

ONTARIO NEEDS THE EXPERTISE OF PUBLIC HEALTH DIETITIANS/NUTRITIONISTS WORKING IN LOCAL HEALTH UNITS:

Registered dietitians are the regulated experts promoting health through food and nutrition.

- Socio-demographics and health practices put a significant percentage of the Ontario population at increased risk for poor nutrition.
- Evidence links poor diet, physical inactivity and obesity in the population to chronic diseases such as cardiovascular disease, cancers, and type 2 diabetes¹⁻³. These conditions cost the province billions of dollars annually.
- The Government of Ontario is committed to improving the health of Ontarians through its *Action Plan for Health Care*⁴ which includes initiatives like the *Childhood Obesity Strategy*.
- Public health nutrition professionals play a key role in supporting the Government's *Action Plan for Health Care*.

Public health nutrition is the application of a nutrition lens to public health functions – including population health assessment, health promotion, disease and injury prevention, health surveillance and health protection.

THE CURRENT SITUATION

While the importance of good nutrition, a healthy food system, and a supportive nutrition environment have never been so important, in the past three years there has been a significant erosion of support for public health nutrition professionals at the provincial level.

- Loss of two senior nutrition consultants at the Ministry of Health and Long Term Care and the Ministry of Health Promotion.
- Loss of six teaching health unit nutrition researchers.
- Gapping and subsequent loss of at least 17 FTE public health nutritionist and dietitian positions across public health units in Ontario.
- Lack of long-term stability and integration of registered dietitian-led provincial nutrition resource centre providing programs and resources, policy advice, and professional practice aligned with whole-of-provincial government health strategies (e.g., Chief Nutrition Officer/Office).
- Lack of a Health Human Resources Strategy focusing on public health dietitian/nutritionist professionals.

THE IMPACT OF NO ACTION

Every day Ontario residents make decision after decision about what to eat, where to eat, and what to buy. Food and nutrition differs from other public health issues like smoking and alcohol consumption in its complexities. Unlike smoking or alcohol, people cannot stop eating. Food and nutrition are vital to the good health of the province of Ontario and its residents.

Without the inclusion of the public health nutrition focus in health strategies and plans at the provincial level and without the support and capacity at the local level, Ontario residents will not have access to quality, evidence-based information and support to lead healthier lives.

WHAT CAN BE DONE TO IMPROVE THIS SITUATION?

Ontario residents need and deserve access to the expertise of registered dietitians in public health who will advance the agenda of healthy food environments, healthy food behaviours, and a sustainable and healthy food system. Support for the training, recruitment, and retention of these unique health professionals is vitally important to the population's health.

OUR 3 “ASKS”:

1. CAPACITY:

Develop a health human resources public health nutrition professional strategy which will ensure adequately trained professionals and a sufficient number of public health nutrition positions across the province to respond to the *Action Plan for Health Care* demand.

- Includes recruitment and retention of qualified public health nutrition professionals.
- Ensure all provincial health units have the correct number of filled public health dietitians/nutritionist positions to meet the needs and demands of the local community.
- Support for public health nutrition professionals to become leaders in management and research roles by funding positions for public health dietitians to take Masters level training, equivalent to the incentives offered to physicians to train as Medical Officers of Health.
- Implement the recommendations for action outlined in the Dietitians of Canada report *Strengthening Public Health Practice in Canada*⁵ by enhancing and supporting the advancement of public health nutrition practice.

2. PROVINCIAL PUBLIC HEALTH LEADERSHIP:

Ensure the Ministry of Health and Long-term Care is able to adequately address public health nutrition policy and programs across the whole-of-government. A minimum of two dedicated senior nutrition consultants that provide the appropriate capacity and authority to support and promote whole-of-government initiatives need to be reinstated.

- Similar to the Chief Nursing Officer, what is required is a professional practice lead (i.e., Registered Dietitian) in the field of public health nutrition (e.g., In Public Health Standards, Practice and Accountability Branch there are professional practice positions for epidemiology and nursing)
- Transfer the Nutrition Resource Centre from the Ontario Public Health Association into Public Health Ontario (PHO) to enhance the current health promotion capacity building services and resources housed at. It is logical and fiscally prudent to reduce duplication and strengthen nutrition capacity at an agency dedicated to protecting and promoting the health of all Ontarians and reducing inequities in health. As a hub organization, PHO links public health practitioners, front-line health workers and researchers to the best scientific intelligence and knowledge from around the world. This scientific intelligence and knowledge must include nutrition.

3. PUBLIC HEALTH HEALTHY EATING STRATEGY:

Develop and implement a public health nutrition and healthy eating strategy that incorporates:

- An integrated, evidence-informed healthy eating and healthy weights strategy that incorporates all components of the *Ottawa Charter*⁶. Public health nutrition professionals must play a key role in this strategy's development.
- Access to public health nutrition professionals with the expertise to support population health assessment, research, and evaluation of population health-based approaches to reverse the trend of childhood obesity, promote healthy behaviours, and invest in healthy aging opportunities for home-based seniors.
- Integration of the social determinants of health to improve the health equity of Ontarians, including access to nutritious food and supportive food and nutrition environments.
- Include food and nutrition performance indicators in local health unit accountability agreements, starting with young children and seniors (e.g., utilizing valid measurement tools that already exist such as *NutriSTEP™* and *SCREEN™* and where none exist, contribute to the development of new tools and their validation).

REGISTERED DIETITIANS IN PUBLIC HEALTH – YOUR KEY TO GOOD NUTRITION AND HEALTH

WHO ARE NUTRITION PROFESSIONALS IN PUBLIC HEALTH?

Public health nutrition professionals apply a nutrition lens to: population health assessment, health promotion, disease and injury prevention, health surveillance, and health protection. These specialized regulated health professionals integrate three principles which distinguish public health (and public health nutrition) from other aspects of the health system: a focus on the population, determinants of health, and the root causes of disease and disability; consideration of the needs of the whole population; and, interventions that are based on consideration of how social change can be facilitated from a life course perspective³.

Nutrition professionals in public health are either Public Health Dietitians or Public Health Nutritionists. Both are regulated health professionals who meet the entrance requirements and on-going quality assurance program requirements of the College of Dietitians of Ontario. Completion of an accredited four-year university degree and one-year internship program or Masters degree/practicum program plus an entrance exam is required to use the title "Registered Dietitian" (RD).

In public health, master's trained dietitians are legislated by the *Health Promotion and Protection Act*. These nutrition professionals have the enhanced critical thinking, research and capacity to plan, evaluate and fulfill public health functions such as population health assessment, health surveillance and disease prevention.

AT EACH LOCAL HEALTH UNIT, NUTRITION PROFESSIONALS IN PUBLIC HEALTH:

- Identify and assess nutrition-related needs of the community.
- Develop, coordinate, and facilitate participate partnerships among public health and other sectors of the community to promote healthy eating and increase the accessibility and availability of healthy foods.
- Participate in policy development and policy influencers (including setting standards related to food and nutrition).
- Facilitate communication (e.g., written, oral, media, social marketing) and public and professional education (including the role as a consultant and resource development specialist).
- Build community capacity.

- Collaborate with and provide nutrition consultation to public health staff and external partners.
 - Function in the role of a community partner, collaborator, and influencer.
 - Excel in project management.
 - Advocate for accessibility to healthy, affordable, safe food and other issues related to healthy eating (internal and external to the organization).
 - Represent the community to and at various levels of Government.
 - Conduct research and evaluation (including interpretation and application within nutrition practice) to further nutrition knowledge and practice.
 - Act as preceptors and mentors to students and dietetic interns and provide education of registered dietitians new to the profession and other health professionals.
 - Share nutrition expertise through coalitions and networks.
 - Conduct research to help determine best practices in nutrition and dietetics.
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¹ Reilly JJ, Methven E, McDowell ZC, Hacking B, Alexander D, Stewart L, et al. Health consequences of obesity. Arch Dis Child. 2003 Sep;88(9): 748-52.

² Van Dyun MAS, Pivonka E. Overview of the health benefits of fruit and vegetable consumption for the dietetic professional: Selected literature. J Am Diet Assoc. 2000; 100:1511-21.

³ St. Onge MP, Keller KI, Heymsfields SB. Changes in childhood food consumption patterns: A cause for concern in light of increasing body weights. Am J Clin Nutr. 2003;78: 1068-73.

⁴ Ontario's Action Plan for Health Care: Better patient care through better value from our health care dollars. 2012. Retrieved from http://www.health.gov.on.ca/en/ms/ecfa/healthy_change/

⁵ Pan Canadian Task Force on Public Health Nutrition Practice, Dietitians of Canada, 2012. Retrieved from <http://www.dietitians.ca/Secondary-Pages/Public/Pan-Canadian-Task-Force-on-Public-Health-Nutrition.aspx>

⁶ Ottawa Charter, 1986. Retrieved from http://www.who.int/hpr/NPH/docs/ottawa_charter_hp.pdf