DIACTICE 3D TOPICS OF PROFESSIONAL INTEREST



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Opening Up Opportunities through Work in Public Policy

rom the classroom to practice, public policy might well be the most important aspect of nutrition intervention last thought of as such by a registered dietitian (RD).

"This is the time to be a dietitian. If we make our voices heard," remarked Marcia Kyle, RD, LD, CDE, a dietitian at Pen Bay Healthcare and communications coordinator and state policy representative for the Maine Dietetic Association, when asked about the current political landscape.

Practitioners throughout the American Dietetic Association (ADA) agree that amid a clambering of national topics, the policy debates on health care and nutrition offer the clearest professional opportunities ever seen in the field. Participation in ADA activities and state associations' legislative processes can open a number of career opportunities for the RD, all the while making an impact on the practice of dietetics.

Meanwhile, defending the scope of practice remains the greatest challenge, and RDs can't rely on other people to fight their battles as the stakes continue to rise.

Experts in the science of nutrition, RDs are the best source of information for their clients and for their congressional delegations and governors. For those concerned they lack the skills to deal with public policy, the key word to remember is *teamwork*.

Juliana Smith, MEd, director, State and Government Relations at ADA, explained it as "less work done

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in silos and more focus on inter-connectedness."

ALL ON THE SAME TEAM

Smith, now in her fifth year with ADA, is quick to point out she's not an RD. She's their champion in the political ring. With a graduate degree in education from the University of Virginia, Smith's career spans the teaching of special needs children to working in the cabinets of two governors. In addition to serving as a senate aide on Capitol Hill, she's worked as a political appointee to the US Department of Agriculture and as a professional lobbyist. That background serves well when dealing with the complexities entailed in an agenda of legislative committee work. But the content of the agenda, how best to optimize American health through food and nutrition, must come from each RD.

"It's an integrated leadership, team approach," she said.

The Food & Nutrition Conference & Expo in November of 2010 featured a record amount of time and workshop space to the topic of public policy. This move, she said, represents a new energy for advocacy on ADA's Government Relations Team. It also provides ample opportunities, not just in the field of public sector careers, but through the expanded professional network one develops through such activities.

Lobbying on behalf of the Maine Dietetic Association has had Kyle in that state's governor's mansion more than once. The Maine Dietetic Association, a group she described as very tight-knit given the state's relatively small population, has about 300 RDs.

It doesn't hurt that the outgoing First Lady of Maine, Karen Baldacci, MS, RD, is herself a registered dietitian and has dedicated the past 8 years to promoting sound nutrition policy from the vantage point of being the governor's wife.

"She's been a great defender and supporter," Kyle said.

Baldacci and her husband, John, will leave the governor's mansion in 2011 due to term limits, and Kyle said the association is already working to activate relationships within the new administration. The goal in Maine, she said, is to make personal connections with lawmakers and become the professionals first called when nutrition questions arise.

Kyle recalled one instance with a new legislator fresh off the campaign trail. The new representative happened to be the mother of school-age children, and she was deeply concerned about the quality of food served in public institutions. Because of the Maine Dietetic Association's activity level within the political realm, the new legislator called them first.

"And now we have that connection," Kyle said.

That connection serves many functions, both for the practice of dietetics as well as for the career of young RDs. Kyle recounted her own professional experience, which went from serving as a clinical dietitian in a Chicago, IL, hospital to a similar position in Maine, then on to work in the field of diabetes education with the National Indian Health Services and, ultimately, to Penbay Hospital, where she is today.

"That's what's exciting about being a dietitian," she said, describing the ability to move about the country as very liberating. Active participation

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in the numerous dietary practice groups and other professional programs offered by ADA is a great way to boost that perk, she said.

And the reality is, she acknowledged, her entire career has in one way or another always been about policy development. Whether fighting to maintain state licensure, working within ever-changing hospital reimbursement structures, or educating Native Americans about diabetes through programs funded by federal grants, it's impossible to separate the career opportunities provided by policy with the policies that define one's career. The best way to become aware of new opportunities is to be a part of the group that's defining them.

"The opportunities are endless," she said, describing her own work in diabetes education as one of the most adventurous areas having been debated at the policy level. By taking advantage of the "integrated leadership" positions Smith described, RDs not only know where the work is, they know who's involved in the process. "It's exciting to see the students getting involved now."

Kyle had recently spoken to nine dietetics students at the University of Maine as part of the state association's outreach program. Student interests ranged from sustainable agriculture to sports nutrition. But whether seeking grant money for community gardens. or higher reimbursement levels for diabetes education, policy is at the core of an RD's career. "We're glad to see students interested in public policy," Kyle said, noting that even as those college students discuss policy issues with professionals such as her, they're practicing the oldest form of leadership training known to humanity—networking.

Kyle said her work with Smith dates back to her involvement with ADA's Legislative Public Policy Committee and the House of Delegates (HOD), both of which are credited as strong professional stepping stones.

Both women agreed that RDs often dismiss their own social networking skills and marketing abilities, relying more heavily on their clinical strength and scientific backgrounds. And in as much as participation in public policy leadership helps to expand one's network, it also sharpens other skills such as communication, both electronic and verbal.

ADA is a membership-driven organization, governed by its Board of Directors. Meanwhile, the profession is governed by the HOD, which is the deliberative body serving as a voice of ADA membership. In governing the profession, the HOD monitors and evaluates trends affecting the profession and identifies and monitors member issues and mega issues, as well as the resulting actions. The HOD also approves standards of education and standards of practice, as well as reviewing debates. The group includes 103 delegates as of June 1, 2010, 66 of whom are Affiliate Delegates, elected by members of the 53 affiliate dietetic associations. Nine members are Professional Issues Delegates, elected by the general membership representing broad areas of practice. Twelve are dietetic practice group delegates appointed by specific dietetic practice groups, and 10 are at-large delegates. The six HOD directors comprise the House Leadership Team, including the Speaker, the Speaker-elect, and the immediate Past-Speaker, all of whom are elected by the membership and serve on ADA's Board of Directors (1).

Ways to Get Involved in Public Policy

- Keep abreast of policy issues impacting the profession online at www.eatright.org
- Be active in your state's affiliate of the ADA
- Consider participation in one of ADA's dietetic practice groups and/or member interest groups
- Participate in local service organizations outside the dietetics community such as Rotary, Kiwanis, or Lions
- Consider a role in ADA's Political Action Committee and Legislative and Public Policy Committee
- Keep abreast of legislative issues facing your particular state

For dietetics practitioners who didn't get enough public speaking, presentation, or group communication skills while in college, participation in these professional associations not only advances one's career, it sharpens those skills. Leadership skills are best developed through practice, and both Smith and Kyle noted that there are hundreds of positions open for dietetics practitioners amid the dozens of state affiliates and dietetic practice groups.

Smith said that a new sense of direction at her office in Washington, DC, reflects a different level of drive in terms of policy, given the current state of politics. With health care and wellness at the forefront of the American consciousness, the here and now is the place to be.

WHY NOW?

The times are changing in favor of RDs. With historic health care reform legislation still raging as the topic du jour even a year after passage, the impact on food and nutrition practitioners is bigger than calcium intake on osteoporosis. At the same time, licensure and scope of practice remain integral to acquiring any of the advancements possible through new health care reform.

"Health care reform is huge right now," Smith said, adding that her team has prepared detailed online presentations on the subject for membership to review. The key for dietetics practitioners to access the potential currently on the table is active participation, and Smith said this comes through the development of relationships with elected and agency officials, as well as providing a state regulatory specialist in each state.

All agree that what's on the table is well worth the fight, as the very root of the RD's practice—wellness and disease prevention through nutrition—is at the heart of the debate.

We're in the preventive group, and now our time is here," Kyle said excitedly.

The only thing better than having an RD as a state governor's wife is having the First Lady of the United States take a stance on wellness through nutrition. As leaders such as Michelle Obama point out, it is clear that every dollar invested in keeping people healthy saves millions down the road in long-term care costs. This has been made particularly clear in the case of diabetes, a field in which Kyle has been working for years.

Experiments in which she's participated have demonstrated that programs run by certified diabetes educators can reduce the number of

hospitalizations experienced by those with the disease, she noted, adding that those early grant-funded initiatives, which proved those points, have resulted in education programs in nearly every state.

"We've actually had reimbursement for diabetes education for several vears," she said, pointing out that this was a hot topic when she first entered the practice. Today, in the field of diabetes research, dietetics is respected as a cornerstone. Most certified diabetes educators are nurses, she said, and RDs are welcome at the discussion table. With prevention and wellness now at the forefront of the health care debate, the opportunity to replicate this recognition in other medical arenas, such as cardiovascular disease, is available.

"And that's exciting," she said.

But not everyone is privy to this information, including those making laws and implementing policy on a daily basis.

Brenda Richardson, RD, LD, whose own career spans work in the US Army Medical Specialist Corp to chief executive officer of Brenda Richardson Associations, Inc, advises RDs against surprise when learning that most elected officials know little of nutrition science. Everyone eats, therefore everyone thinks they know something about nutrition, and RDs must get themselves to the table if they want input into what's for dinner there.

"So many times you hear people say things should be changed, or that's not how it should be. But it's hard to change those things once they're made into law," she said.

The overall message to RDs is that individually everyone needs to assume some degree of personal responsibility for the profession's image, and not expect others to magically understand it.

"It's an investment in our future, and there's going to be a return on that investment," she said, adding later, "You can't just go to one meeting and think you're done."

Building key relationships with policy makers not only helps one's career later on, but impacts the profession as a whole. Policy makers, and

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particularly the staffers and aides to legislators, come and go, but relationships between professions and institutions can be long lasting.

Richardson herself serves as the current State Regulatory Specialist Liaison to the Indiana State Department of Health and was the Diet Manual Chair of Indiana Dietetic Association of the Governor's Office between 2008 and 2009. She's also a member of the ADAPAC (ADA's Political Action Committee) Board of Directors through 2013.

And her recollection of policy impact quickly took her back to 2007 when her role in Indiana's State Healthy Weight Initiative and Chronic Disease Prevention Alliance almost didn't occur.

Through her leadership role in the Indiana Dietetic Association and ADA programs, Richardson caught wind of a state program being investigated by the governor's office to combat obesity. But no RDs had been invited to the discussion. After delving into the matter, she learned that the program had state backing and funding potential and she quickly brought RDs to the table of what is

now a comprehensive, well-publicized, statewide effort.

"In health care, it's so competitive for the dollars, to be successful you have to be active in public policy and advocacy to be successful," she said, adding that even the state's Web site for the program is now designed by an RD. The program eventually received funding through the Centers for Disease Control and Prevention and members of the profession have been involved ever since. Had she not been in the loop of those early discussions, the program would have certainly gone on without RDs. That a statewide, governmentfunded obesity program could have been launched without even one RD would not have simply left money on the table, it would have given cause to wonder what purpose RDs really serve. "Who knows what would have happened. You see the difference between getting involved and not."

WHY RDs?

RDs need to participate in legislative efforts and public policy related to food and nutrition because they are the experts. The demand for credentialed professionals is defined almost exclusively through governmental

Professional Advancements Possible through Public Policy Involvement

- Improved communication and presentation skills
- Broader understanding of the complexities involved in legislation
- Increased professional opportunities through networking functions
- Broader scope of professional acquaintances in both government and private sector settings
- Increased opportunity for publications and research
- Increased awareness of opportunities available

regulations, and therefore the scope in which one practices is defined by the decisions of lawmakers. Being politically active also provides career opportunities because dietetics practitioners are kept up to date on food and nutrition issues as well as networking opportunities.

Smith agreed that the health care reform debate underway is going to

benefit someone somewhere. Since each state will enact their own version of the health care reform, RDs need to lobby for recognition and reimbursement of their services. Meanwhile, other interests within the food and nutrition industry will be working to promote their own ends in these legislative debates. Kyle pointed out how important it is to emphasize that RDs base their nutritional advice on research, not profits.

"We base all of our information on science and you just can't refute that that's the way to go," she said.

But RDs must become more aggressive in marketing themselves and the RD credential. They must distinguish themselves from others who seek to profit from an industry ripe with proprietary data.

Richardson pointed out that many RDs shy away from legislative functions, feeling it's perhaps out of their natural element.

"I think for a lot of RDs it's a fear factor," she said. From the bustling offices of legislators to complex bills and endless meetings, the experience might seem daunting at first. But from the state affiliates to national committees of the ADA, organizational tools exist to help deliver the RDs' expertise to the legislative assembly. "Just like any organization, your strength comes from your members."

Likewise, as the health care debates continue to rage, there are many things much more fearful than public speaking. Organizations that fail to seize opportunities will be pushed back in favor of those that do.

Smith pointed out that the ADA's ongoing marketing campaigns have helped and the media has become somewhat better about distinguishing between RDs and nutritionists, but as economic woes beleaguer states, it's easy for politicians to look for things to cut. Licensure boards are always a quick target, she said. "Members need to be aware and protect the profession."

In a profession as heavily regulated as the food industry, the question is not so much why RDs should be interested in policy, but rather why they would not. Consider the impact on practitioners if a state were to remove their licensure laws and allow unlicensed nutritionists to run public school cafeterias or Special Supple-

mental Nutrition Program for Women, Infants, and Children (WIC) programs. The buzzword in health care finance is currently prevention, Smith said, noting this is great for RDs. But it could also dramatically change things like hospital billing and coding procedures, or nutritional requirements for various funded programs. The bottom line is RDs need to be aware of legislative issues and the threats or opportunities of each proposal.

From the standpoint of being a professional, networking and collegial associations are a good thing. "It's all very related," Smith said of the network stemming from federal entities such as the US Department of Agriculture down to community food banks. People in the US Congress have home towns and in that sense are local themselves, and people at the local level are certainly impacted by federal regulations. That number and variety of important contacts makes for a thick Rolodex.

UNLIMITED OPPORTUNITIES

The avalanche of policy data available to RDs is as difficult to miss as the opportunities for involvement. Tools available at the state and national levels range from surfing the Internet to organizing committee work. The first step toward involvement is to become active, and the ultimate opportunity in policy work is face-to-face communication with legislators.

Serving in a public policy capacity is easy at the state affiliate, dietetic practice group, or even legislation and public policy committee level. Additional opportunities exist outside of ADA's circle, such as serving in other professional and local community groups. These local opportunities help keep one current on events impacting not only nutrition, but other public issues. Relationships developed at local functions can help facilitate future relationships with colleagues and legislators.

Richardson's private practice services clients ranging from nursing, acute care, to retirement and assisted living facilities, and she also serves as an expert witness for legal entities. Activity in state and national organizations not only impacts the profession and makes a difference, but it

also builds credibility and networks. Like writing for publications, speaking to groups gets easier with practice, and this endeavor yields positive results. Off hand, she observed that three state legislators nationally bear the initials RD, and that's a good start for an industry dominated by lawyers and insurance companies.

"Each state affiliate has a public policy plan, and getting involved is as simple as contacting the appropriate chair," she said. "As a businesswoman, getting involved in other boards within one's community, be they hospital or schools, not only expands one's network but keeps one privy to possible programming ideas."

ADA hosts a wealth of policy information through its Web site (www. eatright.org), as well as with workshops and materials disseminated through the state affiliates.

The fact is, those involved in public policy want input from practicing RDs once they know to ask for it.

"Lobbyists don't have the science background," Smith said, explaining the beauty of a relationship between policy professionals and RDs as based in teamwork. Whereas practicing RDs don't have time to review all the material coming out of the federal government, they have the clinical experience needed to answer specific questions and propose solutions to their legislative representative.

"It's a must," Kyle said of the need for state affiliates to stay in contact with ADA's Government Relations Team. Having policy professionals in Washington, DC, provides an "eye opener" to RDs everywhere, she said. "We can't just assume that a state wants to keep a licensure board," she said, offering up an example. As the Government Relations Team continues to communicate with RDs across the nation, they will recognize the threats and opportunities faced by colleagues, understanding that these are ultimately shared by all. "We have a bigger voice when we're all saying the same thing," she said.

Reference

 American Dietetic Association. HOD Fact Sheet. Washington State Dietetic Association Web site http://www.nutritionwsda.org/docs/ 2010%20HOD%20Member%20Fact%20Sheet% 20HOD%20Whats%20It%20All%20About.pdf. Accessed February 8, 2011.