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MCH Nutrition Council Chairs:
✔ Mikaela Schlosser
✔ Heather Harrison-Catledge

Obesity Prevention Nutrition Council Chairs:
✔ Helen Brown
✔ Elaine Russell

Fundraising Committee Chair: vacant
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 1\textsuperscript{st} and ends December 31\textsuperscript{st}

✔ 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
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.

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

National Fruit & Vegetable Nutrition Council
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

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:

www.asphn.org or www.facebook.com/asphn
ASPHN’s Maternal & Child Health Nutrition Council

What We Do
Provide national leadership for efforts to achieve optimal well-being through healthy eating and active living among the maternal and child health population, including those served by Title V/MCH Block Grants.

How We Do It

✓ PROMOTING
   The importance of healthy eating and active living among women, children and families

✓ RAISING AWARENESS
   For evidence-based public health nutrition within the MCH community

✓ ADVOCATING
   And developing policies that influence healthy eating and active living among the MCH community

✓ PARTICIPATING IN PROJECTS
   That support and achieve the nutritional wellbeing of the MCH population

✓ SHARING RESOURCES & IDEAS
   With our peers through annual meetings, conference calls and council work

Join the Team!

“Shaping healthy habits for life.”

The Maternal & Child Health 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

Maternal & Child Health Nutrition Council
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.

Individual, public and population strategies are often seen as independent concepts. Combining the strengths of each approach could have a synergistic 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. 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.
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.”

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.” 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.

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
Development Digest
A Professional Growth Bulletin from ASPHN

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✔ 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
Thank You For Attending the ASPHN Business Meeting!
Enjoy the 2019 Annual Meeting!