## American Academy of Sports Dietitians and Nutritionists

Implementation of Nutrition Programs by Allied Health Professionals

#### **ABSTRACT**

Several national organizations, including the Department of Health and Human Services, have determined that obesity rates in the US will decline only through community based educational programs. According to former Secretary of Health and Human Services, Tommy Thompson, the medical community is not equipped to resolve the obesity epidemic; community based programs directed at educating the public is the only resolution. In conjunction with these organizations, it is the position of the American Academy of Sports Dietitians and Nutritionists (AASDN) that implementation of nutrition programs by fitness and allied health professionals who do not possess an advanced degree in nutrition, is an essential element to reducing obesity rates in the U.S.

The American Academy of Sports Dietitians and Nutritionists (AASDN) is committed to implementation and endorsement of nutrition programs by allied health professionals that adhere to the American Dietetics Association (ADA) guidelines and follow all state licensure law regulations.

All state licensure laws include a clause which outlines requirements for nutrition programs that are to be implemented by allied health professionals, who do not possess and advanced degree in nutrition. All program materials must be developed and monitored by qualified licensed dietitians/nutritionists; no program changes can be made without written approval of the licensed dietitian/nutritionist.

Therefore, when instituting a nutrition component all allied health professionals, that do not possess an advanced degree in nutrition (as defined by individual licensure laws) must use materials developed by a qualified, licensed dietitian/nutritionist; no program change can be initiated without prior written approval by a licensed dietitian/nutritionist.

#### POSITION STATEMENT

Several national organizations, including the Department of Health and Human Services, have determined that obesity rates in the US will decline only through community based educational programs. According to former Secretary of Health and Human Services, Tommy Thompson, the medical community is not equipped to resolve the obesity epidemic; community based programs directed at educating the public is the only resolution. In conjunction with these organizations, it is the position of the AASDN that implementation of nutrition programs by fitness and allied health professionals who do not possess an advanced degree in nutrition is an essential element to reducing obesity rates in the U.S.

#### **BACKGROUND**

During the past 20 years there has been a dramatic increase in obesity in the United States despite all the money spent on diet programs. Obesity is defined as a BMI of greater than 30 or greater.<sup>2</sup>

In 2008, only one state (Colorado) had a prevalence of obesity less than 20%. Thirty-two states had a prevalence equal to or greater than 25%; six of these states (Alabama, Mississippi, Oklahoma, South Carolina, Tennessee, and West Virginia) had a prevalence of obesity equal to or greater than 30%.<sup>2</sup> If current trends continue 103 million American adults will be considered obese by 2018. That would be 43 percent of adults, compared to 31 percent in 2008, according to research by Kenneth E. Thorpe of Emory University, an authority on the cost of treating chronic disease. <sup>3</sup> Mr. Thorpe concluded that the prevalence of obesity is growing faster than that of any other public health condition in the country's history. Health care costs related to obesity - which is associated with conditions like hypertension and diabetes would total \$344 billion in 2018, or more than one in five dollars spent on health care, if the trends continue. 3 If the obesity rate were held to its current level, the country would save nearly \$200 billion a year by 2018, according to the study. 3

This statement was authored by the American Academy of Sport Dietitians and Nutritionists. Individual name recognition is reflected in the acknowledgments at the end of this document.

#### INTRODUCTION

Despite all the attention paid to this "epidemic" in recent years, efforts to control the rise in obesity unsuccessful. been Several national organizations, including the Department of Health and Human Services, have determined that obesity rates in the US will decline only through community based educational programs. According to former Secretary of Health and Human Services, Tommy Thompson, the medical community is not equipped to resolve the obesity epidemic; community based programs directed at educating the public is the only resolution.1 In conjunction with these organizations, it is the position of the AASDN that implementation of nutrition programs by fitness and allied health professionals who do not possess an advanced degree in nutrition is an essential element to reducing obesity rates in the U.S.

#### SAFE AND EFFECTIVE PROGRAMMING

The American Academy of Sports Dietitians and Nutritionists (AASDN) is committed to implementation and endorsement of nutrition programs by allied health professionals that adhere to the American Dietetics Association (ADA) guidelines and follow all state licensure law regulations.

All state licensure laws include a clause which outlines requirements for nutrition programs that are to be implemented by allied health professionals, who do not possess and advanced degree in nutrition. The following is a sample clause taken from the FL Board of Medicine, Dietetics and Nutrition Practice Council:

"Nothing in this (FL) act may be construed as prohibiting or restricting the practices, services, or activities of: ANY PERSON WHO PROVIDES WEIGHT CONTROL SERVICES or related products, provided the program is reviewed by, consultation is available from and no program change can be initiated without prior approval by a licensed dietitian/nutritionist, a dietitian or nutritionist licensed in another state that has licensure requirements considered by the state council to be at least as stringent as the requirements for licensure under this act, or a registered dietitian."

Therefore, when instituting a nutrition component all allied health professionals that do not possess an advanced degree in nutrition (as defined by individual licensure laws) must use materials developed by a qualified, licensed dietitian/nutritionist, no program change can be initiated without prior approval by a licensed dietitian/nutritionist.

It's important to note here that the ADA does not directly provide guidelines for implementation of nutrition programs by allied health professionals but is directly involved in implementation of all state licensure laws.

As indicated in many state licensure laws, no person may engage for remuneration in dietetics and nutrition practice or nutrition counseling unless the person is licensed in accordance with the provisions of the state. All allied health and fitness professionals are in accordance with this provision as long as they make it clear that they use materials developed by qualified licensed dietitians/nutritionists (not their own materials), no program change can be initiated without prior approval by a licensed dietitian/nutritionist, and that the program is monitored by a qualified licensed dietitian/nutritionist.

AASDN further recommends that all allied health professionals obtain signed legal agreements from all participants in such programs which itemize risks and benefits and acknowledges the licensed dietitian/nutritionist that developed the program. An example of such an agreement is included in this position paper. As with any fitness/wellness program, allied health professionals should also carry adequate liability insurance.

#### **AASDN**

AASDN programs adhere to all state licensure laws by adhering to the previously stated licensure clause. AASDN Nutrition Specialists use materials developed by qualified, licensed professionals. No changes can be made unless written approval is obtained from an AASDN licensed professional.

AASDN Nutrition Managers work directly with a qualified, licensed dietitian. Again, the Nutrition Manger adheres to state licensure laws by working directly with an AASDN dietitian. The dietitian reviews all programs and provides supervision when working with clients. No changes are made to the program without written approval of the AASDN licensed professional.

As indicated in many state licensure laws, no person may engage for remuneration in dietetics and nutrition practice or nutrition counseling unless the person is licensed in accordance with the provisions of the state. All Nutrition Specialists and Nutrition Managers are in accordance with this provision as long as they make it clear that they use materials developed by AASDN licensed, qualified professionals (not their own materials) and that they work directly with licensed, qualified professionals through AASDN.

Hence, all Nutrition Specialists and Nutrition Managers must indicate their partnership with AASDN on all program materials and must use only approved AASDN program materials.

All Nutrition Specialists and Nutrition Managers must also adhere to the AASDN Scope of Practice (attached). Any advertising materials must make it clear that the nutrition component has been developed by and is and monitored by AASDN.

Since responsibility for Nutrition Specialist and Nutrition Manager Program development and monitoring rests with AASDN licensed professionals, all Nutrition Specialists and Nutrition Managers are required to adhere to the program as is, and no changes can be made without direct written approval by AASDN. AASDN also recommends that all Nutrition Specialists and Nutrition Managers carry liability insurance for added legal protection.

#### **REFERENCES**

- 1. http://ods.od.nih.gov/factssheets/dietarysuppl.asp.
- 2. http://www.cdc.gov/obesity/data/trends.html
- 3. Sack, K. Study foresees an increase in obesity and its costs. New York Times, Nov 17, 2009.



# The American Academy of Sports Dietitians and Nutritionists

### **Program Waiver**

I am aware that exercise can be physically stressful and in certain instances can even be harmful and result in death; I am also aware that unknown incidences can arise from changing eating patterns. I am aware that anyone who smokes; has ever had elevated blood pressure; is over 45 (men) or 55 (women) years of age; presently does not exercise; has ever had cardiac (heart) problems; is overweight; has diabetes; has a family history of cardiovascular problems; is susceptible to or has ever had orthopedic problems; or is pregnant; is more at risk while exercising and changing eating patterns. I understand that I should consult with my personal physician before I begin or continue any such program. I also understand it is recommended that I have a physician identify any limitations on my exercise or eating patterns that I may have if any of these conditions exist.

I understand that my participation in the Nutrition Specialist Program through AASDN, which includes exercise, meal planning, and nutrition education – developed by qualified licensed dietitians/nutritionists - is voluntary and at my own risk. I hereby release AASDN; affiliates, subsidiaries and parent companies; any of its or their respective officers, directors, agents or employees from and agree to hold any and all of the released individuals or entities harmless against, any claims or liability arising out of my participation in any of the programs and facilities. I further agree not to sue or make any claim of any nature whatsoever relating to or arising out of my participation in any of the Nutrition Specialist programs, or use of facilities in any court, agency, or other forum or proceeding against any individual or entity whom I have released and agreed to hold harmless in the preceding sentence.

I have read this form and fully understand the above waiver, release, and assumption of risk. I have had the opportunity to ask questions. I understand that I have given up substantial rights by signing this waiver, release, and assumption of risk and I sign it voluntarily. I have sufficient information to give my informed consent to participate in the referenced program and its facilities.

I also understand that group classes may be audio/video taped for educational purposes only.

Signature	Date
Witness	Date

The information obtained in this program is designed to optimize safety and foster attainment of personal goals. All information will be kept strictly confidential and will only be available to Nutrition Specialist personnel, and the program dietitian, unless otherwise authorized in writing by you.