# Career Choices in Business, Consultancy, Health, and Wellness

COURSE: CHAPTER 8

**BOOK: CHAPTER 11** 

- \* Hospitals and extended care facilities have long been the work settings for the largest percentage of dietitians and dietetic technicians; however, other potential career choices are emerging in other settings, partly due to:
  - The creativity in education
  - The changing needs for nutrition information.

- This chapter will discuss two general areas of dietetic practice potential and opportunity:
  - Business & Consultancy
  - Health and Wellness

## Business & Consultancy

Following a career path in business and/or communications has generally been considered a nontraditional choice for dietitians.

- ❖ 32 percent of dietitians work in the for-profit sector:
  - Private practice
  - Owning a business
  - Working with corporations, trade associations, food and pharmaceutical companies, and hotels and restaurants.
  - Negotiated contracts with medical specialty clinics

- \* Realizing the value of dietitians to businesses lead to expanded opportunities:
  - Increase the company's credibility
  - Promote customer health and nutrition
  - Increase the understanding of customer/consumer needs

- \* Food producers, food retailers, and food service establishments take note of what is important to the public and respond by providing products that help meet nutritional and other needs.
- \* Food labeling laws, food safety regulations, and other governmental initiatives are helping to position good nutrition within closer reach of people.



https://ratings.food.gov.uk/



#### Example: Food Standards Agency

The FSA is an "Independent Government Department working across England, Wales and Northern Ireland to protect public health and consumers' wider interests in food." It makes sure that food is safe and what it says it is.

**Example: Food labeling laws** 

Options for obtaining food analysis for a food label:

#### 1. Food Lab

Pros: Accurate nutrition results, useful for heavy-processed foods

Cons: time-consuming, costly (1 food product can cost as much as \$800 dollars), modifying the product requires reanalysis

Throughout the entire process, we are here to answer your questions 7 days-a-week!



\$850.00

ADD TO CART



#### 2. CD-ROM Programs

Pros: More affordable

Cons: mostly complex to navigate, requires to be installed, possible security risk, requires continuous version updating.

#### 3. Web-based Nutrition Analysis Software

Pros: the quickest, most efficient, and cheapest. Usually includes also: allergen statements, nutrient content claims, and several layouts for nutrition facts panel.

## Examples: Computer software



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NB19 is offered in two Professional versions.

NB19 Pro - \$400 This is the basic professional NutriBase software. It supports every feature in the Comparison Chart except for Nutrition Facts Label support for U.S. and Candian Food Labels.

NB19 Pro+ - \$500. This version provides the same abilities of the Pro Edition plus the ability to produce publication-quality U.S. Food Labels and Canadian Food Labels.

## Example: Web-Based analysis

**Nutrition Facts Only** 150 Only \$75 for Similar Products and Minor Changes Includes one Nutrition Facts panel for one size of each food submitted, ingredients list and allergen statement not included. **✓** NUTRITION FACTS INGREDIENTS STATEMENT ALLERGEN SATEMENT FOOD LABEL COMPLIANCE REVIEW **Get Started** 







PAY-AS-YOU-GO

\*225 / Per Label (SKU)

This all inclusive plan is

designed for small businesses and/or the new food

manufacturer who has 10

**EXPERT DIETITIAN CONSULTING** 

\$345 / Per Label (SKU)

Complete data entry and personalized nutrition analysis performed by our Registered Dietitians.

Guided recipe/product entry

Instant nutrition analysis and reporting

Allergen and Ingredient Statements

FDA-approved Nutrition Facts Labels, in all available formats

Unlimited label downloads and printing

- Select -

**Purchase** 

**UNLIMITED LABELS** 

<sup>5</sup>3,250

This cost-effective plan is great for companies with more than 10 products, change their products seasonally and/or want the flexibility of multiformula changes

Guided recipe/product entry

Instant nutrition analysis and reporting

Allergen and Ingredient Statements

FDA-approved Nutrition Facts Labels, in all available formats

Unlimited label downloads and printing

**Purchase** 

Guided recipe/product entry

Instant nutrition analysis and reporting

Allergen and Ingredient Statements

FDA-approved Nutrition Facts Labels, in all available formats

Unlimited label downloads and printing

Purchase

## Career Opportunities

The Dietitians in Business and Communications practice group identifies these job positions:

- Presidents, vice presidents, food service directors, sales managers, and marketing managers.
- Food stylists (<a href="https://vimeo.com/111076177">https://vimeo.com/111076177</a>)
- Researchers
- Consultants
- Software specialists
- Personal/individual grocery shoppers
- In-home nutrition coaches
- Diet delivery programs

## Personal Grocery Shopper



#### IMAGINE...

- · Never standing in long lines again
- · Saving money on your grocery bill
- Spending more time at home with your family doing things you enjoy
- · Saving money on gasoline
- · Avoiding unhealthy impulse buys
- Driving home from work without stopping at the store

#### HOW IT WORKS ....

- Send me your grocery list via email or by telephone
- 2. Together, we arrange a time for delivery
- I do the shopping according to your grocery list
- I deliver the groceries at our prearranged date and time
- You, in turn, reimburse me for the groceries plus a shopping fee

#### SHOPPING FEES...



GROCERY TOTAL UP TO \$150.00 = \$20.00 FEE GROCERY TOTAL \$150.00-\$300.00 = \$30.00 FEE GROCERY TOTAL OVER \$300.00 = 15% OF TOTAL FEES INCLUDE SHOPPING, DELIVERY, AND MILEAGE

(COST OF GROCERIES NOT INCLUDED IN FEE)

For More Information, Call: 123-456-7890 Email: groceryshopper@email.com



## Pros and Cons

| Pros                   | Cons  |
|------------------------|---|
| Challenging work       | Stress  |
| Learning opportunities | Long hours  |
| Creativity             | Fast pace   |
| Fast pace              | A lot of information to absorb                            |
| Flexible scheduling    | Critical responsibility for targeted continuing education |

The dietitian who is <u>flexible</u>, <u>willing to take risks</u>, and is <u>interested</u> in the business world is most likely to succeed.

## Communication

In today's world it is imperative to establish a website and participate in social media in order for dietetic professionals to:

- 1. Enhance their business image
- Complement business advertising
- 3. Attract new client or customers outside the local area
- 4. Start a new business
- 5. Learn more about specific businesses and to build and enhance networks



## Linked in

- 1. <a href="https://www.youtube.com/watch?v=n1bwJn2wyfc">https://www.youtube.com/watch?v=n1bwJn2wyfc</a>
- 2. <a href="https://www.youtube.com/watch?time">https://www.youtube.com/watch?time</a> continue=1&v=UVzyLK 0i7s

## The Consultant Dietitian

#### Why become a consultant?

- \* Many dietitians have found the schedule flexibility and compensation of self-employment attractive alternatives to more traditional positions.
- An entrepreneurial drive is often the impetus for a professional to become a consultant and/or establish a practice.
- Others do so because family or other obligations lead to becoming a consultant for a better lifestyle fit.

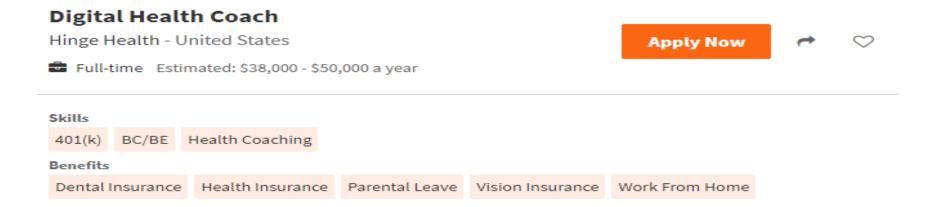
## Becoming a Consultant

The first step is self assessment

Personal characteristics: self-directed, energetic, and action oriented. Previous working experience in dietetics is very important

- Are you a self-starter?
- Are you a risk taker?
- Do you have a positive, friendly interest in others?
- Are you a leader?
- Can you handle responsibility?
- Are you a good organizer?
- Are you able to handle a flexible working schedule?
- Do you make up your mind quickly?
- Can people rely on you?
- Can you handle reversals and downturns in business?

## Examples:



Hinge Health's mission is to improve the lives of people suffering from chronic conditions by digitizing the delivery of care - starting with musculoskeletal health. Our vision is to be the world's most patient-centered Digital Hospital. We're already achieving remarkable outcomes - helping people overcome chronic pain, avoid surgeries, return to work, and get back to doing the things they love. We've raised close to \$37M and our growth shows no sign of slowing.

At Hinge Health, we consider our Health Coaches part of our secret sauce! Our Coaches work with each of our program participants to help them establish a routine with the Hinge Health app, and support them in establishing successful long term habit change around movement and a healthy lifestyle. Each of our Health Coaches are full time M-F employees with benefits.

## Examples:

#### **Dietitians in Home Care**

Better Health • Better Care • Better Value





#### Dietitians: an important role on the home care team

Dietitians working in home care use their skills, professional knowledge, expertise and a client-centred approach to: optimize client nutrition

/or

aa

ge

#### The Facts and the \$2 billion problem

- Most Canadians would prefer to remain in their homes and live as independently as possible. Dietitians can help!
- · Home care saves health system dollars.
- Access to dietitian services through the home care system is inconsistent across Canada — and almost non-existent in some provinces.
- Seniors makeup the majority of home care clients—the average age
  of home care clients in Canada is 78 years. Comprehensive home
  care services including dietitians, are needed to address the aging
  population.

Assess individual nutritional needs

# Health & Wellness Programs

- $\diamond$  A poor diet is a known risk factor for the development of various chronic diseases. This points to the need for programs in health promotion, wellness, fitness, and the prevention and treatment of obesity  $\rightarrow$  Expansion of career options for dietitians.
- However, wellness and health promotion programs were virtually unheard of 30 years ago.
- Also, more specifically, the combination of both sports and dietetics as a career specialty is a relatively recent development

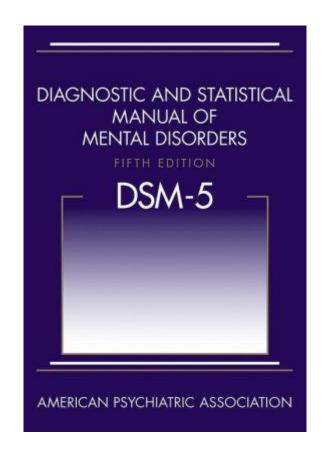
- This section will provide a closer look on three opportunities:
  - Eating disorders
  - 2. Sports Nutrition
  - 3. Cardiovascular Nutrition
  - 4. Wellness & Health Promotion

## 1. Disordered Eating

- In this specialty area, nutrition, physical, and psychological issues are often intertwined with eating behavior such as overeating, chronic dieting, compulsive eating, and binge eating disorders.
- Dietitians working in this area may work in:
  - Residential treatment centers
  - Medical and psychiatric hospitals
  - Outpatient clinics
  - University health centers
  - Private practice

## 1. Disordered Eating

- ❖ The DSM-5 (Diagnostic and Statistical Manual of Mental Disorders 5<sup>th</sup> edition) provide diagnostic criteria for anorexia nervosa, bulimia nervosa, and other eating disorders.
- The DSM-5 was established by the American Psychiatry Association
- Can be used for the assessment by deciding whether the individual meets the diagnosis for a mental health disorder



### Anorexia Nervosa

- The DSM-5 for anorexia nervosa include:
- A. Restriction of energy intake relative to requirements leading to a significantly low body weight in the context of age, sex, developmental trajectory, and physical health. Significantly low weight is defined as a weight that is less than minimally normal or, for children and adolescents, less than that minimally expected.
- B. <u>Intense fear of gaining weight</u> or becoming fat, or persistent behavior that interferes with weight gain, even though at a significantly low weight.
- C. <u>Disturbance in the way in which one's body weight or shape is</u> <u>experienced</u>, undue influence of body weight or shape on self-evaluation, or persistent lack of recognition of the seriousness of the current low body weight.



## Anorexia Nervosa

#### **Remission**:

- In partial remission: After full criteria for anorexia nervosa were previously met,
   Criterion A has not been met for a sustained period, but either Criterion B or C is still met.
- In full remission: After full criteria for anorexia nervosa were previously met, none of the criteria have been met for a sustained period of time.

## Anorexia Nervosa

#### **Severity:**

The minimum level of severity is based, for adults, on current body mass index (BMI). The level of severity may be increased to reflect clinical symptoms, the degree of functional disability, and the need for supervision.

- A. Mild: BMI > 17 kg/m2
- B. Moderate: BMI 16-16.99 kg/m2
- C. Severe: BMI 15-15.99 kg/m2
- D. Extreme: BMI < 15 kg/m2

## MNT for Anorexia Nervosa

#### Calorie prescription

Initially 30-40 kcal/kg/day. Higher requires careful assessment. This can be met with whole foods, supplements, or tube feeding

This is followed by a progressive increase in calories (100-200 kcal increment per day) to promote controlled weight gain

Calorie prescription can be increased to 70-100 kcal/kg/day (continuously monitor patient)

The final phase is weight maintenance phase (40-60 kcal/kg/day for adults)

## MNT for Anorexia Nervosa

#### Macronutrient Intake

Protein: 15-20%, promote high biologic value sources

CHO: 50-55% (decrease in cases of hyperglycemia or refeeding syndrome symptoms)

Fat: 30%, include essential fatty acids

#### Micronutrient Intake

100% RDA multivitamin/mineral supplements is recommended. Continuously assess patients for additional needs of any micronutrient.

## MNT for Anorexia Nervosa

Energy Density

Promote intake of energy-dense foods and drinks

Aim for a DEDS >= 1.

| Example (DEDS)                  |      |  |
|---------------------------------|------|--|
| Food (100 grams)                | Kcal |  |
| Broccoli, raw                   | 34.0 |  |
| Egg, whole, cooked, hard-boiled | 155  |  |

#### Diet Variety

Promote intake of a wide variety of foods and beverages within all food groups. With a focus on complex carbohydrates, energy dense beverages, and added fats.

## Bulimia Nervosa

#### DSM-5 Criteria:

- A. Recurrent episodes of binge eating: 1. Eating in a discrete amount of time an amount of food that is definitely larger than what most individuals would eat in a similar period of time under similar circumstances. And a sense of lack of control over eating during an episode.
- Recurrent inappropriate compensatory behavior in order to prevent weight gain, such as self-induced vomiting; misuse of laxatives, diuretics, or other medications; fasting; or excessive exercise.
- C. The binge eating and inappropriate compensatory behaviors both occur, on average, at least once a week for three months.
- D. Self-evaluation is unduly influenced by body shape and weight.
- E. The disturbance does not occur exclusively during episodes of anorexia nervosa

## Bulimia Nervosa

#### **Remission:**

In partial remission: After full criteria for bulimia nervosa were previously met, some, but not all of the criteria have been met for a sustained period of time.

In full remission: After full criteria for bulimia nervosa were previously met, none of the criteria have been met for a sustained period of time.

## Bulimia Nervosa

#### **Severity:**

The minimum level of severity is based on the frequency of inappropriate compensatory behaviors (see below). The level of severity may be increased to reflect other symptoms and the degree of functional disability.

- A. Mild: An average of 1-3 episodes of inappropriate compensatory behaviors per week
- B. Moderate: An average of 4-7 episodes of inappropriate compensatory behaviors per week
- C. Severe: An average of 8-13 episodes of inappropriate compensatory behaviors per week
- D. Extreme: An average of 14 or more episodes of inappropriate compensatory behaviors per week

## MNT for Bulimia Nervosa

Caloric Prescription

If RMR appears normal, aim for the DRI for energy

If RMR is decreased, start at 1500-1600 kcal/day. Increase in 100-200 increments until DRI is achieved

Avoid low calorie diets

#### MNT for Bulimia Nervosa

Macronutrient Intake

Protein: 15-20%, promote high biologic value sources

CHO: 50-55%, provide insoluble fiber in case of constipation

Fat: 30%, include essential fatty acids

Micronutrient Intake

100% RDA multivitamin/mineral supplements is recommended. Avoid iron supplements in case of constipation

#### MNT for Bulimia Nervosa

Energy Density

Provide a range of energy densities. Aim for an overall diet with DEDS of 1.0

Diet Variety

Promote a wide variety of food and beverages within a food group

# Binge Eating Disorder

- \* Recurrent episodes of binge eating: Eating, in a discrete period of time an amount of food that is definitely larger than most people would eat, and a sense of lack of control over eating during the episode
- \* The binge eating episodes are associated with three or more of the following:
  - eating much more rapidly than normal
  - eating until feeling uncomfortably full
  - eating large amounts of food when not feeling physically hungry
  - eating alone because of feeling embarrassed by how much one is eating
  - feeling disgusted with oneself, depressed or very guilty afterward
- Occurs, on average, at least once a week for three months
- \* Binge eating not associated with the recurrent use of inappropriate compensatory behaviours

## Pica

Persistent eating of non-nutritive substances for a period of at least one month.

The eating behaviour is not part of a culturally supported or socially normative practice.

# 1. Disordered Eating

- The dietitian educates the client regarding sound eating practices combined with physical exercise and other treatment modalities.
- Clients are encouraged to share thoughts and feelings about food, weight, and activity as well as stress management.
- The dietitian needs counseling skill.

# 2. Sports Nutrition

- 1. Sports medicine
- Rehabilitation clinics
- 3. Professional athletic teams (high school, the Olympics, colleges and universities)
- 4. Fitness centers, private clubs, and corporate fitness programs
- 5. Professional sports teams to enhance the player's performance. A few professional athletes have employed personal dietitians
- 6. Acute care facilities
- 7. Writing and developing nutrition education materials
- 8. Speaking and/or writing for the media
- Developing centers and mobile units that go to elementary schools or other sites



# 2. Sports Nutrition

- \* As noticed earlier, the duties and work settings for sports dietitians are many and varied.
- Generally, these opportunities require irregular work hours and the need to frequently travel
- How can dietitians increase their education and expertise in this field?
  - 1. Advanced education with a thesis focus on a topic related to sports nutrition
  - 2. Acquiring continued learning in exercise physiology, counseling psychology, or business administration
  - 3. Others?

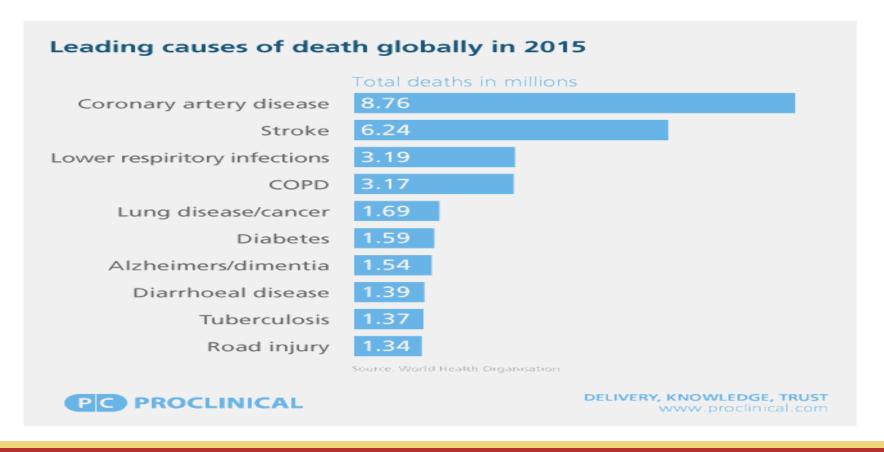
# 2. Sports Nutrition

Table 11-1. Clinical Concerns Commonly Presented to a Sports Nutritionist

| Allergies                          | Diarrhea   |
|------------------------------------|--|
| Alcohol addiction                  | Gastric reflux                                       |
| Amenorrhea                         | Gout   |
| Anemia                             | Headaches  |
| Anorexia                           | Hypoglycemia   |
| Arteriosclerosis                   | Hyperlipidemia                                       |
| Binge eating                       | Hypertension   |
| Body image distortion              | Menopause  |
| Bulimia                            | Obesity/overweight                                   |
| Cancer (prevention, recovery form) | Osteoporosis   |
| Chronic fatigue                    | Pregnancy/perinatal nutrition                        |
| Constipation                       | Stress fractures                                     |
| Diabetes                           | Surgery (special nutritional pre- and postoperative) |

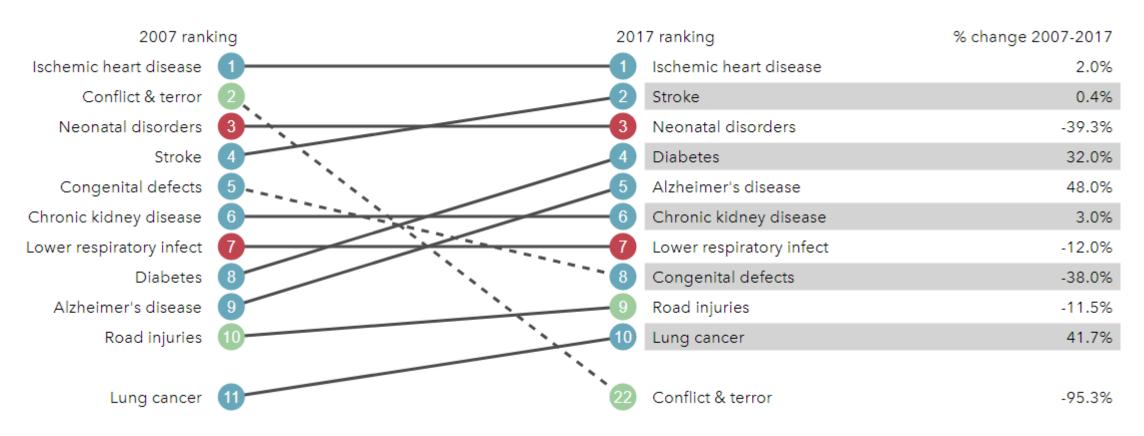
### 3. Cardiovascular Nutrition

Heart disease remains the number one cause of death worldwide



#### 3. Cardiovascular Nutrition

2017 data of top 10 causes of death in Palestine (<a href="http://www.healthdata.org/palestine">http://www.healthdata.org/palestine</a>)



#### 3. Cardiovascular Nutrition

Most acute-care facilities whose services include open-heart surgery have cardiac rehabilitation programs, which offer nutrition counseling and education as part of the program. This includes a focus on risk factor reduction, as well as education of the patient and family.

#### Areas of employment:

- Lipid research clinics & University research
- Pharmaceutical companies that market products to cardiovascular patients.
- Preparation of educational materials.
- Private practice

# Opportunities for Continued Learning

https://www.ce.todaysdietitian.com/culinarypart1recorded

#### 4. Wellness & Health Promotion

Dietitians in private practice and consultation often contract with industry groups, health clubs, gyms, medical centers, rehabilitation units, and communications as in media contacts and educational materials.

Corporations and large institutions initially began providing worksite wellness programs for their employees because of improved employee health, increased productivity, and decreased absenteeism and lost work days due to illness. As

#### 4. Wellness & Health Promotion

#### Programs can include:

- 1. On-site fitness centres
- 2. Smoking cessation programs
- 3. Transit options
- 4. Paramedical services
- 5. Lunch and healthy snacks
- 6. Naps
- 7. Wellness challenges





## Practice Groups

- Business:
  - Dietitians in Business and Communications
  - Management in Food and Nutrition Systems
  - Food and Culinary Professionals
  - Nutrition Entrepreneurs

- Wellness:
  - Sports, Cardiovascular, and Wellness
    - Nutrition
  - Behavioral Health Nutrition
  - Weight Management.

#### Definitions

Anorexia nervosa. An eating disorder characterized by a preoccupation with dieting and thinness that leads to excessive weight loss.

<u>Bulimia nervosa</u>. An eating disorder involving frequent episodes of binge eating followed by purging, also leading to excessive weight loss.

<u>Cardiovascular nutrition</u>. Application of medical nutrition therapy for those with heart and blood vessel conditions or to prevent the diseases.

Disordered eating. Abnormal eating patterns.

<u>Health promotion</u>. Education and preventive measures directed toward healthy populations to foster wellness and prevention of disease.

Networking. Activities directed toward making connections with others through varied contacts.

<u>Sports nutrition</u>. The area of nutrition specific to the needs of those who participate in sports activities.

Wellness. State of optimal health and the absence of disease.