

Tastings

Eat, Drink, Savor, and Learn...

Food & Culinary Professionals
a dietetic practice group of the
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Theme: A Deep Dive into the 2020-2025 Dietary Guidelines for Americans

Spring 2021

An Overview of the 2020-2025 Dietary Guidelines for Americans

By: Toby Amidor, MS, RD, CDN, FAND



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FCP's Vision:
Optimizing the nation's health
through food and nutrition.

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On December 29, 2020, the U.S. Department of Agriculture and U.S. Department of Health and Human Services released the 2020-2025 Dietary Guidelines for Americans (DGAs). With new guidelines for birth to 23 months and pregnancy and lactation being included in the newest version, many health professionals were looking forward to this much needed update. This article will explain the process of how the DGAs are created, main recommendations for every life stage, along with specific recommendations for 0 to 23 months, 2 to 18 years, pregnancy and lactation, and older adults.

Introduction

Since 1980, the DGAs have provided science-based advice on what to eat and drink in order to promote health, reduce the risk of chronic disease, and meet nutrient needs. The DGAs are intended for the U.S. population that is healthy,

Learning Objectives | After reading this article, the participant will be able to:

- 1) Detail the process of how the Dietary Guidelines for Americans (DGAs) are created and updated.
- 2) Explain the current 2020-2025 Dietary Guidelines and any modifications or additions made to them.
- 3) Be able to identify nutrients of concern at every life phase.

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Chair Message

Every five years, the Dietary Guidelines for Americans (DGAs) are contemplated, researched and a report is published to provide the best possible advice in order to meet nutrient needs, promote health, and prevent disease for all Americans. As registered dietitian nutritionists, we are the primary audience for the DGAs as experts in food and nutrition. While the DGAs are intended for health professionals, consumers are well-aware of these guidelines since the key messages are shared out to the general public. These guidelines impact everything from product development to policy making and everything in between. Fortunately, the U.S. Department of Agriculture and U.S. Department of Health and Human Services have consumer friendly

messaging for the guidelines as well as programs that are ready to implement such as MyPlate.gov and the Start Simple app.

This edition of *Tastings* is focused on the newly released Dietary Guidelines for Americans and provides important background information and perspectives on how they can be applied to many of the practice areas represented by members of FCP.

We hope you enjoy this newsletter and either learn something new about the DGAs or gain some new perspective.

Hilary Thesmar, PhD, RD

2020-2021 FCP Chair



at risk for chronic conditions (e.g. cardiovascular, type 2 diabetes, obesity), and those living with one or more of these diet-related chronic illnesses. The 2020-2025 DGAs were created with the goal to “Make Every Bite Count” at all life stages. It is important to remember that the DGAs are designed to be used by policymakers and nutrition and health professionals to help all individuals and their families consume a healthy, nutritionally adequate dietary pattern.

The Process of Developing the Dietary Guidelines

Publication of the DGAs every five years is required under the 1990 National Nutrition Monitoring and Related

Research Act. The statute requires that the DGAs be based on the preponderance of current scientific and medical knowledge. With each cycle, a Dietary Guidelines Advisory Committee (DGAC) consisting of nationally recognized health and nutrition experts are selected to answer specific questions with regards to the DGAs. The committee then used three approaches to examine the evidence: data analysis, nutrition evidence systematic review, and food pattern modeling. In June 2020, the Scientific Report of the 2020 DGAC was published and made recommendations for 0-23 months, pregnancy, and lactation. Two key recommendations in the committee’s report that did not make it to the final DGAs were to decrease added sugar from a maximum of 10% of total calories to 6% of total calories and to decrease alcoholic drinks per day for men from two to one. It should be noted that the committee’s report is not a rough draft of the Dietary Guidelines, but rather it informs the development of the policy and not all DGAC recommendations are included. After the committee’s report is released, a public written and oral comment period follows. Lastly, the long-awaited Dietary Guidelines are released jointly by the USDA and the U.S. Department of Health and Human Services.

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2020-2025 Dietary Guidelines for Americans: Make Every Bite Count

The DGAs are divided into six chapters and several appendices. Chapter 1, the longest chapter, provides four guidelines and key recommendations for the entire population and is the basis for subsequent chapters. Chapters 2 through 6 highlight each phase of the life cycle and special nutrient and other considerations within each of these phases. The life cycle phases include infants and toddlers (Birth through 23 months), children and adolescents (2-18 years), adults (19-59 years), pregnant and lactating women, and older adults (60+ years).

The four guidelines for all Americans discuss the recommendations for all populations. Here is an inside look at each one.

Guideline 1: Follow a healthy dietary pattern at every life stage.

The DGAs define a dietary pattern as the totality of what individuals habitually eat and drink. If a healthy dietary pattern can be established early in life, and sustained, the impact on health could be significant. Frameworks for a healthy dietary pattern can be seen in a Healthy U.S.-Style Dietary Pattern, Healthy Mediterranean-Style Dietary Pattern, and Healthy Vegetarian Dietary Pattern.

Guideline 2: Customize and enjoy nutrient-dense food and beverage choices to reflect personal preferences, cultural traditions, and budgetary considerations.

A healthy dietary pattern can benefit all individuals regardless of age, race, or ethnicity, or health status. The DGAs are not a diet prescription, but rather a framework intended to be customized to individual needs and preferences and be inclusive of the diverse cultures in the U.S. Dietetic and health professionals need to consider budgetary constraints when making food recommendations.

Guideline 3: Focus on meeting food group needs with nutrient-dense foods and beverages and stay within calorie limits.

Within all stages of the life cycle, nutritional needs should be met primarily with nutrient-dense foods that provide vitamins, minerals, and other health-promoting components. In addition, these foods should have no or little added sugars, saturated fat, and sodium. Core elements that make up a healthy dietary pattern include:



- Vegetables of all types: dark green; red and orange; beans, peas, and lentils; starchy and other vegetables
- Fruits, especially whole fruit
- Grains, at least half of which are whole grain
- Dairy, including fat-free and low-fat milk, yogurt, and cheese, and/or lactose-free versions and fortified soy beverages and yogurt as alternatives
- Protein foods, including lean meats, poultry, eggs, seafood; beans, peas, and lentils; and nuts, seeds, and soy products
- Oils, including vegetable oils and oils in food (i.e., seafood and nuts)

The DGAs highlight several items from these food groups. First, the vegetable subgroup formally called “legumes (beans and peas)” has been renamed “beans, peas, and lentils” in order to more accurately reflect the category of foods included. Beans, peas, and lentils, also known as “pulses,” include dried edible seeds of legumes. Note that edamame is counted in this subgroup even though it is eaten fresh, not dried and green peas and green (string) beans are not counted in this subgroup as the nutrient content is more similar to the starchy vegetable subgroup and other vegetable subgroup, respectively.

The DGAs address the dairy and fortified soy alternatives and how plant-based beverages fit in. Cow’s milk and fortified soy beverage (soy milk) and soy yogurt are included as part of the dairy group because they are similar to cow’s milk and yogurt based on nutrient composition and in their use in meals. Other plant-based beverages including almond, hemp, coconut, rice, and oat milk may contain calcium and be consumed as a source of calcium but

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are not considered part of the dairy group as their overall nutritional content is not similar to dairy milk and fortified soy beverage.

When it comes to beverages in a healthy dietary pattern, the calories and nutrients they provide are important considerations. Calorie-free beverages are the best choices, especially water. Beverages that contribute beneficial nutrients, like fat-free or low-fat milk, and 100% juice, are best. Coffee, tea, flavored waters are also options but should contain little, if any, sweeteners or cream.

Under-consumed nutrients that are of public health concern throughout all life cycle stages are calcium, vitamin D, potassium, and fiber. Inadequate intake of nutrient-dense foods and beverages across food groups has resulted in underconsumption of these nutrients and dietary components.

Guideline 4: Limit foods and beverages higher in added sugars, saturated fat, and sodium, and limit alcoholic beverages.

Below are the recommendations for each:

Limited Nutrient	Recommendations
Added sugars	<ul style="list-style-type: none">• ≥ 2 years: <10% Kcal/day• <2 years: Avoid food and beverages with added sugars
Saturated fat	<ul style="list-style-type: none">• ≥ 2 years: <10% Kcal/day
Sodium	<ul style="list-style-type: none">• ≥ 14 years: 2,300 mg/day• <14 years: Even less
Alcoholic beverages	<ul style="list-style-type: none">• If you choose to drink, limit intake to 2 drinks/day or less for men and 1 drink/day or less for women• 1 drink is defined as 12 fluid ounces of regular beer (5% alcohol), 5 fluid ounces of wine (12% alcohol), 1.5 fluid ounces of 80 proof distilled spirits (40% alcohol)

The DGAs also put forth 85%/15% guidance where they determined that approximately 85% of calories per day are needed to meet food group recommendations healthfully and approximately 15% of calories per day can be available for other uses including added sugars, saturated fat, and alcoholic beverages. For most Americans, this equates to approximately 250-350 calories per day.

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Feast your eyes on our Instagram feed

Did you know that FCP is on Instagram? Be sure to follow us [@fcpdpg](#), where we are serving up healthy recipe inspiration, along with the latest FCP news and events. Tag your favorite food photos with #fcpdpg so we can share your culinary creations!



Infant and Toddler Recommendations

This section discusses the dietary needs of infants and toddlers from birth to 23 months. The recommendation for this age group is as follows:

- **0-6 months:** Exclusively breastfeed and continue feeding human milk through at least one year of age, and longer if desired. If human milk is unavailable, iron-fortified formula should be used.
- **Approximately 6 months:** Introduce infants to nutrient-dense complimentary foods. Potentially allergenic foods should be introduced along with other complementary foods. Variety of foods from all food groups should be encouraged even at this age.
- **12 months through older adulthood:** A healthy dietary pattern should be followed across the lifespan to meet nutrient needs, help achieve a healthy body weight and reduce the risk of chronic disease.

For about the first six months of life, infants should be provided with supplemental vitamin D soon after birth (400 IU). At about six months, infants should begin nutrient-dense complementary foods that are age- and developmentally appropriate to help prevent choking. Foods high in zinc and iron are recommended for infants fed human milk. Foods and beverages with added sugar should be avoided and those higher in sodium should be limited. As infants wean from human milk or infant formula, they should transition to a healthy dietary pattern.

Special consideration for vitamin B12 is needed if a breastfeeding mother's vitamin B12 status is compromised, the mother is a strict vegetarian, or any other reason vitamin B12 status in the mother is sub-par. Both the mother and/or infant fed human milk may need vitamin B12 supplements.

The guideline to introduce potentially allergenic foods when other complementary foods are introduced in an infant's diet is a relatively new concept. Introducing peanut-containing foods in the first year reduces the risk that infant will develop a food allergy to peanuts. There is **no evidence** that delaying introduction to allergenic foods helps prevent food allergy.

Other special considerations for birth to 23 months include avoiding raw or cooked honey due to the bacteria *Clostridium Botulinum*. Further, unpasteurized foods and beverages such as juices, milk, yogurt, and cheese should be avoided due to potentially pathogenic bacteria that may be present.

Supplemental water is typically not needed up to 6 months. A small amount of plain, fluoridated drinking water (4-8 fluid oz per day) can be given to infants with the introduction of complementary foods and slowly be increased after age 1 to meet hydration and fluoride needs. Plain, whole cow's milk and fortified soy beverages should begin being offered at about 12 months. Fruit and vegetable juice is not necessary in the second year of life; instead, fruit recommendations should be met with whole fruit. If 100% fruit juice is given up to four fluid oz per day can fit in a healthy dietary pattern. Caffeinated beverages should be avoided through two years of age as there are no safe limits of caffeine established for young children.

Children and Adolescents (2 to 18 years)

Statistics show that intake of added sugars increases throughout childhood and adolescence with sugar-sweetened beverage being top contributor. These drinks are not necessary in a child's or adolescent's diet and the recommendation for 100% fruit juice is between four to ten fluid oz per day, depending on calorie level.

In adolescents, there tends to be a low intake of whole grains, dairy and alternatives, fruits, and vegetable, which leads to low intakes of phosphorus, magnesium, and choline. Adolescent females have been found to under consume protein, iron, folate, vitamin B6, and vitamin B12.

Pregnant and Lactating Women

Below are the guidelines for specific nutrients to pay special attention to during this life stage:

Folate/Folic Acid

Adequate folic acid is important prior to conception and during the first trimester to help prevent neural tube defects, including spina bifida. The recommendation to women planning for or capable of pregnancy is 400-800 mcg folic acid per day.

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Iron

Iron needs increase during pregnancy. However, for lactating women iron needs fall and return to pre-pregnancy levels once menstruation resumes.

Iodine

Iodine is important for neurocognitive development of the fetus. Iodine needs during pregnancy increase substantially. Iodine consumption is usually adequate for most, however if the woman does not regularly consume dairy products, eggs, seafood, or use iodized salt she may not meet her needs. If the woman is using table salt, encourage iodized salt. However, pregnant and lactating women should not start using table salt if they do not do so already. Check with a healthcare provider if a supplement is needed.

Choline

Adequate choline is needed to replenish maternal stores and support growth and development of child's brain and spinal cord. Choline needs increase during pregnancy and lactation. Meeting needs through food intake is preferred. It should be noted that most prenatal vitamins do not contain adequate choline to meet needs.

Older Adults

Older adults have several special nutrient requirements. The average protein intake for adults 71 years and older are lower than recommended. Seafood, dairy and fortified soy alternatives, and beans, peas, and lentils are all under consumed. The DGAs recommend that older adults choose a wider variety of protein sources.

The ability to absorb vitamin B12 can decrease with age. In addition, the use of certain medications can decrease absorption. Some individuals may require vitamin B12

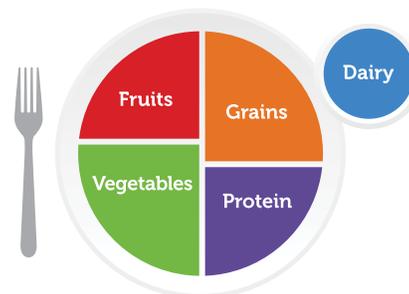
Reviewers:

- Sanna Delmonico, MS, RDN, CHE
- Missy Cody, PhD, RDN, LD
- Tricia L. Psota, PhD, RDN

CPEU Article Coordinator: Shelley Johnson, RD

SPECIAL NOTE: FCP is moving to a new website platform in June. **We strongly recommend that you download your certificate and save it for future use.** The archived information on the current site will no longer be available in June.

supplements. Since the sensation of thirst declines with age and concerns about bladder control issues may hinder intake, dehydration is also a concern due to lack of fluids. It should be noted that water contained in foods (i.e., fruits, vegetables, soups) contributes to hydration status. Lastly, dietary supplements should be considered when assessing an individual's dietary pattern including the added sugars they contain. Beverage supplements should not replace regular food intake unless instructed by a health professional.



MyPlate.gov

Putting It All Together

The latest DGAs do a nice job discussing specific dietary needs at every life stage. The DGAs are developed and written for a professional audience and its translation into actionable consumer messages and resources is crucial to help individuals, families, and communities to achieve healthy dietary patterns. One example of a way to translate the DGAs to consumers is MyPlate which can be used in a variety of settings and is adaptable to meeting personal preferences, cultural foodways, traditions, and budgetary needs. Action is needed on many fronts to ensure that the healthy dietary choices available at home, school, work, and play are affordable and accessible to all. Everyone has a role to play in helping all Americans shift to a healthy dietary pattern and achieve better health.

After reading the continuing professional education article, please answer the quiz questions [here](#).

Note as of January 2020, CDR requires the inclusion of a Critical Evaluation Tool. You can learn more about that [here](#). As you complete the quiz, you must respond to every question.

If you score 80% or higher on the quiz and complete the Critical Thinking Evaluation Tool, your CPEU certificate will be immediately available for download

It automatically also archives under your profile on the website.

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About the Authors:

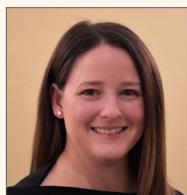


With over 20 years of experience in the food and nutrition industry, Toby Amidor, MS, RD, CDN is a Wall Street Journal best-selling cookbook author, spokesperson, and recipe developer who believes that healthy and wholesome can also be appetizing and delicious. Toby is the founder of Toby Amidor Nutrition, where she provides nutrition and food safety consulting services for individuals, restaurants and food brands. For over 12 years she has been the nutrition expert for FoodNetwork.com, and founding contributor to their Healthy Eats Blog. Toby is a regular contributor to U.S. News and World Report Eat + Run blog, Shape.com, Sparkpeople.com, and has her own “Ask the Expert” column in Today’s Dietitian Magazine. In 2018, Toby was awarded by the Academy of Nutrition & Dietetics the coveted Media Excellence Award.

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Letter from the Editor



By now I’m sure we’ve all seen the new 2020-2025 Dietary Guidelines for Americans and are pretty familiar with the overall theme of “Make Every Bite Count” as well as the general healthy eating pattern recommendations for Americans. However, the DGAs is a hefty document that is jam-packed with food and nutrition recommendations for all stages of life; and depending on our line of work, we’re probably only looking at certain sections of this large 164-page document. So, we wanted to provide an issue to our members that can be used as a reference to go back to when you need to focus on how the DGAs relate specifically to the Retail/Supermarket industry,

Restaurant niche, Agriculture industry or the Food Safety area. Our CPEU article really takes a deep dive into the nuts and bolts of the DGAs and give you a great review of some of the new recommendations that have come out of this current edition of the guidelines.

I hope you enjoy this issue and find value in applying it to your day-to-day work. This issue is intended to serve as a reference to help you spread these key messages to everyday Americans, as it relates to the DGAs, and to help educate consumers who are looking to improve their overall health by improving their eating patterns.

Liz Jalkiewicz, RDN, LDN
2020-2021 *Tastings* Editor
elisabethrd@gmail.com

Member Spotlight

Allison Yoder, MA, RDN, LD



Allison Yoder, MA, RDN, LD is the Nutrition in Food Retail Program Development Fellow through the Academy of Nutrition and Dietetics Foundation, leading a project titled, *“Leveraging RDNs in the Food Retail Environment to Improve Public Health.”*

With over 16 years specializing in the strategic development of wellness programming, Allison is a registered dietitian nutritionist and leader in the retail health and wellness industry. Allison has a passion for improving the health of individuals and communities and utilizes data analytics and an extensive background in health promotion and retail nutrition to produce cost-effective and results-driven wellness strategies to improve nutrition and health outcomes. Previously, Allison served in many capacities at Hy-Vee, Inc. She started her career as an in-store Registered Dietitian and HealthMarket manager, where she worked directly with customers to implement health and wellness strategies. She also spent many years at Hy-Vee’s corporate office, supervising the retail dietitian program as well as HealthMarket departments.

Allison received a Bachelor’s degree in Dietetics from Iowa State University, and has a Master’s degree in Health Promotion from the University of Alabama. She is certified in adult weight management and a trained lifestyle coach through the National Diabetes Prevention and Recognition program.

1. Briefly, tell us about your career path to and within dietetics.

My interest in dietetics began in high school. I was a competitive dancer and recently diagnosed with a brain tumor. Following a successful surgery, I worked with a registered dietitian nutritionist to regain my strength and return to a sport I loved. After obtaining my RDN credentials, I began working as a dietitian within the food retail setting. I spent five years working directly with customers in the grocery store, conducting supermarket tours, cooking classes, community presentations, media promotions, and nutrition education. In 2010, my job responsibilities expanded into a new role as a health and wellness supervisor, focusing on hiring and training new



By Leigh Ann Edwards Hall,
MPH, RD
2020-2021 FCP
Membership Chair

dietitians, supervising dietitian services, and implementing company-wide wellness programs. In 2018, I took a pause in my career to be a caretaker for my mother, who was battling ALS. For the past year and a half, I have had the privilege of working with the Academy of Nutrition and Dietetics Foundation’s fellowship program, leading a project focused on researching integration opportunities for Food as Medicine programs within food retail settings.

2. What advice do you have for RDNs/NDTRs to respect and acknowledge varying food cultures relative to the new Dietary Guidelines for Americans?

The new Dietary Guidelines for Americans are designed to provide the framework for RDNs/NDTRs to help individuals personalize food and beverage choices that best meet their personal, cultural and budgetary needs. With growing interest in the connection between food and health, RDNs and NDTRs are in a perfect position to influence small changes to an individual’s food and lifestyle habits that embrace the science-based recommendations of the DGAs.

3. What advice/pro tip would you give to others who are new to FCP? Or, what do you think is the most valuable benefit of being an FCP member?

Connecting with professionals who have diverse career pathways yet similar goals is an essential networking opportunity to grow within your career. With the broad range of benefits provided within FCP, such as webinars, continuing education opportunities, and events held during FNCE, FCP has something to offer all professionals across the food production system.

4. What else do you think FCP members might find interesting about you or your work in the field that I didn’t ask?

Working in non-traditional dietetics roles for most of my career, I have a deep passion for mentoring other registered dietitian nutritionists to guide and shape their interests and skill sets into a long-lasting career pathway. The Food and Culinary Professionals DPG is full of amazingly talented members in a wide variety of career settings who are willing to share their knowledge and experiences as well.

News from FCP Subgroups



Sharing New Guidelines in the Grocery Aisles

By Emily Parent, MFCS, RD, LD
2019-2021 Supermarket/Retail Subgroup Chair



Every five years, nutrition professionals wait for the release of the U.S. Dietary Guidelines for Americans. This time around, the guidelines offered new guidance for all life stages, but maintained messaging around the common theme of an overall balanced

diet. While the 2020-2025 guidelines can be used by nutrition professionals across all areas of practice, for those working in retail, there are unique opportunities to educate shoppers.

1. Follow a healthy dietary pattern at every life stage—

For the first time, recommendations have been made within the guidelines for infants and toddlers. Educating shoppers, especially expecting or new moms on what is recommended for their little ones can help them feel more empowered both at the grocery store and at home.

- Use a 'Dietitian's Pick' or 'Dietitian's Choice' program to endorse food products that are encouraged in a well-balanced diet. Add a 'Kid's Pick' for foods commonly consumed by little ones such as applesauce or yogurt pouches, fruit cups, cereals, etc.
- Host a Facebook Live in the grocery store highlighting products that are good foods for toddlers, such as no-added sugar fruit pouches.
- Film a TV segment sharing updates of the new guidelines for infants and toddlers, while sharing tips and resources to help families with little ones.

2. Customize and enjoy nutrient-dense food and beverage choices to reflect personal preferences, cultural traditions, and budgetary considerations— Help translate the new guidelines to shoppers and encourage the inclusion of their own cultural traditions.

- Work with merchandising teams to create sections within your retailer with culturally relevant food products specific to the area you live.
- Film live or pre-recorded cook-a-long videos with a guest chef and/or with ethnically diverse recipes and food products.
- Share social media posts and tips sheets with ways to shop on a budget at your retailer (loyalty programs, flash sales, purchasing private label, etc.)

3. Focus on meeting food group needs with nutrient-dense foods and beverages and stay within calorie limits— Encourage shoppers to add foods to their carts that make up a balanced dietary pattern.

- Work with merchandising teams to cross merchandise healthy foods.
- Educate shoppers with shelf-poppers, iron man stands or videos on in-store TVs.
- Create sample weekly menus for shoppers in a weekly email.

4. Limit foods and beverages higher in added sugars, saturated fat, and sodium, and limit alcoholic beverages—

It's no surprise that recommendations were made to continue to limit added sugars, saturated fat, sodium, and alcoholic beverages, however, there are always opportunities to remind shoppers to choose foods lower in these components.

- Highlight no-sugar added beverages in the weekly circular or on an e-commerce homepage.
- Feature recipes in the weekly circular using items on ad. Bonus! Create shoppable links to these recipes on your e-commerce site.
- Work your deli team to highlight hot and cold case items that are better-for-you options.

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News from FCP Subgroups



How the Dietary Guidelines Impact the Food Industry

By Sarah Martin, MPP, RDN, LDN
2020-2021 Restaurant & Hospitality Subgroup Chair



The Dietary Guidelines for Americans directly impact regulations and policies established for the restaurant industry including Menu Labeling, healthy kids' menus, sodium warnings, and default beverages. The restaurant industry uses information from

Dietary Guidelines to develop programs, policies, and communication for the general public.¹ This article will discuss the position of the National Restaurant Association (NRA) on the Dietary Guidelines as well as restaurant initiatives to support the Dietary Guidelines across the lifespan.

The National Restaurant Association and its members were pleased to see the Dietary Guidelines focus its recommendations on dietary patterns and food-based recommendations rather than place of purchase.² In the association's public comments to the Dietary Guidelines Advisory Committee Scientific Report, they highlighted restaurants' recent efforts to support the Dietary Guidelines including offering a variety of foods to meet particular dietary patterns, offering foods to meet the needs of restricted diets, and modifying menus to increase better for you options through innovation, reformulation, and smaller portion sizes.² The NRA recently provided restaurants with four suggestions on how to support Americans maintaining a healthful diet based on the newly released Dietary Guidelines:

Four Recommendations for Restaurants:

1. Add nutrient-dense ingredients and consider recipe formulation: offering more food groups based on Dietary Guideline recommendations and evaluate and consider reducing sodium and added sugar.
2. Focus on customization options to meet guest needs including smaller portion sizes: consider offering half portions, split orders, and allow customizations to meet their calorie needs.

3. Prioritize kids: consider participation in the NRA's Kids LiveWell SM Program.
4. Educate guests to make healthier food choices: menu labeling, sharing nutrition information, and equip guests to make healthier food choices.³

Restaurants are participating in several initiatives that support a healthy diet across the lifespan. The NRA's Kids LiveWellSM program is a voluntary program where restaurants commit to offer meals, side dishes, and beverage options that meet rigorous nutrition criteria.⁴ This program was created with registered dietitian nutritionists in collaboration with public health and consumer advocates.

In addition to this voluntary program, restaurants have the opportunity to join the Portion Balance Coalition, a multi-sector collaborative focused on launching and emphasizing successful strategies to improve health outcomes.² Lastly, many restaurants participate in the Culinary Institute of America (CIA) Healthy Menus R&D Collaborative (HMC), a member-based initiative which helps facilitate work to advance the development of healthy menu solutions for restaurants and other foodservice operations.⁵ Restaurants continue to innovate and create healthier menu items to support Dietary Guideline recommendations.

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News from FCP Subgroups



Food Safety and the DGAs

By: Theresa Stretch, MS RDN, CP-FS
Food Safety Subgroup Chair



Food safety and healthy eating are closely associated. Preventing foodborne illnesses throughout all life stages takes actions from individuals, registered dietitian nutritionists, grocery stores, retail establishments, and agricultural entities.

Some populations are more vulnerable to foodborne illness than others. Women who are pregnant, young children, older adults, and individuals with compromised immune systems are populations with increased risk of foodborne illness. Women who are pregnant and their unborn child are at higher risk of foodborne illness than the general population. The Center for Disease Control (CDC) estimates 200 annual cases of Listeria in women who are pregnant out of 4 million pregnancies. Listeria is a harmful bacterium found in refrigerated, ready-to-eat foods such as meat, poultry, seafood, deli meats, hot dogs, and foods made with unpasteurized milk. Be sure to reheat deli and lunchmeat to 165°F to kill Listeria.

Current studies support that women do not need to restrict their food and beverage choices during pregnancy and lactation to prevent food allergies from developing in their child. The exception is when a food or beverage impacts the woman's health. Annually, half of all serious foodborne illness in the United States that require hospitalization affects children. Hospitalization of children under the age of five with Salmonella infection is three times more than in other people. One out seven children under the age of five that is diagnosed with E Coli O157 suffers from kidney failure.

Older adults, especially those 65 and older, have an increased risk for hospitalization and death from foodborne illness. Older adults are ten times more likely to die from bacterial gastroenteritis if they live in a nursing home than

the general population. Reduced functionality of critical organs such as the GI tract, liver, kidney, and stomach contribute to the increased risk of foodborne illness in older adults. In addition to the aging process, individuals with weakened immune systems are at an increased risk for foodborne illness. A healthy immune system is the body's natural defense against harmful pathogens. A combination of a compromised immune system weakened by disease, medications, and side effects from treatments such as chemotherapy provide favorable conditions for foodborne illness.

As registered dietitian nutritionists leading the charge of helping individuals implement the Dietary Guidelines for Americans, communicating food safety messages is an integral part of the education process. Make every safe bite count with the Dietary Guidelines throughout each stage of life.

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News from FCP Subgroups



Dietary Guidelines for Americans – Going Beyond What We Eat?

By Marianne Smith Edge, MS, RDN, LD, FAND
2020-2021 Agriculture Subgroup Chair



Since 1980, the Dietary Guidelines for Americans (DGA) have been released every five years with a variance of fanfare within the food and nutrition community depending on their deemed importance in one's respective area of practice. In reality, the DGAs serve

as the underpinning for all federal government nutrition programs. The DGAs as outlined by law, must be based on the preponderance of current scientific and medical knowledge (as per the [Dietary Guidelines Advisory Committee's Scientific Report](#) (DGAC)¹ and contain nutritional and dietary information and guidelines for the general public on what to eat and drink to promote health, reduce risk of chronic disease, and meet nutrient needs.²

The Absence of Sustainability

The emergence of sustainability within national dietary guidance systems has gained momentum globally after four countries (Germany, Brazil, the Netherlands, and Sweden) added sustainability guidance to their public-facing recommendations following the 2010 Food and Agricultural Organization (FAO) Symposium on Sustainable Diets.³ Within the United States, the topic of sustainability was raised within the Dietary Guidelines Advisory Committee (DGAC) discussions during the 2005, 2010 and 2015 cycles, but

absent in 2020. In 2015, the DGAC included a chapter on sustainability and food safety for the first time, creating much debate.³ The DGAC Committee recommendations stated "that a diet higher in plant-based foods, such as vegetables, fruits, whole grains, legumes, nuts, and seeds, and lower in calories and animal-based foods is more health promoting and is associated with less environmental impact than is the current U.S. diet."⁴

However, after Congressional pressure, the recommendation was not included in the Dietary Guidelines, 2015 edition, and in fact, set the framework for its absence in the 2020-2025 DGAC discussion. In the final 2015 ruling, the secretaries of Agriculture and Health and Human Services concluded that sustainability and evidence on the environmental impacts of dietary patterns should not be included in the 2020 Committee's charge.⁴

Evaluating the Role of Sustainability

Following the release of the 2015 Dietary Guidelines, the National Academies of Science (NASEM) convened a committee in 2017 to evaluate the existing process for establishing the DGAs. Three essential functions to be conducted by the DGA Advisory Committee were identified: (1) strategic planning, (2) analysis, and (3) synthesis and interpretation. It was recommended that each of these functions would be handled by separate committees over a 5-year cycle. During the 2018 Sustainable Diet Food Forum hosted by the NASEM, Barbara Schneeman, University of California, Davis, a member of the 2017 NASEM Committee, outlined how sustainability could be addressed using this model.⁵

During the strategic planning phase, the identification of new topics to examine in subsequent DGA cycles and how sustainability fits within the overall DGA purpose statement would be addressed. In the analysis phase, the use of independent technical expert panels to identify data analyses, relevant food pattern models or define sustainability-related research questions for systematic review was recommended. Finally, during the final phase of synthesis and interpretation, the "current" DGA Advisory Committee would synthesize, interpret, and integrate the data, evidence, and studies identified during the analysis phase, developing recommendations in accordance with the appropriate sustainability experts.⁵ This is the similar process by which the "Birth to 24 months" recommendations were developed prior to their inclusion in the current DGAs.

News from FCP Subgroups

Where Do We Go from Here?

The inclusion of sustainability within the U.S. Dietary Guidelines of Americans will continue to be a topic of debate as we move forward in our alignment of personal and planet health. Due to the complexity of the subject, it will be important to have experts across the sustainability platform at the table to establish a framework beyond the time sensitive schedule of any appointed DGA Committee. In reality, the role sustainability plays in future DGAs may not be our biggest issue. When it comes to addressing the health and behavior of our society, we must work together to seek solutions to do better....**and make every bite count.**



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House of Delegates Update

*By: Amy Myrdal Miller, MS, RDN, FAND
2019-2022 FCP Delegate*

Customizing Dietary Guidance to Meet Diverse Needs



During the February 2021 House of Delegates virtual meeting, delegates addressed a single question: **How can the Academy and nutrition and dietetics practitioners support and inform the translation of the Dietary Guidelines for Americans (DGAs) to be applicable to all?**

This topic affects nutrition and dietetics practitioners across all practice areas. The DGAs serve as a foundation for nutrition policies and programs across the United States, many of the programs in which FCP members work in or volunteer their efforts. While USDA develops some consumer resources, such as MyPlate, the agency sees it as the responsibility of health care providers, including Academy

members, to get out the message and develop effective tools and resources. The Academy and its members are positioned to translate dietary guidance sensitively and successfully across all populations.

As food and culinary professionals, we can all play a role in improving the relevance of dietary guidance and recommendations, seeking ways to include foods, recipes, menu items, and messages that resonate with our patients and clients across various ethnic backgrounds, cultures, religions, language preferences, socioeconomic status, and more.

If you have ideas of ways to support and inform the translation of DGAs to be more applicable to all, please share them with other members via our electronic mailing lists and social media channels.

Public Policy Update

*By: Stephanie DeBerry, MS, RDN/LD
2020-2021 Policy and Advocacy Leader*

New Dietary Guidelines for Americans Means New Policies



A new administration means new priorities and proposed legislation. In addition to this, the latest Dietary Guidelines for Americans (DGA) were released on December 29th, 2020. Notably, there were ten Academy members who served on the advisory committee! The DGAs are the foundation for food policy, nutrition education, and nutrition assistance programs in the United States. Updated guidelines create new opportunities for registered dietitians nutritionists (RDN) to advocate for nutrition priorities. As we continue to make strides to promote the newest DGA, it is important that we advocate for, and help shape effective policy that will protect the public and promote evidence-based nutrition practices.

How can your voice be heard?

- **Academy action alerts:** The academy makes it as easy as 1...2...3! Visit the action center on the academy website. Look for emails to alert you of new opportunities!

- **Contact your legislators:** Email, call, or schedule a virtual meeting with your legislator's office. They track every communication so your voice matters!
- **Fill out the FCP Content Expert Survey:** Request for comments will be sent via email. FCP is regularly asked to review proposed legislation/regulations and submit comments related to food, food safety, culinary, and sustainability issues. If you are interested in serving as a member content expert on our policy team, please fill our survey [HERE](#).
- **Reach out to your friendly FCP Policy and Advocacy Leader (me!)** I have an open [zoom] door policy. I'd love to meet you, answer any questions, and get you involved!

In 2021, FCP has submitted comments on both the Voluntary Disclosure of Sesame as an Allergen, and Requirements for Additional Traceability Records for Foods. Thank you to all members who submitted comments! Your voice is important, and I greatly appreciate your willingness to help shape our response.

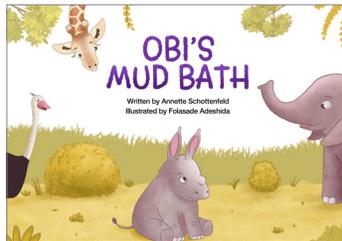
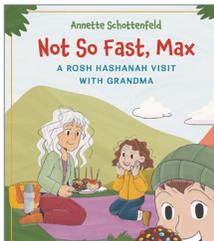
Members on the Move

Compiled by Liz Jalkiewicz, RDN, LDN, Tastings Editor



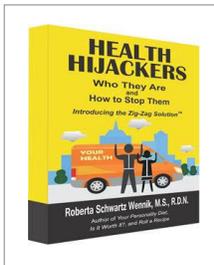
Raeanne Sarazen, MA, RDN

Raeanne pivoted at the onset of the pandemic from teaching live classes at the Boys and Girls Club of Chicago to writing and being featured in a series of online educational cooking videos. Raeanne, along with other Les Dames d'Escoffier Chicago chapter members, including Mary Abbott, Hess, MS, RDN, are hard at work with this video project and accompanying recipe materials. Raeanne continues to work on her forthcoming book, *The Food Professional's Guide to Recipe Writing* (Academy of Nutrition and Dietetics 2022). Some of the videos can be found [here](#).



Annette Schottenfeld, MBA, RDN, CDN

Annette's debut picture book, *NOT SO FAST, MAX: A Rosh Hashanah Visit with Grandma* (2021 Kalanriot Books), recently released. This multigenerational story focuses on creating new traditions as Max and Emily's spunky grandma (Savta) visits from Israel. Included in the book are Savta's apple recipes, which have been passed down from Annette's family. She has also written *OBI'S MUD BATH* (summer 2021 Clear Fork Publishing) which will support worldwide water efforts through Water.org. Follow Annette at: [Twitter](#), [Facebook](#), or annetteschottenfeld.com.



Roberta Schwartz Wennik, MS, RDN

Roberta's soon-to-be released book, *Health Hijackers: Who They Are and How to Stop Them*, is based on the works of world-renowned psychologists and Nobel Prize winner Daniel Kahneman and Amos Tversky. They proved that our living on autopilot, *aka fast thinking* (fast, intuitive, emotional), is hijacking our lives. However, once people learn the unique deliberate, logical, and mindful *slow thinking* approach called the *Zig-Zag Solution™*, they finally can take control of their lives, making healthier, more meaningful decisions. It's a way to guard against the mental glitches that get us into trouble. Roberta is currently looking for reviewers for her book, if interested, please contact her directly at robertawennik@advantagediets.com.



Chef Abbie Gellman, MS, RD, CDN and Julie Harrington, RD

Chef/RDs Abbie Gellman and Julie Harrington are hosting [online courses](#) so you can learn how to better educate your clients with evidence-based science that's translated through food, along with behavior change techniques. Learn how to evaluate clients' cooking skills and confidence in the kitchen to set realistic food-focused behavior change goals. Recipe demonstrations will be included. Recipes and materials will be provided ahead of time and sessions will be recorded if you cannot attend live.

Continued on page 16

Members on the Move

Compiled by Liz Jalkiewicz, RDN, LDN, Tastings Editor

Continued from page 15



Shraddha Chaubey, MS, RDN, CDN/LDN

Shraddha, Founder and President, NutriPledge, LLC, has recently launched monthly [Wellness Meal Plans](#) as part of their services. These meal plans are designed for modern western living lifestyle and suits diverse client needs. They come with many features including, 7-day four-course meal plans, with exact serving sizes for breakfast, lunch, snack, and dinner catering to the clients' calorie preference with five calorie levels offered. Macronutrient breakdown is provided for daily meals and each mealtime. A full grocery list is also included to help kickstart the client's health journey and each recipe comes with a nutrition analysis. Meal plans have monthly themes to tackle a different health condition each month. They are science and evidence-based and comply with national standards like the Dietary Guidelines for Americans. Registered dietitian nutritionists can easily recommend these meal plans to their clients by visiting our [website](#) for more information.



Diana Wind, RDN, CSOWM

Diana Wind, natural foods pioneer, former health food store and restaurant owner-chef, currently hangs her garden hat as an outpatient dietitian at Inspira Health in South Jersey. She also serves as Adjunct faculty at Rowan University, where she assists Libby Tenison MS, RD, CSP, CNSC's and her class of dietetic students. Diana wants to give a shout out to the dietetic students of Rowan's Coordinated Master's Program in Nutrition & Dietetics who have continued to educate others and really thrive during their food service rotations this year, despite the curriculum changes and challenges that took place due to the COVID-19 pandemic.

With FCP \$35 goes a long way

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Tessa Nguyen, RD, LDN, is the founder and principal of [Taste Nutrition Consulting](#). She is a professionally trained chef and registered dietitian. Tessa's work promotes accessible cooking, cultural inclusion and diversity

advocacy within the food and nutrition industries. She champions these efforts in her consulting business as well as on the Board of Directors for [Diversify Dietetics](#). Tessa is currently based in South Korea. Follow along on her YouTube channel [Tessa's Table](#) or [@cheftessard](#).

All three recipes submitted by Manju Karkare, MS, RDN, LDN, CLT, FAND



Manju Karkare, MS, RDN, LDN, CLT, FAND

An Indian Vegetarian meal that fits the 2020-2025 Dietary Guidelines for Americans: It

includes half the plate filled with vegetables and primary source of protein is from low-fat dairy and peas. The dishes listed below are served with fluffy Basmati Rice or Chapati (wheat flatbread), thus including a serving of whole grains.

Cucumber Raita



Serves 4

Ingredients:

- 1/2 English cucumber, peeled and diced (1/2 cup)
- 1 cup Greek non-fat plain yogurt
- 1/2 green chili, cut in half lengthwise
- 1/2 teaspoon ground cumin
- 1/2 teaspoon salt
- 1 teaspoon sugar
- Fresh cilantro for garnish

Method

1. Mix all ingredients and refrigerate. Add chopped cilantro just before serving. Any salad made in this yogurt sauce is "raita". You can substitute cucumber with tomatoes, tomatoes and onion, pineapple or apple. It is a cooling compliment to spicy Indian dishes.

Nutrition Information
(per serving/portion):
Calories: 40/Protein: 6 g/
Carbohydrate: 4 g/Fiber: 0.5 g/
Saturated fat: 0 g/Sodium: 315 mg

Potatoes, Peas and Tomatoes



Serves 4

Ingredients:

- 1 tablespoon oil
- 1 teaspoon cumin seeds
- 1/2 teaspoon turmeric powder
- 1 small green chili, split lengthwise
- 1 small yellow onion, minced
- 4-5 small white potatoes, cut into 1" cubes (1 cup)
- 5 oz frozen petit peas
- 2 Roma tomatoes, cut into 1" cubes
- 1 teaspoon salt

Method

1. Heat oil in a shallow sauté pan on medium heat. Add cumin seeds, cover, let pop. Add turmeric powder. Add green chilies, reduce heat immediately and cover the pan.
2. Once popping stops add minced onion and cubed potatoes and stir well to coat in the seasoned oil. Keep the heat on medium, cover and let the potatoes cook. Stir occasionally.

Nutrition Information
(per serving/portion):
Calories: 110/Protein: 3 g/
Carbohydrate: 16 g/Fiber: 3 g/
Saturated fat: 0.5 g/Sodium: 675 mg

Palak Paneer



Serves 4

Ingredients:

- 5 oz fresh baby spinach (or 10 oz frozen spinach)
- 6 oz block low-fat Paneer, cubed
- 2 garlic cloves
- 1/2" piece of fresh ginger
- 1 small green chili (can use a seeded jalapeno)
- 1 tablespoon oil
- 1/2 teaspoon ground cumin
- 1/2 teaspoon ground coriander seeds
- 1/2 teaspoon salt
- 1/2 lime, cut in half

Method

1. Puree fresh baby spinach (or thawed frozen spinach), garlic cloves, ginger and green chili in a blender.
2. Heat oil in a sauté pan; add Paneer cubes and sauté until lightly brown.
3. Add the spinach puree, ground cumin, ground coriander and salt. Bring to a gentle boil.
4. Squeeze lime halves into the pan. Mix well.

Nutrition Information
(per serving/portion):
Calories: 165/Protein: 10 g/
Carbohydrate: 4 g/Fiber: 1 g/
Saturated fat: 6 g/Sodium: 370 mg

*Photo by [Kanwardeep Kaur](#) on [Unsplash](#)

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Tstretch1633@yahoo.com

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Sarah Martin, MPP, RDN, LRD
sarah.l.vaughn@gmail.com

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msedge@smithedge.com

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elisabethrd@gmail.com

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lm.ali@verizon.net

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sdupraw@eatright.org

FCP Executive Office:
Barb Pyper, MS, RD, SNS, FAND
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