ASPHN

Advancing Health Through Leadership

formerly ASTPHND

2018-2019 Board Members

President: Robin Stanton
President-elect: Diane Golzynski
Past President: Takako Tagami
Treasurer: Pat Simmons
Secretary: Christina Thi
Directors at Large:

- ✔ Becky Adams
- ✔ Jennifer Dellaport
- ✔ Jill Lange
- ✔ Jackie Rios-Avila
- ✔ Jennifer Young

Fruit & Vegetable Council Chairs:

- ✔ Lisa Gemlo
- ✔ Megan Hlavacek

MCH Nutrition Council Chairs:

- ✔ Mikaela Schlosser
- ✔ Heather Harrison-Catledge

Obesity Prevention Nutrition Council Chairs:

- ✔ Helen Brown
- ✔ Elaine Russell

Fundraising Committee Chair: vacant

ASSOCIATION OF STATE PUBLIC HEALTH NUTRITIONISTS

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Members

Members in State Government Agencies: Designee, Expanded Member, and MCH Nutrition Council Liaison

Other Members (local agencies, universities, and retired): Associate Member

Board of Directors
(primarily from state agencies)

- 5 Officers: President, President-Elect, Secretary, Treasurer, & Past-President
- 5 Directors at Large
- 6 Council Representatives
- 1 Fundraising Committee Chair

Committees

Administration & Finance

Policy

Collaboration

Governance

Membership Communication & Outreach

Task Committees

Annual Meeting Planning

Audit

Annual Awards

Fundraising

Councils

Fruit & Vegetable Nutrition Council

Maternal & Child Health Nutrition Council

Obesity Prevention Nutrition Council

Grant Projects

CDC, OSTLTS Cooperative Agreement

HRSA, MCHB Contract

HRSA, MCHB Cooperative Agreement

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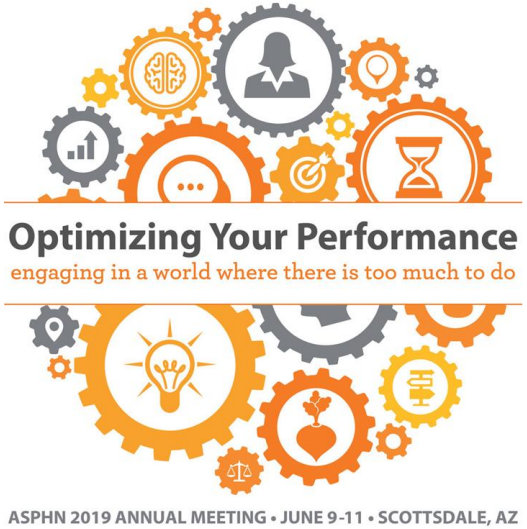
2019 Annual Meeting

Optimizing Your Performance

engaging in a world where there is too much to do



Treasurer's Report

- ASPHN fiscal year begins January 1st and ends December 31st
- Budget for FY 2019 is $3,146,545
- Auditing for FY 2018 is in process

Funding Partners

CDC, Division of Nutrition, Physical Activity and Obesity (DNPAO)

HRSA, Maternal and Child Health Bureau (MCHB)

Fundraising Committee

- ASPHN is a nonprofit charitable organization and donations are tax deductible

- $1,748 raised in donations in 2018

2017-2022 Strategic Plan

Mission

To strengthen nutrition policy, programs and environments for all people through development of public health nutrition leaders and collective action of members nationwide.

Vision

Healthy eating and active living for everyone.

Membership Communication & Outreach Committee

- ✔ 448 members
  - 328 members in 2017
  - 295 members in 2014
- ✔ Special outreach on recruiting and engaging members who work in the WIC program

Collaboration Committee

- Being more strategic

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Join!

ASPHN's National Fruit & Vegetable Nutrition Council

Benefits Include:

- ✔ **NETWORKING**
  With other public health professionals across the nation
- ✔ **RESOURCES & SUPPORT**
  For your public health nutrition projects and activities
- ✔ **PROFESSIONAL DEVELOPMENT**
  Opportunities for continuing education
- ✔ **POLICY & ADVOCACY SKILLS DEVELOPMENT**
  For application to your work
- ✔ **LEADERSHIP DEVELOPMENT**
  Opportunities abound!

Our Mission

Strong policies, programs, systems and environments that increase access to and support consumption of fruits and vegetables.

Our Vision

To serve as an organized voice of state public health nutrition leaders in public health planning that affect fruit and vegetable consumption.

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The National Fruit & Vegetable Nutrition Council is a council of the Association of State Public Health Nutritionists (ASPHN), a non-profit membership organization. For more information visit:

www.asphn.org or **www.facebook.com/asphn**

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National Fruit & Vegetable Nutrition Council

UBLIC HEALTH NUTRITIONISTS

Any Member Can Join!

ASPHN's Obesity Prevention Nutrition Council

Our Purpose

To strengthen policy, environmental change, programs and services to decrease obesity across the nation.

Here's How We Do It

- ✔ **LEADERSHIP**
  On the role and competencies of public health nutrition in obesity prevention
- ✔ **ADVOCACY**
  For obesity prevention resources at the state and national level
- ✔ **COLLABORATION**
  With partners to impact obesity across states and the nation
- ✔ **EXPERTISE**
  As a trusted resource and partner on policy development, environmental change, evidence based programs and practices for national and state obesity prevention efforts
- ✔ **NETWORKING**
  Training, education and sharing of evidence based obesity prevention practices among PHNs and others

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The Obesity Prevention Nutrition Council is a council of the Association of State Public Health Nutritionists (ASPHN), a non-profit membership organization. For more information visit:

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Obesity Prevention Nutrition Council

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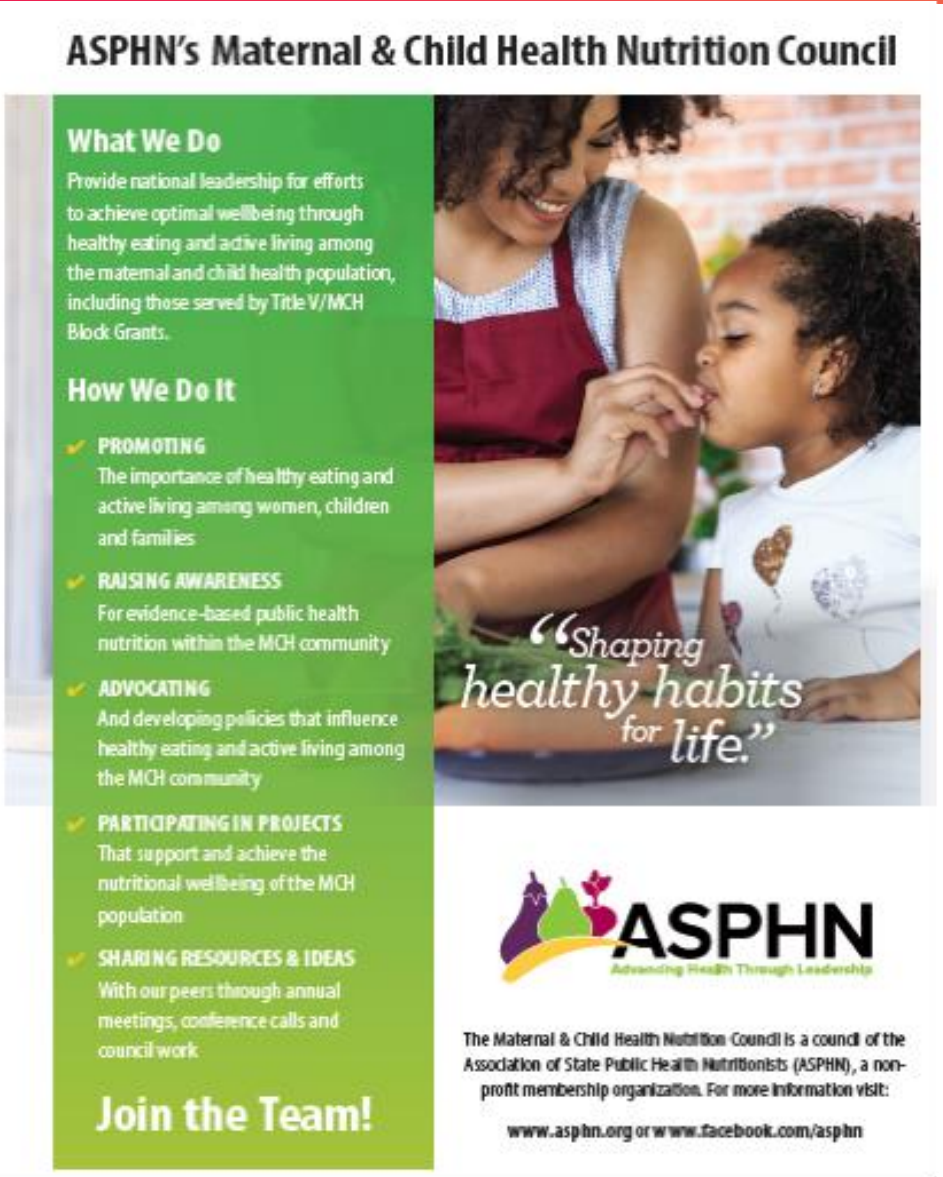

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Maternal & Child Health Nutrition Council

AN ASPHN BRIEF - SUMMER 2018

The Intersection of Public Health, Community and Clinical Dietetics

This brief explores the relationship between community, public health and clinical nutrition and ideas for innovative strategies combining the strengths of each discipline and creating a synergistic effect that is greater than the sum of the parts.

Introduction

The focus of ***clinical nutrition*** is on **individualized** medical nutrition therapy, often to address a particular medical issue. ***Community nutrition*** develops and implements programs that strive to improve the **public's** knowledge of food, health and nutrition topics. ***Public Health Nutrition*** is a multifaceted approach to dietetics that applies food and nutrition knowledge, policy and research to improve the health of **populations.**[1]

Individual, public and population strategies are often seen as independent concepts. Combining the strengths of each approach could have a synergic effect. Scholarly work has been done that shows that inter-collaboration of nutrition services among clinical, community and public health nutrition reaches a greater number of people, and proves to be more effective.[2] For nutrition interventions to be successful the population must have access (public health), the ability to select (community), and the knowledge to implement (clinical).

The following topics are ways that interventions intersect these three domains of nutrition and dietetics.

Guidelines and Health Conditions Related to Timing of Early Infant Feeding: A Review

AN ASPHN BRIEF - FALL 2018

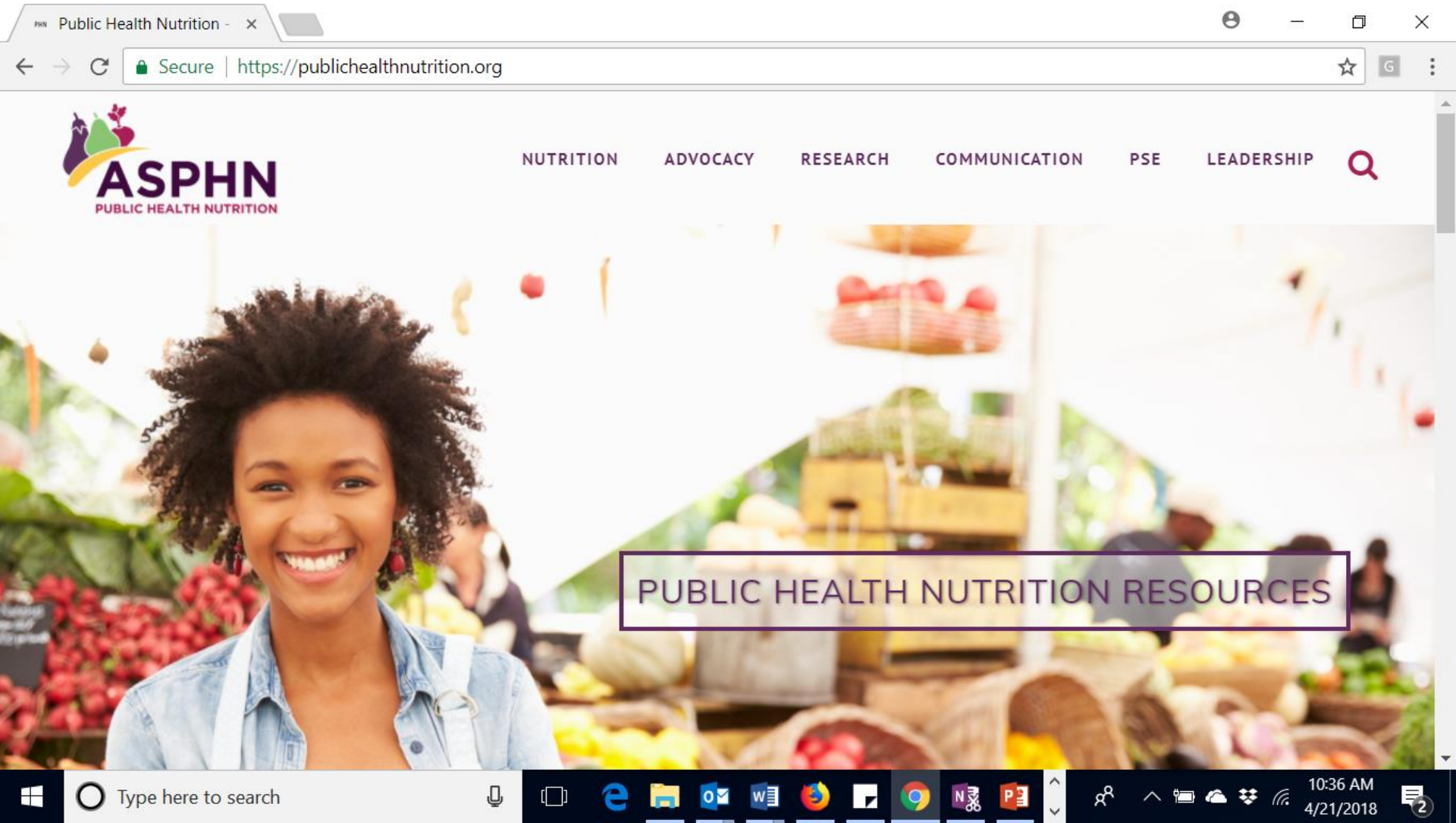
Historically in the United States, medical and public health professionals have focused child health efforts and interventions within predetermined life-cycle states such as prenatal, pregnancy, infancy, early childhood, etc. The global community defines a more specific window of time, the ***first 1,000 days of life***. The first 1,000 days of life, the time span between a woman's pregnancy and her child's 2nd birthday, has long been a focus of international child health. "Nutrition during pregnancy and in the first years of a child's life provides the essential building blocks for brain development, healthy growth and a strong immune system. In fact, a growing body of scientific evidence shows that the foundations of a person's lifelong health — including their predisposition to obesity and certain chronic diseases — are largely set during this 1,000 day window."[1]

Ten years ago, the *Lancet* Maternal and Child Nutrition Series concluded its first paper confirming the focus on "pregnancy and the first 2 years of life, the crucial 1,000 days."[1] Five years later, new evidence prompted the updated 2013 Maternal and Child Nutrition Series paper to further emphasize the "nutritional conditions at the time of conception and during pregnancy, as important for fetal growth, and subsequent early childhood survival, growth, and development." Fetal growth restriction and poor growth early in infancy are now recognized as important determinants of overweight and obesity in older children and adults.[2]

In the United States, policy makers and institutions have recently prioritized the first 1,000 days by developing new US Dietary Guidelines to now include pregnancy and children up to 2 years of age. With mounting impetus to streamline preventative efforts in a relatively short time span, public health professionals should examine infant feeding practices with a critical eye, focusing on both the negative consequences and protective factors of early and late introduction of complementary foods.

The purpose of this document is to provide public health nutritionists and other professionals with brief, relevant findings and proposed supportive measures to address infant feeding practices. This includes the timing of complementary foods and the link to health conditions. Although limited research exists supporting the order and method of infant feeding, evidence regarding timing is the most valid. Much of the recent information on infant feeding practices, such as the timing of complementary foods or order of foods, varies based on the baby's first food (breastfeeding or infant formula, duration and extent of breastfeeding).

6 categories of practice and indicators



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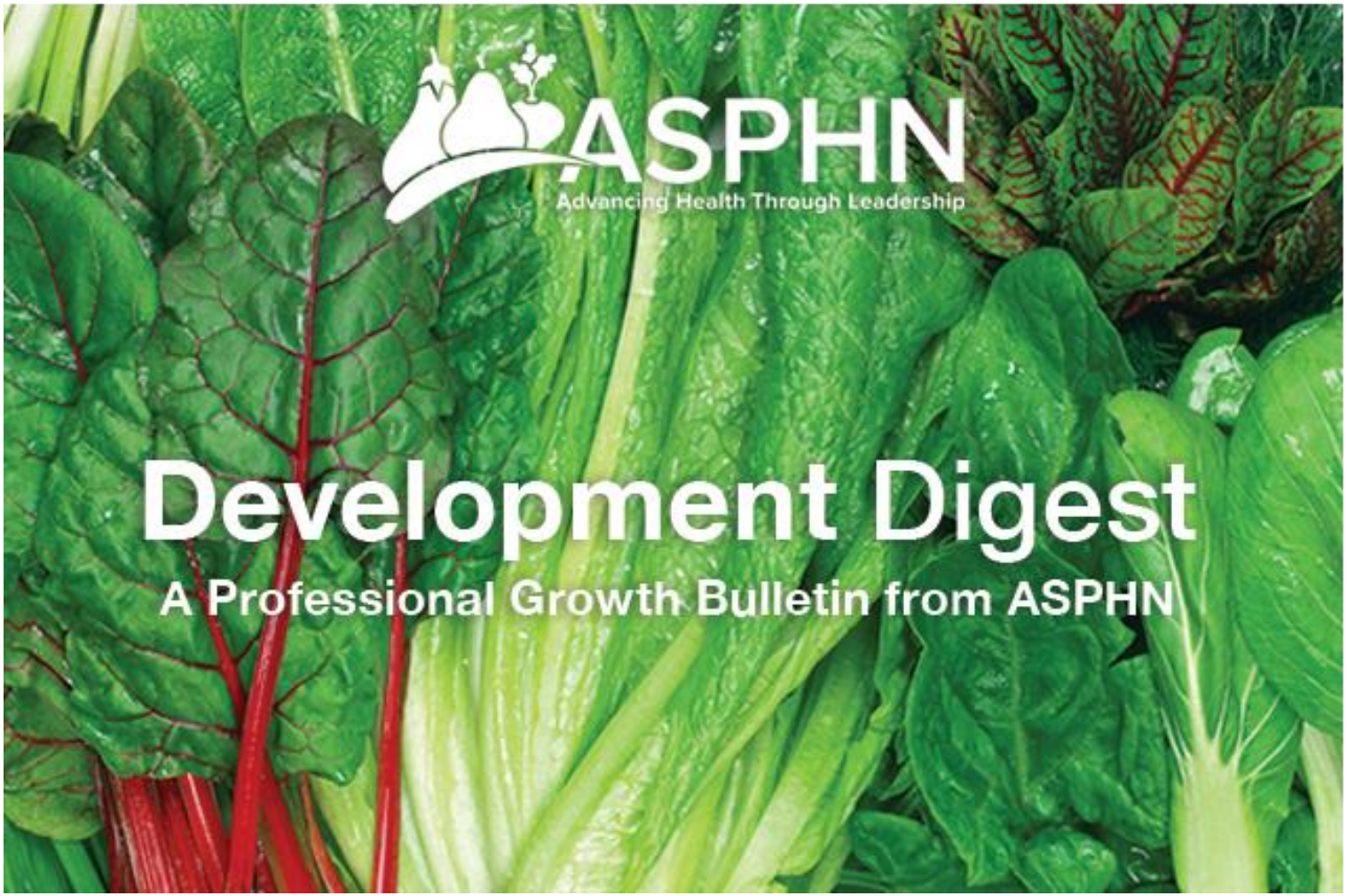

2019-2020 Board Members

President: Diane Golzynski
President-elect: Tiffani Grant
Past President: Robin Stanton
Treasurer: Pat Simmons
Secretary: Emily Bash
Directors at Large:

- ✔ Diane Peck
- ✔ Jennifer Young
- ✔ Jackie Rio-Avila
- ✔ Jill Lange
- ✔ Becky Adams

Fruit & Vegetable Council Chairs:

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- ✔ Melissa Lonsberry

MCH Nutrition Council Chairs:

- ✔ Heather Harrison-Catledge
- ✔ Jennifer Dellaport

Obesity Prevention Nutrition Council Chairs:

- ✔ Elaine Russell
- ✔ Cheryl Hill

Fundraising Committee Chair: Charlene Garcia

2020 Annual Meeting

- June 14-16, 2020
- Tiffani Grant, Chair of the 2020 Annual Meeting Planning Committee
- Help plan the next Annual Meeting

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Thank You For Attending the ASPHN Business Meeting!

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Enjoy the 2019 Annual Meeting!