare Research and Quality (AHRQ), HHS

[AHRQ Funding Opportunities](#)

AHRQ supports a broad base of scientific research to promote improvements in clinical and health system practices, including the prevention of diseases and other health conditions.

[AHRQ's Grants On-Line Database](#)

Searchable database of grants funded by AHRQ.

All In: Data for Community Health

[DASH Mentor Program](#)

Program provides funding for advanced multi-sector community health data sharing initiatives.

American Academy of Pediatrics (AAP)

[Community Pediatrics Funded Projects](#)

Database of projects funded by the AAP.

American Medical Association Foundation

[American Medical Association Foundation Community Health Programs Grants](#)

Community Health Programs provide charitable grants to financially support innovative partnerships of physician-led community-based agencies, including free

Example 2: Administrator

NIH PA-10-053 (R21)

School Nutrition and Physical Activity Policies, Obesogenic Behaviors
and ~~Weight Outcomes among Maine~~ Kindergartners
Research Concept Paper

Purpose of the Study

This two year project is designed to (1) identify predictors of, facilitators for, and barriers to adoption and implementation of multi-level nutrition and physical activity policies and (2) model the association between school policy with health behaviors and BMI status in K-3rd graders in Topsham, Maine. Evaluating the quality of existing policy, behavioral, and BMI tracking systems, this study hopes to inform the development of a long-term evaluation plan to evaluate the efficacy of school wellness policies on obesogenic behaviors and BMI in Maine children.

Timeframe

Cycle I Due Date: February 16, 2012; Scientific Merit Review: October - November 2012; Advisory Council Round: January 2013; Earliest Project Start Date: April 2013

Background and Significance

Obesity prevalence among U.S. children and adolescents has almost tripled since 1980, and approximately 17% (or 12.5 million) of U.S. children and adolescents aged 2 - 19 years are obese.¹ According to the 2009 Maine Integrated Youth Health Survey (MIYHS), 16.5% of Maine kindergartners are overweight and 11.9% are obese.² The Social Ecological approach to identifying leverage points for designing effective interventions to promote energy balance is the standard for assessing the range of factors that influence diet and physical activity.³ Within this framework, interrelationships among multi-level, multi-sector nutrition and physical activity policies may be evaluated. Although policy interventions that make healthy choices available, affordable, and easy are widely accepted approaches for population level improvements in nutrition and physical activity behaviors, few studies to date have examined the policy adoption and implementation process.

Example 3: Educators, Preceptors, and Students

- Review the Introduction of the *Guide*
- Complete the Self-Assessment Tool
- Use the Comparison of Standards that crosswalk the KRDN/CRDN and KNDT/CNDT statements with the *Guide's* statements
- Use the Development Guide in planning curriculum and field experiences, and to direct student and/or interns to meet competencies

Example 3: Educators, Preceptors, and Students

Self-Assessment Tool

	Knowledge What is your level of knowledge related to...			Confidence How confident are you in your abilities related to...					Guide Knowledge & Skills Reference Number	
	Little or no	General	Thorough	Not at all	Not Very	Moderately	Very	Extremely		
Communication, Marketing, & Cultural Sensitivity										
■ Utilizing a range of media platforms to communicate nutrition information	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	CMC1
■ Tailoring food and nutrition messages to diverse audiences	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	CMC2
■ Following the concepts of cultural sensitivity when developing, implementing, and evaluating food and nutrition programs and resources	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	CMC3
■ Utilizing appropriate interviewing and counseling techniques	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	CMC4
■ Communicating with diverse audiences	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	CMC5
■ Explaining the role of cultural, socioeconomic, and behavioral factors in the delivery of public health services	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	CMC6
■ Utilizing the principles of marketing	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	CMC7

Example 3: Educators, Preceptors, and Students

My Professional Development Goals & Learning Plan

Targeted Areas for Improvement	Learning Plan/Resources	Time Frame	Priority		
			Low	Med	High
CMC1	Activity 2 (Describe the importance of a public health food and nutrition topic; List 3 takeaway messages; Practice a media interview) Resource 2 (Academy Media Guide)	3 weeks	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
			<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
			<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
			<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Example 3: Educators, Preceptors, and Students

Comparison of Standards for the RDN

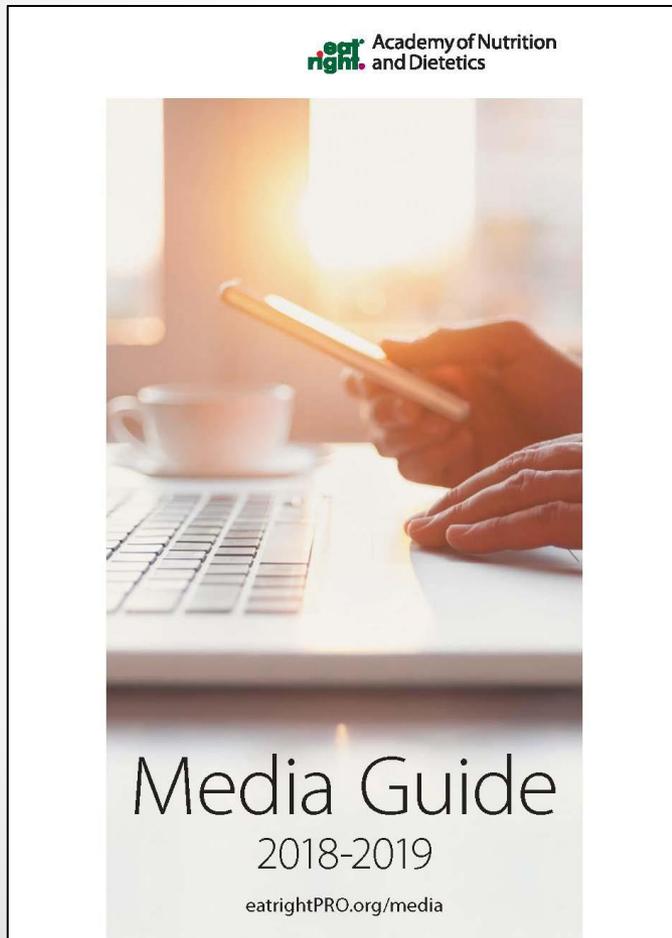
2017 ACEND® Accreditation Standards CP, DI, DPD, FDE, IDE Programs		Knowledge & Skills Development Guide
Domain 3. Clinical and Customer Services		
Development and delivery of information, products, services to individuals, groups and populations (ACEND®, 2017).		
KRDN	KRDN 3.1 Use the Nutrition Care Process to make decisions, identify nutrition-related problems and determine and evaluate nutrition interventions.	FN5-7
	KRDN 3.2 Develop an educational session or program/educational strategy for a target population.	CMC3, CMC7, RE7
	KRDN 3.3 Demonstrate counseling and education methods to facilitate behavior change and enhance wellness for diverse individuals and groups.	CMC4
	KRDN 3.4 Explain the processes involved in delivering quality food and nutrition services.	FN2-6
	KRDN 3.5 Describe basic concepts of nutritional genomics.	FN3
CRDN	CRDN 3.1 Perform the Nutrition Care Process and use standardized nutrition language for individuals, groups and populations of differing ages and health status, in a variety of settings.	FN5-7, CMC2-4
	CRDN 3.2 Conduct nutrition focused physical exams.	
	CRDN 3.3 Demonstrate effective communication skills for clinical and customer services in a variety of formats and settings.	CMC1-7
	CRDN 3.4 Design, implement and evaluate presentations to a target audience.	CMC1-3, CMC5, RE7
	CRDN 3.5 Develop nutrition education materials that are culturally and age appropriate and designed for the literacy level of the audience.	CMC2-3
	CRDN 3.6 Use effective communication and counseling skills to facilitate behavior change.	CMC4
	CRDN 3.7 Develop and deliver products, programs or services that promote consumer health, wellness and lifestyle management.	CMC3, PSE3-4, RE6, ML3
	CRDN 3.8 Deliver respectful, science-based answers to client questions concerning emerging trends.	CMC5
	CRDN 3.9 Coordinate procurement, production, distribution and service of goods and services, demonstrating and promoting responsible use of resources.	FN3-4
	CRDN 3.10 Develop and evaluate recipes, formulas and menus for acceptability and affordability that accommodate the cultural diversity and health needs of various populations, groups and individuals.	FN2

Example 3: Educators, Preceptors, and Students

Communication, Marketing, & Cultural Sensitivity (CMC)

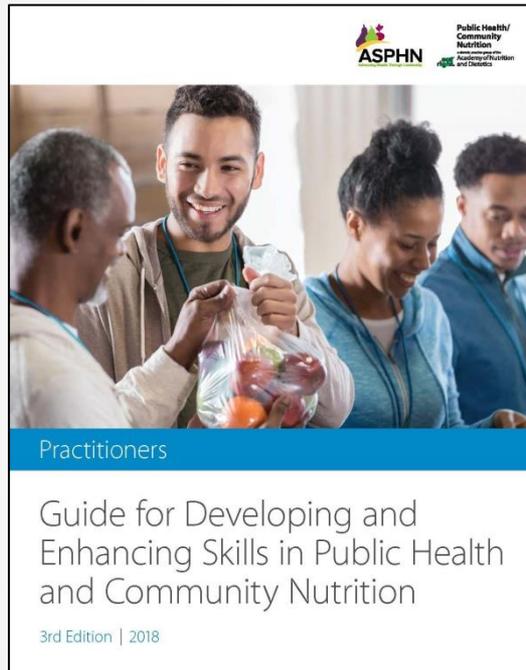
RDN	NDTR	Suggested Work-Related & Learning Activities	Example Resources
<p>CMC1. Media Platforms</p> <p>Utilizes a full range of current media platforms (e.g., TV, radio, print, newspapers, internet, and social media) appropriate for the target audience(s) to communicate food and nutrition information effectively.</p>	<p>CMC1. Media Platforms</p> <p>Utilizes a full range of current media platforms (e.g., TV, radio, print, newspapers, internet, and social media) appropriate for the target audience(s) to communicate food and nutrition information effectively.</p>	<ul style="list-style-type: none"> ■ Participate in various public education campaigns that emphasize health promotion and disease prevention (e.g., fruit and vegetable consumption, physical activity, breastfeeding, reading food labels). ■ Describe the importance of a public health food and nutrition topic; List three key points or takeaway messages that you would want the public to remember; Practice a media interview on the topic with an Academy of Nutrition & Dietetics spokesperson and record for critique. ■ Use health marketing basics, develop social media messages for diverse audiences. ■ Write a draft press release, fact sheet, FAQ list, public service announcement (PSA) or paid ad, or op-ed for a local or state newspaper, or conduct a mock interview and write a news story on a current food and nutrition issue. ■ Describe and evaluate a public health nutrition or physical activity campaign including the rationale, tailoring to the intended target audience(s) and delivery channels, message(s), language(s), cultural and communication preferences, expected reach, uptake, and expected audience. 	<ul style="list-style-type: none"> ■ Gateway to Health Communication & Social Marketing Practice, CDC https://www.cdc.gov/healthcommunication ■ Academy of Nutrition and Dietetics Media Guide, 2018-2019 https://www.eatrightpro.org/-/media/eatrightpro-files/media/meet-our-spokespeople/academymediaguide201819.pdf ■ The Health Communication Social Media Toolkit, July 2011, CDC http://www.cdc.gov/healthcommunication/toolstemplates/socialmediatoolkit_bm.pdf ■ Center for Linguistic and Cultural Competency in Health Care, DHHS, OMH https://www.minorityhealth.hhs.gov/omh/browse.aspx?lvl=2&lvlid=34

Example 3: Educators, Preceptors, and Students

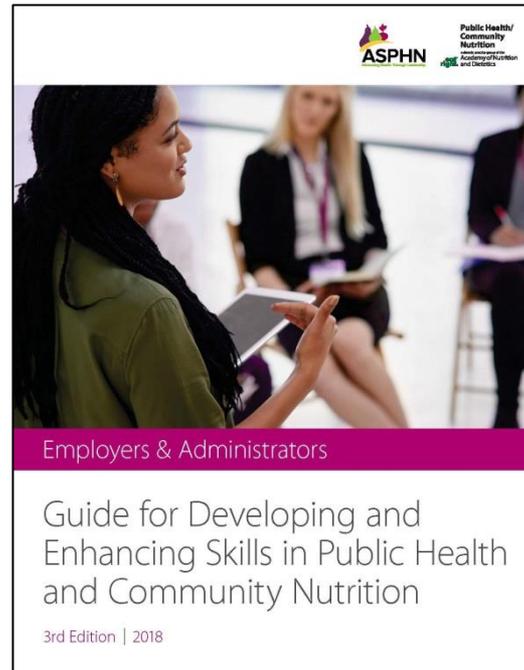


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	Addressing the national epidemic of childhood obesity... Deciphering the latest diet books, apps and trends... Packing a healthy lunch for the kids... Juicing and detoxing... Eating gluten-free... Food allergies... Food safety... Sports nutrition... African-American, Asian and Latino nutrition...	
	If you are working on any type of food and nutrition story, the Academy of Nutrition and Dietetics—the world's largest organization of food and nutrition professionals—is your best source for accurate, credible and timely food and nutrition information.	
	Contact Us	
	The Academy's Strategic Communications Team is available to help with everything from providing background information to arranging an interview with an Academy Spokesperson.	
	Email: media@eatright.org Website: www.eatrightPRO.org/media Phone: 800/877-1600	
	Lydia Hall: Media Relations Manager, ext. 4769 Sarah Amundsen: Public Relations Manager, ext. 171	
	Social Media	
	facebook.com/EatRightNutrition twitter.com/EatRight youtube.com/EatRightTV google.com/+Eatright facebook.com/KidsEatRight twitter.com/KidsEatRight pinterest.com/KidsEatRight youtube.com/KidsEatRight sm.eatright.org/KERlinked sm.eatright.org/GooglePlusKER facebook.com/foodnutrimag twitter.com/foodnutrimag pinterest.com/foodnutrimag instagram.com/foodnutrimag google.com/+foodnutrimag	
2	Academy of Nutrition and Dietetics	2018-2019 Media Guide www.eatright.org
		3

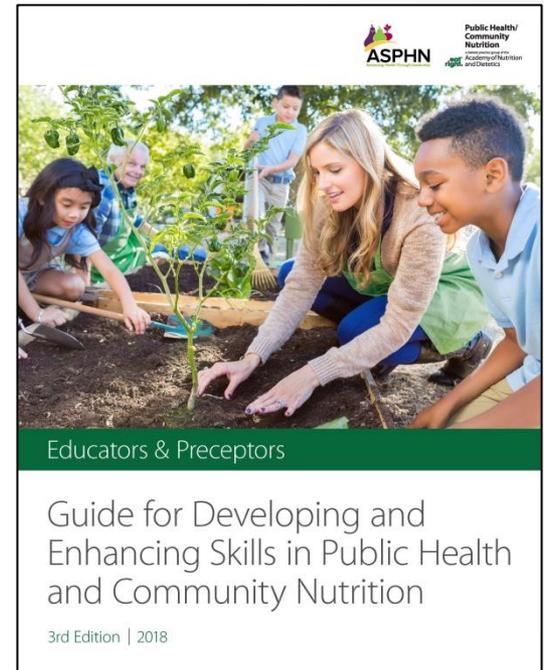
How to Use the *Guide*



Practitioners



Employers &
Administrators



Educators, Preceptors,
and Students

Summary

- As the field of public health nutrition continuously evolves with the changing landscape of population-based health care, there is a stronger and increasing focus on and need for public health skills of current and future RDNs/NDTRs.
- There is a need for PHN leaders in policy development, assessment, assurance, advocacy, PSE change, education, marketing, and programs and services.
- The *Guide* is intended for a variety of users and is the most comprehensive, up-to-date public health nutrition resource to train the current and future workforce.
- The *Guide* may be used to assess knowledge and skills, develop a personalized learning plan, and facilitate self-directed learning at every level of practice.

How to Access the *Guide* and Additional Resources

- Interactive PDFs located on the PHCNPG and ASPHN websites
 - www.phcnpg.org, www.asphn.org, and <https://publichealthnutrition.org/>
- Integrated into the ASPHN web-based tool and resources continually updated
 - <https://publichealthnutrition.org/>
- Public Health Nutrition Online Certificate of Training
 - <https://asphn.org/public-health-nutrition-online-certificate-training/>
 - <https://www.eatrightstore.org/collections/public-health-nutrition>

Questions

Thank you for joining us!

Training Our Workforce:

A New Guide for Training Public Health
and Community Nutrition Professionals



References

- 1) U.S. Department of Health and Human Services and U.S. Department of Agriculture. (2015). 2015–2020 Dietary Guidelines for Americans, 8th Edition.
- 2) Centers for Disease Control and Prevention. *Chronic Disease Prevention and Health Promotion; 2015*. <https://www.cdc.gov/chronicdisease/>
- 3) Centers for Disease Control and Prevention, National Center for Health Statistics. Effectiveness in disease and injury prevention; estimated national spending on prevention. U.S., 1988. *MMWR*. 1992;41:529-531.